

# Living with Obesity:

Men's experiences of losing and gaining weight  
and the implications for policy and services



University of Essex

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# Foreword

At Healthwatch Essex we are always at the forefront of what matters to our citizens, carrying out research and engagement on contemporary real-life issues impacting our communities. This Living with Obesity report serves as such an example and is incredibly timely following the publication of the UK Government's Tackling Obesity strategy. Although focusing on men's experiences of living with obesity, much learning could impact weight management services and policy for women too. Considering the impact COVID-19 and the subsequent lockdowns have had on our society, a focus on men's health and obesity are current and vital.

Throughout the analysis of the gathered data, Dr John Day and Sarah Krauze use their vast experience in lived experience research to draw attention to key themes and challenges, identifying that sustained weight loss depends on more than diet and exercise. Aspects of more engaging services and favourable experiences amongst men include emotional support and doing purposeful weight loss activities together, focusing more on 'how are you?' rather than 'how much weight have you lost?' The impact of how various stages of a man's life can affect weight gain and the importance of identity and how weight cycling can evoke extreme shame in some of the participants illustrate the damaging consequences this can have on a person's wellbeing. Here we see the role played by masculinity as creating socially constructed constraints to accessing services.

Drawing attention to societal issues is fundamental to our work at Healthwatch Essex, such as the impact of the current obesogenic environment on weight management experiences. This report builds on Healthwatch Essex's expertise in lived experience research to provide an insightful and well-informed evidence base for improving weight management services and our understanding of living with obesity more generally.

Samantha Glover

A handwritten signature in black ink, appearing to read 'S. Glover', with a stylized flourish at the end.

CEO, Healthwatch Essex

## **Acknowledgements**

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The quality of the report has been significantly improved by the School of Health and Social Care at the University of Essex through the honorary contract awarded to John that allowed us to draw upon peer-reviewed literature to design the study, guide data collection and analysis, and make rigorous sense of the findings. In this respect we are hugely grateful to Professor Ewen Speed and Úna Speed.

Finally, John would like to say thank you to Lucy, for putting-up with him during the data analysis and writing stages of the research process.

# Contents

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<b>Introduction</b>	5
Obesity, social transformations and integrating local systems	5
Obesity, experience-based research and gender	5
Report overview	6
<b>The Study</b>	8
<b>Findings and Discussion</b>	13
<b>'I'll help you, you help me': Men's experiences of weight loss</b>	13
Social support	13
Service type and the structuring of social support	14
Purposeful collective action: the bespoke social support of practicing weight loss strategies together	17
Social support and weight loss in men	19
Implications for practice	20
<b>Battling Life Course Expectations &amp; Unanticipated Events: Men's experiences of weight gain</b>	21
The long-term consequences of a sporty identity during childhood	21
Struggling to negotiate unanticipated life events	22
Increased responsibility, status and pressure in work and family life	25
Negotiating the life course and weight gain	29
Work life, employment circumstances and weight gain	30
Implications for policy and practice	30
<b>Rapid Fixes, Long-term Failure, &amp; Identity Adjustment: Men's experiences of weight cycling</b>	
Individual weight loss practices	33
Commercial weight management programmes	34
Pointing the dial: The blame game of weight regain and identity adjustment	37
Experiences and lived consequences of weight cycling	40
Implications for policy and practice	40
<b>Conclusion</b>	
Implications for policy and services	42
Study limitations and future research	43
<b>References</b>	44
<b>Glossary</b>	46

# Introduction



## ***Obesity, social transformations and integrating local systems***

Obesity, classified amongst adults as a Body Mass Index (BMI) equal to or higher than 30 kg/m<sup>2</sup> and defined as 'abnormal or excessive fat accumulation that may impair health' is a major risk factor in increasing the likelihood of heart disease, stroke, diabetes, osteoarthritis and some cancers (World Health Organization (WHO), 2018). Around 28% of adults in England were living with obesity in 2019 (NHS Digital, 2020), although, as a global health concern, experiences of living with obesity can be found in most areas of the world (WHO, 2017). The World Health Organization (2018) estimate, that in 2016, 13% of the world's total adult population were living with obesity. These figures indicate the prevalence of obesity has almost tripled in the past 40 years (WHO, 2018). Regarded as a mostly preventable condition, initiatives and policies to reduce the prevalence of obesity have been devised and implemented within local, national and global contexts (Kime et al., 2018; Public Health England (PHE), 2019; Suffolk and North East Essex Integrated Care System, 2019; WHO, 2004).

In 2007, The UK Government's Office for Science (GOS) *Foresight - Tackling Obesities* report highlighted that changes in work patterns, transport and food production as well as technological advances over the previous 50 years represent social transformations that have constrained and structured people's everyday choices in ways conducive to the increased onset of obesity across the UK. The report also strongly rejected the stigmatised and short-sighted assumption that implies people living with obesity have become increasingly greedy, lazy and lacking in character traits such as self-discipline over the past five decades. Instead, the notion of 'passive obesity' is used to describe how weight gain has become inevitable for many people in the context of contemporary living conditions, especially for those belonging to disadvantaged socio-economic and ethnic minority groups (GOS, 2007: 5). The report claimed to draw on a 'scientific evidence base from across a wide range of disciplines' to identify solutions which might reverse the factors behind obesity trends in the UK (GOS, 2007: 6). However, very little, if any insight from qualitative social scientific research was included, a strange omission, given the subsequent report refers to 'reality' and the need for more 'practice-based evidence' (GOS, 2007: 5, 137). The types of phenomena best and most often explored via qualitative approaches (Brinkmann & Kvale, 2015; van Manen, 2014).

In contrast to the traditional global prevention

and reduction messages surrounding obesity that aim attention at individuals to take greater responsibility for health-related behaviours (WHO, 2004), *Tackling Obesities* called for multi-sector action within and beyond the field of public health, led by a society-wide paradigm shift in thinking about obesity (GOS, 2007). In 2020, the UK Government's *Tackling Obesity* strategy, sparked by the increased likelihood of admission to hospital and intensive care and mortality amongst people living with overweight or obesity who had contracted COVID-19, also recognised that changes are needed to the everyday living environment in the UK to reduce the number of adults living with obesity. In this vein, Public Health England (2019) have started to act upon a more integrated whole systems approach to obesity by piloting and testing ways of working that require collaborative participation from entire local systems, including counties, unitary authorities, districts and boroughs. In turn, and as part of this strategy, local health and social care partnerships have continued to recognise and emphasise the powerful impact lived experiences have upon the level of public involvement in services and outcomes for service users (Suffolk and North East Essex Integrated Care System, 2019).

## ***Obesity, experience-based research and gender***

Alongside the move toward a system-wide integrated approach to obesity and the acknowledgement that people's health-related options, choices and behaviours are constrained by structural forces, there has been a steady growth in qualitative experience-based obesity research informed by the interpretive paradigm. Such studies have investigated the hegemonic fat discourse of irresponsibility and inferiority (Gailey & Harjunen, 2019), being held prisoner by food while trapped between conflicting pressures to consume more and be a healthy citizen (Young & Burrows, 2013), and how the emotional distress experienced by living with obesity extends to every aspect of one's private and social life (Haga et al., 2019; Owen-Smith et al., 2014). However, qualitative studies which explicitly lay claim to getting at participants' lived experiences are mostly dominated by women's experiences, which led Owen (2012), around a decade ago, to describe this area of knowledge as gynocentric. Although not always designed with the intention of collecting lived experience data specifically, there exists a growing body of in-depth qualitative studies of men's perspectives of living with obesity and overweight. Of note here, is research on men's understandings of BMI (Monaghan, 2007), talk

about physical activity, weight, health and slimming amongst men living with obesity and overweight (Monaghan, 2008), the celebration of obese bodies amongst gay men (Gough & Flanders, 2009), and how 'big' men protect themselves from subsequent threats to their masculinity by suggesting bodyweight and fatness are of greater concern for women (Monaghan & Malson, 2013). Qualitative studies pertinent to the purported health risks for men living with obesity and overweight have found men tend not to think preventatively about their weight or health, and then delay seeking support once becoming overweight (Lewis et al., 2011), yet are persistently anxious about the potential health-related consequences of obesity regardless of whether they engage with weight management services or not (Elliott et al., 2020).

A more nuanced interpretation of such issues has been presented by Monaghan and Malson (2013), who make connections between government-endorsed anti-obesity campaigns and the complexities experienced amongst men seeking to lose weight by attending weight management programmes where bodies are viewed and worked upon through feminised dietary practices and a corresponding discourse characterised by frailty and sickness. As 'excessive' fatness and unwanted bodyweight have been long defined as feminist issues, men find themselves in danger of having their identities spoiled by being turned into women if they engage with most types of weight management service, and dietary strategies more generally (Monaghan & Malson, 2013). Yet, the alternate of avoiding such contexts leaves men in the predicament of living in a type of body that has come to symbolise failed neoliberal citizenship (Monaghan & Malson, 2013).

It is within this dilemma faced by men living with obesity, between their supposed pathologised failings as citizens due to their body size, of which they are frequently reminded by government-supported anti-obesity campaigns, and the prospect of remedying this lived oppression through engagement with feminine dietary practices and female-dominated support groups, that we conducted our study. This is not to deny that the grand narrative of the 'obesity epidemic' and experiences of fat stigma are predominantly feminist issues (Gailey & Harjunen, 2019), or that living with obesity is any worse for men than women, but to further explore and understand the less studied, complex scenarios faced by men living with obesity. Moreover, the number of adult men living with obesity in the UK, which stood at 27% in 2019, is becoming increasingly commonplace, as this figure has risen from around 13.2% since 1993 (NHS Digital, 2020).

The main aim of our research was therefore to study men's experiences of living with obesity in both an everyday sense, where they are exposed to the symbolic persecution of being labelled a failed citizen, and their perspectives and stories of engaging with and resisting the primarily feminine arena of weight management practices. To do so, we focused our attention on experiences of losing and gaining weight amongst men currently living with obesity, with the intention of obtaining insight from men who have varied experiences of practicing weight management strategies in terms of type and amount. By designing the study in this fashion, we sought to generate implications for policy and services that are sensitive to the experiences of being a man living with obesity. Accordingly, our findings are grounded in men's experiences, more so than being guided by existing policy agendas.

### ***Report overview***

In the following chapter, we outline the experience oriented approach employed to recruit the research sample and collect and analyse the data. This is then followed by the findings and discussion section of the report, which is broken-up into three chapters on men's experiences of weight loss, weight gain, and weight cycling. At the end of each findings chapter, we compare and situate our findings within relevant peer-reviewed literature, before detailing the main implications for policy and services. We then close the report with a conclusion that summarises the implications for policy and services, in addition to the limitations of our work and potential directions for future research.





# The Study

To study the weight loss and weight gain experiences of men living with obesity, we recruited and interviewed 29 adult men with a Body Mass Index (BMI) of 30 kg/m<sup>2</sup> or more. Within the bounds of these purposive inclusion criteria (Mason, 2018), we sought variety in terms of the types of context and extent to which participants had attempted to lose weight, with the intention of generating crucial insights for policy and service provision (see *Figure 1*). For these reasons, we recruited participants with:

- experience of involvement in public funded weight management services and programmes
- experience of involvement in commercial weight management programmes
- experience of involvement in football-based weight management programmes
- no prior experience of accessing weight management services

In addition to these experiences, we were also aware that the majority, if not all participants, we recruited would bring a further dimension of weight management experiences to the collected data, those of individual weight loss practices such as dieting and physical activity. Given the prevalence at which people living in contemporary society regularly participate in these individual practices to manage their weight regardless of BMI, gender or prior experience of weight loss services, this was not something that could be ‘accounted for’ within the sample but would inevitably embed itself throughout the data by way of participants living in a weight-conscious society. Overall, this is a sampling strategy that purposively focuses on a population who share specific characteristics relevant to the topic of study with a view to producing data representative of, and findings generalisable amongst, the experiences of other people in this population (Gobo, 2004; Mason, 2018; Ritchie et al., 2014).

We also sought the voices of men involved in the body positivity movement by reaching out to body positivity counsellors but received no response. Through our existing health and social care contacts we got in touch with women involved in body positivity networks based in the East of England who pointed us in the direction of a male fat activist residing in Essex. Unfortunately, the invitation we extended to him to take part in the study was met with an unhelpful response.

To recruit participants to the study we spoke with relevant health and social care commissioners in Essex and contacted personnel involved in delivering public-funded and commercial weight management services and programmes across the East of England. Although the work of Healthwatch Essex usually takes place within the borders of Essex, for this study we garnered interest from our bordering Healthwatch partners

and opened-up the call for participants to include those who reside in the unitary authorities of Suffolk, Southend, Thurrock, Hertfordshire, Cambridgeshire and Peterborough. We also encouraged participation in the research via our own social media channels and those of our bordering Healthwatch organisations. Through our initial engagement with commissioners and service providers we made the most of the opportunities offered to us to immerse ourselves within the social context of weight management at regional and national levels. As a result, JD (John) spent 16 hours observing the delivery of football-based weight management programmes for men across the East of England and two hours observing the delivery of a public-funded weight management programme in Essex attended by eight women and one man. JD also engaged in a two-hour one-to-one meeting with a male commercial weight management consultant working in Essex in the hope of spending some time in this context. The consultant agreed to this in principle, but we did not receive any further correspondence from the consultant after he went back to his employers to gain official approval. JD also engaged in five one-to-one meetings with commissioners and service providers working in Essex, Suffolk and across the UK with a vested interest in weight management services and obesity research to gain a better practical understanding of current service provision and policy agendas, and to receive feedback on the proposed research design. These initial meetings took place prior to the outbreak of COVID-19 and the subsequent lockdowns.

Following the implementation of lockdown measures, most of the weight management services JD had previously engaged with adapted their services to meet these unchartered circumstances by switching to a remote format, via video and phone calls. After this transition period, JD picked-up on the initial conversations with weight management service providers and commissioners, who agreed to promote the study amongst their networks, service users and other potential participants. One service provider allowed JD to attend the beginning of four online weight management group sessions to offer service users the opportunity to take part in the study. Two of these four sessions were with male-only weight management groups. To further immerse ourselves in the current policy environment of weight management services and obesity-related public health concerns, we also engaged in meetings hosted by the All-Party Parliamentary Group on obesity. JD and SK (Sarah) attended the March 2020 meeting in-person prior to the first COVID-19 lockdown restrictions and, following lockdown restrictions, JD continued to attend online group meetings. JD also attended the South East Essex Obesity Summit organised by NHS Castle Point and Rochford CCG

(Clinical Commissioning Group) in December 2019. A football-based weight management programme also admitted JD into their official WhatsApp group chat, which forms part of the service, as a silent observer.

**Figure 1**

Participant experiences of weight management strategies and self-reported BMI at time of interview

Participant Pseudonym	Public Funded Weight Management Services and Programmes	Commercial Weight Management Programmes	Football-based Weight Management Programmes	Individual Weight Loss Practices (Diet/Exercise/Calorie Counting)	BMI (Body Mass Index) (kg/m <sup>2</sup> )
Barry		X		X	38.0
Hugo	X	X		X	38.6
Peter	X			X	41.8
Geoff	X	X	X	X	60.0
Wayne	X			X	32.4
Andy	X				48.5
Harry	X	X		X	36.4
Shane	X			X	30.7
Hayden	X	X		X	43.3
Stuart	X	X	X	X	38.7
Chris	X				32.1
Callum				X	37.2
Tyler			X		31.0
Dean	X	X		X	31.0
Glenn	X	X	X	X	40.7
Will		X	X		33.9
Paul		X	X		30.4
Tim			X	X	40.0
Sam			X	X	35.4
Gareth		X	X	X	31.0
Lee					58.4
Ben	X	X		X	41.0
Frank		X	X	X	32.7
George		X	X	X	32.4
Brett			X	X	39.5
Matt		X	X	X	40.8
Mark	X			X	43.9
Elliot	X	X		X	51.0
Steve			X	X	33.0

After receiving ethical approval from Essex County Council in February 2020 to conduct the study, the entirety of data collection took place following the outbreak of COVID-19. In-depth qualitative data were collected using a semi-structured interview guide that focused on men's experiences of gaining and losing weight, which functioned as a prompt for interviewees to provide detailed insights regarding their experiences of living with obesity and gaining and losing weight. We employed a qualitative approach with a view to gaining an understanding of the context in which the men experienced such phenomena. A contextual understanding is valuable as it produces data that highlights the interweaving of human agency and social structure within people's experiences and negotiations of the world (Brinkmann & Kvale, 2015). In this study, by the contextualised interplay of agency and structure we mean the individual experience of being a person

living with obesity within an obesogenic society that simultaneously shames 'fat people' as a self-inflicted public health concern. JD approached the interviews as a type of knowledge production from the position of both a 'traveller' and a 'miner' (Brinkmann & Kvale, 2015: 57-59). During the interviews, the intention was to attentively explore the lived world as described and understood by participants in their own words. Then, during analysis of the interview data, focus shifted to rigorously unearthing the essential meanings of participant's described encounters with the lived world. Due to social distancing measures, interviews took place through each participant's choice of a phone or video call. As a result, 27 of the interviews were conducted via telephone and two were conducted via video call. In total, 28 hours and 30 minutes of interviews, from 30 minutes to 1 hour and 48 minutes in duration, were collected and transcribed verbatim.

While the primary focus of our analysis was on the qualitative data generated through the interviews, each participant also completed a survey that involved providing their Body Mass Index or height and weight at the time of the interview and demographic information of age, disability, highest level of education, occupation, employment and marital status, caregiving responsibilities, ethnicity, religious beliefs and the postcode area in which they reside. The reasoning behind collecting this information was to give readers of this report an overview of the participant sample upon which our analysis is based (see *Figure 2*).

The identification and analysis of themes from the interview transcripts were guided by Gadamer's (2004) interpretive philosophy of translations between particular experiences and a whole understanding of the phenomenon under investigation. Therefore, for the purposes of our analysis, we used each transcript to make interpretive movements between particular experiences and a whole understanding of losing and gaining weight amongst men living with obesity. We did this by comparing the men's experiences evident in each transcript with our understandings of obesity and weight management derived from i) our immersion into the contexts of weight management services; ii) obesity as a public health issue; and iii) published findings from relevant peer-reviewed studies. In practical terms, JD read each transcript as it became available, then, following the completion of data collection, each transcript was re-read in full and references to weight loss, weight gain and weight cycling were highlighted to extract the data set from the data corpus (Braun & Clarke, 2006). JD then revisited and coded the data set to illustrate participant's descriptions and explanations of their weight loss, weight gain and weight cycling experiences. These codes were then organised into themes built around causes, consequences and explanations of weight gain, loss and cycling as expressed by participants. In the interests of quality assurance, SK also repeated these steps independently with six randomly selected transcripts. JD and SK then met to discuss and scrutinise the identified themes. The purpose of this comparative discussion was not to simply check the 'inter-rater reliability' of our respective interpretations of the data, but to add interpretive richness and further rigorous depth to the analysis. In deciding which themes should take prominence over others in the final written report, we prioritised the descriptions and explanations of participants which accounted for, integrated and refuted various elements of particular experiences voiced by other participants, and thus made for a more comprehensive whole understanding (Gadamer, 2004). As a result of this analysis, we invite readers to judge the quality of the findings and implications presented below in terms of inferential generalisation (Lewis et al., 2014) to the experiences of other adult

men in the UK currently living with obesity. Given the demographic characteristics of our sample, there is also potential for some degree of representational generalisability. This is strongest in relation to those of various ages and socio-economic positions, but considerably limited in terms of ethnicity.

**Figure 2**

Research Sample Demographics

Demographic		Frequency
Age	20-29 years	3
	30-39 years	3
	40-49 years	10
	50-59 years	7
	60-69 years	3
	70-79 years	3
Disability	Yes	4
	No	25
Level of Education	University	10
	Further Education	10
	School	6
	Other	3
Occupation	Managerial, Administrative, Professional	3
	Intermediate	14
	Routine, Manual	4
	Long-term unemployed	5
	Retired	3
UK Postcode Area	CB11	1
	CM19	1
	CM22	1
	CO3	1
	CO4	1
	CO5	2
	CO12	2
	IP4	1
	IP9	1
	IP11	3
	RM15	1
	RM16	4
	RM18	1
	NR33	1
	SS0	2
	SS7	2
SS8	1	
SS9	2	
SS12	1	
Area of Residence	Urban	23
	Rural	6
Dependent Children	Yes	18
	No	11
Relationship Status	Married	20
	Cohabiting	1
	Separated	3
	Divorced / Dissolved	1
	Widowed	1
	Single	3
Ethnicity	White: British	27
	White: Gypsy / Irish Traveller	1
	White: Irish	1
Religion	Christian	15
	None	14

## Chapter 1

# **'I'll help you, you help me':** Men's experiences of weight loss



## Findings and Discussion

In this section of the report, we discuss the findings of the study in the form of three chapters on men's experiences of i) weight loss, ii) weight gain, and iii) weight cycling. At the end of each findings chapter, we compare and situate our findings within relevant peer-reviewed literature, before detailing the main implications for policy and services.

### 'I'll help you, you help me'

Social support, feelings of healthy embodiment and empowerment, fear of and encounters with poor health, entry into fatherhood, and dieting as a springboard were central to experiences of losing weight reported by interviewees. In this chapter, we focus specifically on the significance of social support, the factor most commonly cited within participants' weight loss experiences. By doing so, we pay attention to the men's shared and gendered experiences of attending weight management programmes, which were characterised by more and less useful types of social support.

### Social support

Regardless of services accessed or weight management strategies employed, instances of weight loss, and especially sustained weight loss, were always connected with social support in one way or another. For Sam, having someone available to talk to is crucial to losing weight, which was proving difficult within the context of the COVID-19 pandemic and subsequent lockdown,

*After this COVID-19 thing is over I would be begging to be put back on the first 12 weeks [of the programme] again because my weight has gone up through not playing football... it's that kind of support that I'll need to be able to start losing weight again... just having someone to talk to is really important.*

Sam went on to suggest that the social support offered at the football-based weight management programme he attended was as important as the central weight loss strategy of playing football, as a fundamental reason for continuing to engage with the programme,

*The first two weeks... I didn't like it at all I just found it really difficult but that was the depression, that was the sort of cycle I was in. Then all of a sudden... I lost a bit of weight... people around me were supporting me, because you quickly become, in any team sport, you become teammates, you have to... it wasn't just about playing football it was about 'oh*

*well done with your eating' and 'well done for losing weight'... that support that I just didn't have before... and it worked. It was working really well.*

Furthermore, accessing social support at this specific programme is not restricted to the one hour each week when men meet to be weighed and play football, as through the programme's WhatsApp group, support from fellow service users, coaches and nutritionist is readily available. Social support through these means not only replicated the type of support experienced through attending the weekly session, but developed further dimensions and became a social environment of regular support in its own right, which extended beyond the 12 weeks of the programme,

*It's changed, it's evolved. When it first started, it was just about making sure people turned up and did their food stuff... then when we moved on to phase two, because phase one is where you do all the food stuff, the diaries. That's the 12-week program, I was the first group who did that and what we wanted to do was we wanted to still play football... we wanted to use the football to continue to lose weight. It kind of felt like an opportunity to do something and keep doing it and get a benefit from it. So, the first WhatsApp group was all about, 'don't forget your food diaries', 'are you weighing yourself?', etc. Then it moved onto, 'who wants to play next Tuesday?...' it then became a social thing. When it started the only thing, socially, was jokes... it then became a talking point about what happened at the match, 'oh, you scored a great goal', 'I scored a goal on you', etc. This is why I think it works so well. (Sam)*

The profound impact of social support upon weight loss is probably best illustrated by George, who was involved in a football-based weight management programme coordinated by a different service provider than the one attended by Sam. Despite a marginally different structure to the service, the WhatsApp group carried a similar level of significance within George's experiences of losing weight,

*There is a really good support group... within that an incredibly active WhatsApp group. So, if I pose a question on there, Tom, who obviously by trade is a dietician, which is quite handy, will normally reply within a day or so, but other guys will reply straight away. Mark, who runs MAN v FAT, is*

*a member with us... he's straight on it, probably within about half an hour he responds. But with Tom especially you sort of get a lot of really good specialist advice. I had a time where I was struggling with breakfasts and stuff like that, had a chat over WhatsApp with Tom and all of a sudden he comes up with some really good answers... comes straight back with some ideas and some recipes. So, although we haven't been meeting, we have been doing it virtually all the way through [lockdown].*

Despite not being able to access the football-based weight management programme in-person or participate in football as a weight loss strategy for most of this period due to COVID-19 lockdown restrictions, George lost approximately four stone in bodyweight between January 2020, when he weighed 21 stone and the time of the interview, eight months later.

The importance of social support to the men interviewed was not limited to losing weight through advice about food and nutrition, but also paramount to remaining engaged with weight management services, and crucial to those involved in football-based programmes with limited prior experience of playing the game,

*One of the guys played next to me and he said, 'I haven't played football for two or three years or so'... I just said to him 'look just keep talking to me, stand next to me, I'll help you, you help me, we're going to make mistakes, don't worry about it'. I just kept talking to him all through the game. When we come off at the end, he went, 'oh, that was amazing. Thanks for your help'... and he was genuinely emotional about it. (Gareth)*

On occasions when someone had stopped attending, WhatsApp groups also performed the function of the opportunity to re-engage with services and draw people back into the social support network, 'Every now and then someone might go, "Andy, where you been for a few weeks? Is everything ok?", and stuff like that' (Gareth).

While the social support available through digital platforms may have taken on increased prominence within the context of the COVID-19 lockdown and the associated changes that weight management services made to their provision, there was also a general appreciation of the role played by the accountability element of social support in losing weight, prior to the pandemic,

*About this time last year, I went to Lisbon with my best mates in school, for their fortieth birthdays. They pulled me to one side that weekend and said, 'we're worried that you won't be at our fiftieth birthdays'. So, the fact that they plucked up the courage to say that, it affected me... on January 1st, I went, 'right, I'm giving it everything.' And I actually made myself accountable to them... I was sending them photos of my weigh-in results each week to show them that I was taking this seriously... if I'm not switched on to being disciplined with what I'm eating and exercising, then I just switch back to being lazy and eat too much crap. (Geoff)*

### **Service type and the structuring of social support**

When accessible, social support had a generally positive impact upon men's experiences of living with obesity and as discussed, was cited by participants as an important element of successfully losing significant weight. However, different types of service and variations in the way services were delivered were influential in structuring the conversations that the men engaged in that constituted this support, which carried implications for how accessible some of these conversations were for men. Differences in the social support conversations experienced were most pronounced in comparisons made by men who had accessed both commercial and football-based weight management programmes, as described by Will,

*Sometimes the socializing between people... and I don't know why this is different. You get into the room [at commercial weight management services] and you literally sign-in and then you'd sit down and wait to be weighed. But you'd be there with people you don't know... then you're going up and getting weighed and you didn't ever really speak to anybody. Whereas sort of football I guess there's that central focus outside of what you're really there for and no-one's really looking at other people getting weighed, and you're just discussing things. Going to Weight Watchers I felt almost, not under the microscope, but I felt a little bit as if I was being watched by the others... and they were there for exactly the same thing. But it felt like it was maybe a little bit too open... like here's my weight, everyone knows about it... they talk about food. The football programme's the reverse... whilst it's also about eating, it's about the*



*exercise that you need to do to sort of burn off and get fit as well... a diet is one thing but having the ability to sort of burn away what you've got is a requirement.*

Geoff also recalled feeling ostracized from the topics of conversation during the group discussion element of commercial weight management sessions,

*I've tried going to Slimming World, but my experience of that was the exact same thing as the guy who set up MAN v FAT; it was just loads of old women talking about beetroot... so, in my view, it felt like I was paying four pound a week to step on the scales and I wasn't getting a huge amount more out of it...*

There was one particular interaction with a female consultant that resulted in Geoff taking an extended break from his involvement with commercial weight management programmes,

*I went to weigh-in, I'd been on a weekend away with loads of beer and I put on about five kilos in one week... I remember the woman looking at me, horrified. She looked so [laughs]... she sort of looked at me and I basically walked straight out and I never went back.*

For Geoff and some of the other men we spoke to, the gender of the weight management consultant delivering the service was especially influential to the relevance of the support provided. As evident when he re-engaged with the same commercial programme at a different location, led by a male consultant,

*I definitely engaged more with it because he'd lost a significant amount of weight and he explained how he did it. He said that before he did it, he used to eat a packet of Hobnobs every day. I could tell that he was fat [laughs], like he could give proper examples. Whereas, when there was a slim lady in her fifties doing it, I just maybe didn't really gel with them as much in the same way. The woman I saw on a weekly basis, she was... I got on fine with her, I just... felt like he and I were more on the same page than the other leader that I had before.*

While it might go without saying that services cannot provide the social support crucial to the instances of notable weight loss reported by our interviewees if men are deterred from attending, and that favourable outcomes are more likely to result from favourable experiences, this was detailed specifically by Will. Who, at the age of 56, had only experienced significant

weight loss in the past year through attending a football-based programme for the first time after gradually gaining weight for 30 years,

*It's always been increasing... I remember sort of weighing myself around the 90s... and I was probably about 14 and a half stone, and then it got to 16 and a half... it's just gone up slowly. I've not been massive all the time, it just sort of crept on. So, yes, I think my only real decrease has been last year.*

Paul, who had 'lost two and a half stone in two years doing Weight Watchers and 10 kilos doing this [the football-based programme] in 24 weeks', found that greater frequency and access to a more interactive type of support offered by the football-based programme was a welcome contrast to his experiences of commercial weight management programmes,

*You can eat more doing this (football-based programme) and you are doing the exercise with it. With Weight Watchers you didn't really get none of that, I mean the lady was alright who done the meetings, but that's what she was there for. She done the meetings... that was it. But at least with this you get nutritional advice as well, you've got Mark, who is always on the phone, or message him and he'll always tell you. Or if you put something on there, and he'll say like, 'cut out this, cut out that'. You've always got that help. You didn't have that with Weight Watchers.*

Differences in the relevance and overall quality of social support between public-funded and commercial weight management services were also observed by participants. Based on Harry's experiences, commercial weight management programmes constituted little more than dietary advice, whereas the public-funded programme he attended was designed around psychological support and focused on this more so than nutritional recommendations,

*They (doctors) put me onto the [public-funded] course that I'm on now, which is totally different. The guy there's trying to get into your brain, different thinking. And that's what it's all about really, truly. Dieting is completely useless because as soon as you stop, you're going to get heavier than you was before. But you've got to get your brain into the right... with their help and the snippets that they give you each week... it does get you*

*there. I've lost probably a stone since I've been with them... When I've went to these [commercial weight management] classes for the first 3 weeks you'd be losing 3 or 4 or 5 pounds a week, which is great when you got on the scales, but then you found... once you've lost about half a stone then it really is down to Sellotape on your mouth and keep running up and down the road to lose any more weight because they had no more knowledge really and truly, or give you any information to help you lose weight. So, I suppose my weight jumped up and down... it's no good going back to Weight Watchers or Slimmer's World because they don't work.*

Participants also noted some contrasts in the level of social support offered by different public-funded service providers,

*The My Weight Matters one was more of a lecture... it's more interactive, the MoreLife one... I think it's nice to know that everyone else is in the same boat as you... but what's good about it is when you get problems - which everyone does - you can message your leader, and they really help you. They really do help, and I think that's the key to it, and it's much more of a support mechanism [at MoreLife]... I think a lot of the other ones you go to, it's all done by the scales. "You've lost..." - it's all measured by that. This is measured by a bit how you feel, what things you've done to change... It may even be a small change. It's more looking at positives. (Hayden)*

In the main, the data reveals how the social support experienced when attending football-based and public-funded weight management programmes felt more genuine than involvement in commercial weight management services,

*With Everyone Health, it's not 'have you lost any weight?', it's 'how are you? How are you feeling in yourself?'; that has a lot to do with it, how you're feeling affects what you're eating. Slimming World and Weight Watchers, it's not about how you feel, it's about, 'this is what you should and shouldn't be eating, have you done it?' There are no personal touches to it... my experience with it (public funded programme) has been quite good, it's a free service as well, you don't feel like you're herded in for your money, I get the sense they care about you as an individual, not just a number in the class... the guy*

*that runs it, he's taken an interest in me, because I've done so well so quickly, and I still continue to do well... It's a 12-week programme but he says, 'you can come as long as you want. If it's helping you, stay as long as you need to'. You can't take that in any other way than this guy cares. (Elliot)*

Yet very few men we spoke with made a substantial effort to integrate themselves into group discussions at commercial programmes following their initial experiences of the gendered nature of these conversations. Leaving them disconnected from a major opportunity to receive the social support important for sustained weight loss,

*It (commercial programme) is very centred on women... before you know it, you're having a discussion on losing weight and the menstrual cycle, which you're clearly not going to stay around and get anything out of. (George)*

The only exception in this regard, and something of an outlier within our sample of interviewees, was Barry,

*It is very female-dominated... I think most weeks I'm the only male in, and that's been the case for a long, long time, I've been one of the only males in the class, even back in the days pre-COVID when sometimes we had 45 people stay to that class, I would often be the only male. Because even the males that join, they tend to weigh and go, and I think it's that stigma of weight loss groups are for women. And I must admit, embarrassingly I had that view myself before I joined. Very quickly after doing it I realised that was my own stupid mindset and we're all in the same boat, no matter which chromosome you've got, we're all in the same boat, trying to lose weight... ultimately we can all help each other, particularly the people that have been doing it for a long time and they've been through those cycles of having lost weight then put a bit back on and having to claw it back again... it was so useful, but it is getting over that stigma of it being a women's thing.*

However, commercial weight management services have an established history of relying successfully and almost exclusively on a female client base, with the two most popular programmes in the UK dating back to the 1960s. More importantly, as

male-only services are gradually being developed by providers who rely entirely on public funds, meaning their programmes are free to access if users meet health-related and geographic criteria, the female-dominated make-up of commercial programmes is unlikely to change. A lack of need to restart a commercial programme was also illustrated within our data amongst men who had since attended football-based programmes. This was even the case for Frank, who had mostly positive experiences of both types of programme, but once he had learned some of the dietary principles advocated by a commercial programme, the focus of his long-term involvement shifted to a football-based programme, where he found the social support to be blunter yet more effective for prolonged weight loss,

*[At] Weight Watchers I found like all the people, when like you didn't have a great week it was 'oh, don't worry, look at your archive folder', and it's very much 'ah, don't worry too much'. Whereas at football it's 'oh, you f\*\*king idiot, what have you managed to do there?' Even though it's in jest and it's all a good laugh, it's just a bit more of a kick in the backside... it's tough love, everyone's supportive but critical at the same time... I've done Weight Watchers and it helped me going forward, I got the weight off, then I managed to keep it off because you learn this, and you learn that...*

Other participants who had attended football-based programmes also referred to the unique atmosphere of social support experienced, which often carried more resonance for them than the forms of support received in any other domain of their social life,

*You'd be telling people that you can't go, and you'd be disappointed... Thursday night is the centre of my week when it's football... I'm not set-up to follow a dietary regime... whereas with football, and sport, it's different. It's completely internal. (Sam)*

### ***Purposeful collective action: The bespoke social support of practicing weight loss strategies together***

The form of social support men reported as being most galvanising, meaningful and effective was constructed through the interactions and friendships that emerged from engaging in weight loss practices with others. In this respect, playing football was more than a vehicle to lose weight through participating in physical activity, but a life altering experience for some of the men,

*I wouldn't have gone to play football without MAN v FAT, put it that way... I know it sounds a bit clichéd but it's sort of changed*

*my life a little bit... it's sort of brought me out of myself... I can find myself talking to people a bit more, because I'm a very quiet person, very quiet. And the fact that you use the WhatsApp as well, I like that because you sort of, not hide behind it, but you can get your point across without having to talk... it doesn't feel like a weight management thing because you don't have a woman or a man preach to you about what you should and shouldn't do. You go in and basically you get weighed, and then you go out and have a run around [laughs]. (Stuart)*

Especially noteworthy for the majority of the men who attended football-based programmes was the opportunity to meet other men 'just like me' and 'in the same boat', with whom they struck an almost immediate sense of masculine connection,

*I find Slimming World set up for diet and nutrition and food, but I find MAN v FAT much more motivating... because it's more camaraderie. There's more people that are exactly like me. They're in the exact same boat as me. Just blokes who want to shed some pounds, make some friends, kick a ball around. And then at the end, if you can have a laugh, that's a bonus as well... As blokes we are competitive, we want to win but with the sense that there's a bit of league, there's a bit of that kind of chit chat going on, a bit of competitiveness. You kind of think 'yeah, like if I can make sure to really smash it this week... if I fill in my book every day, I know that another half a goal will go towards the team'. (Matt)*

Those men involved in football-based programmes even yearned for the weigh-in aspect of the programmes due to the suspension imposed by the COVID-19 lockdown, which was in contrast to the mixed feelings articulated about experiences of being weighed at commercial weight management services,

*I know at the minute because of COVID measures it's a lot different than what it was. But from before, when you used to go and step on the scales and the boys on your team are stood around you and look down... and see what your number comes up as, and they would look at Tom (the coach), and Tom would be like, 'yeah, well done, you've lost a kilo and a half this week'. Everyone will be like smiling and like thumbs up, give you a little fist bump*

*or shake your hand and be like 'well done', which kind of brings the pleasure of the hard work you've put in that week. (Matt)*

Pertinent to the enjoyment and motivation to continue attending football-based weight management programmes was the attraction of attending a service to engage in a purposeful activity, with others in similar circumstances, geared towards losing weight. George referred to how the opportunity for socialisation with other men combined with the collective purpose of weight loss and a shared interest in football not only brought about the desired outcome of reduced bodyweight but also produced the equally, if not more, transformative benefit of improved mental health,

*It's around getting a group of blokes together that have a like-minded interest, being football, and then getting those guys to focus on losing weight, getting a bit more healthy, and also the mental health aspect. Because a lot of the guys haven't played football for many years, and it's around getting that team concept back again... they've got a lot from it, from their mental health aspect as much as they have through the weight loss aspect. And the mental health aspect you could never, ever, ever measure. But so many of them would tell you that it's sort of one of the highlights of their week is going there on a Friday.*

The process of going on a purposeful journey with other men informed a more intimate experience than encountered when attending commercial weight management services. This was reflected in how losing weight through attending football-based programmes carried more meaning for men who possessed experience of both football-oriented and commercial programmes, even in instances when the total amount of weight loss was the same,

*It's like if you're on my team and you lost two kilos. 'yes John! that's another goal, quality!'. Do you know what I mean? Whereas if someone at Slimming World came up to me and was like 'oh my god, I've lost two pounds', you'd be like 'okay, well done'. (Matt)*

While the sense of masculine belonging brought about by losing weight through playing football at a programme attended by only men was restricted to experiences of football-oriented initiatives, the close-knit social support brought about by losing weight with others was also experienced by men who attended mixed gender public-funded weight

management programmes that include a practical physical activity element. So much so, that the powerful impact of collective action in the form of physical activity was also recognised by those previously averse to intentional physical activity participation, despite this being currently delivered online in a virtual group exercise format. The perspective of Chris is illustrative of this, as he became regularly active in his mid-fifties, by attending a public-funded weight management programme of this type and lost a stone of bodyweight, which he had, so far, been able to 'keep off' for the first time in his life,

*I don't do sport and at the same time, I just didn't go to gyms or exercise... I don't play football because it's no interest to me, but I do like the idea of doing something like that as a guy, where can you go for it... But now I've started doing this programme, one of the things that I was actually looking at was whether I can then go and do a cardio workout. I mean right now, we can't really, but it has now made me think that perhaps I should join a gym to do the cardio. Not for the weights but maybe for a spinning class or something like that. It has actually made me rethink the gym... definitely before this the gym was a no go and I wasn't interested even when Genesis (programme leader) phoned before I started it and said, 'do you go to the gym?' and I said 'no, not interested', but now I'm thinking that if they opened as normal, I might join in cardio classes.*

This is not to suggest that talking about weight and diet related issues and experiences was not a valued aspect of social support for the men. On the contrary, especially for new members of a weight management programme, hearing stories of achievement and struggle from more experienced male members was reassuring,

*The first thing you do is you sort sit with a group of blokes, and we don't really know each other... you go through the initial weigh-ins... just looking around the room and thinking, well, there are people in this room that are older than me, younger than me... previous attendees sometimes appear and talk about their experience... there's one guy who lives local... he's about 60 I think... and he's lost loads. Absolutely loads... he's got to a point where he's got the sort of flabby skin problem and he's open about it. But*

*he looks so well, and he runs every week.  
(Will)*

However, men did generally bemoan how most weight management services are not only female-focused, but restricted to only talking about weight loss, when this time could be spent taking part in weight loss strategies,

*You're walking into Weight Watchers... women sitting around talking about how to lose weight and what they've been up to in the week and how many cups of tea they drank with a neighbour the other day... but for me, as a man, I'd rather go and play a sport than go and sit around in a room. That's why the football thing does it for me. I'd rather go and play football once a week and then that encourages me to go and do something else throughout the week when I've got time. The food diary and the group chats... keep you accountable to what you're doing... then you turn up on a Friday, you get weighed and if you've done it off the pitch, you go and do it on the pitch as well. You're fighting with both hands. (Frank)*

The men's experiences and perspectives presented in this chapter underline the importance of social support for losing weight whilst living with obesity. Although, this evidence highlights that certain types of social support are more favourable than others, not least because weight management programmes have traditionally been structured around the experiences of women. This was often reflected in men's stories of attending mixed-gender weight management programmes, where social support was difficult to access because conversations tended to be gender-exclusive and focused on aspects of everyday life and living with obesity to which only women could relate. Apart from one interviewee, the men we spoke with noted how the nature of group discussions at commercial weight management programmes tended to exclude them from receiving or offering social support. Furthermore, all men involved in the study who possessed experience of both commercial and football-based programmes had a strong preference for the latter. However, the primary attraction of these programmes was not simply to play football, but the opportunity to spend time with other men who found themselves in a comparable predicament with a shared purpose, which made for a supportive social environment, and a bespoke life-changing one for some of the men. Nonetheless, the richness of the collected data suggests that the most crucial element of this social support was not the male-only environment, but a weight management programme that tapped into the

shared purpose of wanting to lose weight through engaging men in a collective weight loss journey together, rather than 'just sitting around and talking about it'. This type of meaningful social support brought about by approaching weight loss as a purposeful collective action was also cited by men attending mixed gender public-funded programmes that include physical activity as a practical element of the service.

### ***Social Support and Weight Loss in Men***

Previous studies on connections between social support and the experience of losing weight amongst men highlight the influential role often played by a spouse or partner (De Souza & Ciclitira, 2005; Harcourt et al., 2020; MacLean et al., 2014; Tripathee et al., 2020). However, participants in our study made only fleeting reference to support from a spouse or partner as being crucial to their weight loss experiences. This was despite the majority of our sample being married or living with a partner. A possible explanation for this is that the men we interviewed wanted to appear self-disciplined and autonomous when telling their stories of successful weight loss, in the interests of maintaining a masculine identity (MacLean et al., 2014; Tripathee et al., 2020). Based on interviews with 20 men who had recently completed a football-based weight management programme and their 20 cohabiting female partners, Tripathee et al. (2020) found the females to be very involved, partially involved or not involved in supporting their partner's weight loss strategies. This level of involvement also differed according to whether the support offered by female partners concerned diet or physical activity, with men more reliant upon more involved women for dietary changes and men more resolute and receptive to partially and less directly involved partner support for increased physical activity participation. Social norms that attach dietary practices to femininity and physical activity participation to masculinity (Tripathee et al., 2020) are therefore likely to have influenced the data in our study by motivating the men to put more attention on their relatively independent physical activity involvement and less focus on any reliance upon female partner support to help guide their eating habits. Moreover, this also aligns with Will's comment that while dietary advice provides a solid base for initial and significant weight loss, regular physical activity is the key for sustained weight loss, which men are more likely to approve as a masculine-affirming weight loss strategy (Harcourt et al., 2020; Tripathee et al., 2020).

Indeed, our findings point toward the reported effectiveness and men's preference to receive the type of social support from co-participants at weight management programmes which arises

from the shared experience of engaging in a weight loss strategy together. De Souza and Ciclitira (2005) have previously observed how co-participants at weight management programmes immediately become a support group for one another due to the nature of such programmes and construing weight management as a competition to 'lose weight' or 'get fit' sparks greater interest amongst men than the notion of 'dieting'. Although, while the men in our study, such as Matt, made reference to how competitiveness is a natural part of being a 'bloke' and an integral element of why the football-based programme was successful and enjoyable, this did not appear to be as meaningful as the sense of togetherness invoked by practically engaging in a weight loss strategy with others. Like Lozano-Sufrategui et al. (2016), who concluded that men-only weight management programmes protect against weight stigma and the perceived threat to masculine identity, we found that an exercise participation element to weight management services promoted a social environment underpinned by camaraderie. Nevertheless, as our sample included men who had experience of various types of weight management programmes and weight loss strategies, including men-only and mixed gender programmes, we found that such a togetherness was not restricted to men's experiences of men-only services. Although the meaningful social support experienced by men as a naturally occurring component of the shared journey of practical engagement in attempting to lose weight with others was a prominent feature of attending male-only football-based programmes, this togetherness was also experienced by men involved in mixed-gender programmes which included doing physical activity with other attendees. Recent research also reports that men and women who attended weight management services that involved taking part in dietary and physical activity weight loss practices together experienced an empowering, empathetic and authentic form of social support, which enhanced their sense of self-worth and resulted in their continued participation in weight loss strategies together beyond the initial intervention period (Salemons et al., 2020). The authors of this study went as far as suggesting that the group dynamic, social support and new friendships that emerged from engaging in weight loss practices with others in similar circumstances were arguably more important than the content of the programme for wellbeing and the subsequent motivation for long-term change (Salemons et al., 2020).

### ***Implications for Practice***

Therefore, we would argue that although leveraging a sense of supportive masculine belonging through men-only football-based weight management programmes would appear to be effective for weight loss and keeping men engaged over extended periods of time, the crux of this supportive belonging originates from the collective action of losing weight with others. This contrasts with the traditional approach of female-dominated weight management services, where men are expected to 'just sit around and talk about it', through gendered conversations that can often exclude them. In this light, our findings carry the following implications for weight management policies and practices, particularly in relation to the future design of services:

- The type of social support arising from collective action in weight loss strategies with others is more engaging for men than the group discussion element of conventional weight management programme design, where female-specific topics of conversation can often exclude men from social support interactions.
- Football-based men-only weight management programmes offer the type of social support that encourages sustained weight loss amongst men, although this sense of belonging from practicing weight loss strategies with others was also experienced by men who attended mixed gender public-funded weight management services that include practicing weight loss strategies with other participants.
- To increase the involvement in and adherence to weight management programmes amongst men living with obesity, service providers might look to incorporate weight loss practices relevant to physical activity or diet into their programmes. For an immediate solution that aligns with masculine norms, a physical activity participation element to programmes would likely carry some impact. To instigate more long-term and radical change amongst men, incorporating practical cooking activities into service provision could potentially challenge existing social norms that dietary weight loss strategies are a feminine practice.

## Chapter 2

# **Battling Life Course Expectations and Unanticipated Events:**

Men's experiences of weight gain



Men described and understood their experiences of gaining weight in the context of an ongoing battle against the life course and unanticipated life events; their employment environment, schedule and circumstances; the normalisation of weight gain amongst men; and personal failings. Participants generally referred to how being and becoming 'bigger' was something that had gradually developed over their lives, and although most men retrospectively acknowledged that the behavioural norms regarding physical activity and diet had been established during childhood, it was often during the initial stages of adulthood and middle age when they experienced the most significant increases in body size. Accordingly, in this chapter the discussion focuses on the men's ongoing battle with weight gain within the context of life course expectations and unanticipated life events. Guided by this meta-theme, we present data on men's shared experiences of: i) the long-term consequences of a sporty identity during childhood; ii) struggling to negotiate unanticipated life events; and iii) increased responsibility, status and pressure in family life and at work.

### ***The long-term consequences of a sporty identity during childhood***

Most interviewees reported how they had been physically active on a regular basis during childhood and for those such as Paul, who had been active by playing popular team sports such as rugby and football, the size of their current body represented a significant divergence from their sporty identity as a child,

*When I was at school I was like a rake. As soon as I left school and went to work, you didn't do all the exercise you did at school... But, you know, when you're at school you walk into school, you bike into school, you've got all your PE... I still played football on Sunday, but league football is a bit different because you went and played football... and then then whatever you've lost [in weight and calories] playing football, you go out and drink it back on all afternoon... since I left school, I reckon by the time I was 18 I had put on a couple of stone.*

As well as leaving school, entering the world of work and the drinking culture associated with playing football and rugby during adulthood, serious injury coupled with sticking to dietary habits associated with regular sport participation was also a common factor cited by men as being behind their reduced physical activity participation, which they felt played a key role in prompting the start of significant weight gain,

*I ruptured my Achilles tendon in 2016 and for a period of sort of 5 months I think I was in a cast and in a boot and I was really not very mobile at all, and also I gave up rugby at that point because it was a real pain, that injury, and my wife and I had a chat and thought 'do you know what? maybe it's time to call it a day'. But the problem is that the amount that I used to eat never really stopped. So, all of a sudden, I piled on weight very, very quickly, and at that point actually I did become quite big. Again, not to the point where I couldn't go up the stairs and stuff, but noticeably bigger... Probably from the age of about 29 I would say through to 31. That two years... I've always been heavier, but I really stopped activity and then over that two years I went from... someone who was heavy to someone who was too big. (Barry)*

Like Barry, whether participants were less physically active as adults due to injury or less free time because of work and family commitments, all men who had played sport regularly during childhood gave little thought to adjusting their eating habits after becoming less active, until they had gained a noticeable amount of weight,

*Eating habits don't change, do they? I mean, I know that from when I was a kid, I used to swim six days a week. And the amount of input that was going in, just burning it off. And then I stopped completely. But the input went in... so the body sort of grew... it's an eye opener. (Will)*

Will identified the period during his early teens when he and his sister stopped swimming shortly after moving into the older training group, where the relationship with his new coach was not as strong as the bond he had shared with his previous coach, as the beginning of the 'real point of change' in his weight gain.

*I said, 'I can't do this. I'm not getting anything from it'. So, we quit, and obviously we were still eating a fair amount because that's what our body was accustomed to. I ballooned a bit, not massively, because I was still at school and still doing other things. But, you know, it's never really gone down from there. That was sort of... I think the turning point, before that I was like a stick insect... I always find that was the real point of change.*



Likely due to interviewees viewing regular physical activity involvement as a 'natural' part of being a child, the role that being physically active played in maintaining their bodyweight was only realised once noticeable weight gain had started after becoming markedly less active for the first time in life,

*When I was younger, I would play football probably five, six times a week, so I found up until I was like 35, every other day I could eat what I wanted, I could drink what I wanted, and I was overweight but not, not big. And then obviously now my knees are playing up and everything else, I can't play two or three times a week... and everything else catches up with you. (Gareth)*

Despite learning of the influence of physical activity to fluctuations in weight through significant weight gain, some men were reluctant to engage with any form of physical activity other than the one they had become accustomed to whilst growing-up. This was especially the case for those who had developed sporting identities attached to playing football and rugby,

*I did regularly sign up for gyms and stuff, spend quite a lot of money in gyms, do occasional tennis and things like that. I hate running. I didn't do much running but did some cycling and stuff like that... having done competitive sports in teams, what I really miss was the team stuff. (Steve)*

For men such as Steve, the discovery of football-based weight management programmes was the only form of physical activity that satisfied the sporting identity established during childhood,

*There's nothing else. I mean, it's not the same as playing top level rugby or anything like that. It's not as serious as that. And you don't have all the bloody training and all of that, which was a bit of a bind to be honest. Yeah, it is proper social, with exercise, and the thing that we don't realise we're doing, if you ask me to go and run around [at football] for half an hour, 'yeah'. But, run a couple of kilometres?... I'll look at you and just say, 'you're joking, right?'... But we do it without even realizing... It's just a good way of getting exercise and you don't really realise how hard you're working. Because you get to my age, I'm pretty lazy, right? And if you ask me to sprint on a treadmill, I wouldn't do it. But because you're playing football, you just don't realize you're doing it.*

However, for those men who were able to find the time, motivation and a suitable activity to re-engage with physical activity following the trigger of noticeable weight gain as an adult, they also became aware that in addition to altering long-established eating habits, their weight loss efforts were going to be progressively constrained by the biological consequences of ageing,

*I started playing rugby at 16 and I played rugby for seven or eight years, and then played football. But that (weight) was never an issue... when you're in your twenties, you eat what you want, you do what you want. You do some exercise and it's fine, it's only as I've gotten older that it's kind of changed. (Brett)*

Overall, most men referred to the difficulty of altering eating habits that had been cemented in the context of a sporty childhood, which they explained as being influential in bringing about weight gain. However, their awareness of the function performed by physical activity in impacting their bodyweight was only realised once they had experienced weight gain in the absence of being regularly active. As well as struggling to change their eating habits, re-engagement with regular physical activity also proved problematic as very few participants had any interest in activities other than football and rugby. Playing these games at a competitive level had been fundamental to their sporting identities during childhood, but were not feasible options past a certain age, and impossible for others due to the potential for serious re-injury. In extreme cases, this included an aversion toward running, despite this activity being a rudimentary part of playing football or rugby.

### ***Struggling to negotiate unanticipated life events***

For some of the men, the constrained position they found themselves in with regard to attempting to alter their long-term eating habits and re-engaging in physical activity was further compounded by the difficulties of negotiating unanticipated life events, which manifested itself in the form of weight gain. Nonetheless, this was by no means entirely the fault of the men, but instead transpired within the unresolved, yet unavoidable, predicament they found themselves in of simultaneously attempting to manage the socially imposed norms that the identity of being a person living with obesity should be an unfavourable one, characterised by feelings of social disdain. Yet, given the victim blaming culture surrounding people living with obesity, it was common for interviewees to internalise this shame and condemn themselves as inferior citizens for the significant increases in body size

they had experienced.

As already highlighted, given the number of men in our sample who had played sport regularly, serious injuries were unexpected events that participants identified as bringing about weight gain by restricting physical activity participation, in addition to non-sport related injuries such as road accidents. This was the case for Paul, Tim, Barry, Hugo, Peter, Shane and Callum. There were also other unanticipated life events which structured and restructured men's lives in ways that immediately triggered or eventually led to significant periods of weight gain. For instance, Elliot, whose mum died when he was a toddler leaving him to be brought-up by his grandparents, used eating as a coping mechanism in early adolescence following the death of his grandfather,

*My mum died when I was three. I don't know if growing up without a mum... I was living with my nan and grandad, then my grandad died before I started secondary school, I definitely used food as a coping mechanism, comfort, so I think that's a big part of it.*

This initial weight gain then carried on into middle and late adolescence and, at certain points, his grandmother would express her concerns with his weight, which tended to culminate in an argument that compelled Elliot to comfort eat further,

*I just started by putting weight on, when I was at college and it kept going, got to a point where I was having arguments with my nan a lot, that would make me feel like crap so I would eat more. It's been a long road to get to where I am now. It's only the last year that I've taken ownership of my life.*

In the case of Lee, who has been overweight since early childhood, being bullied about his weight as soon as he started school resulted in him developing a passive attitude towards his appearance, which he now acknowledges as also a more general passivity toward his overall physical health,

*I've always been pretty much overweight. When I was, say, four or five, I started weighing my age and that kind of carried on all the way up through my teens... so, as I was 12 or 13 [years old], I'd weigh about 12 or 13 [stone], as I was about 16 to 18, I'd weigh about 16 to 18... going through school like that and always being told you're the fat one... I developed like a passivity to it... where I stopped being insulted by it and caring so much about the insults, but the trouble is that I think*

*that also devotes a lot more of an easy going attitude toward things... I don't take it as serious as it should be... the time when I was at the gym, I would definitely say I was healthier, but I wasn't really keeping track of my weight. I mean that's one of the things that's kind of been a knock on from where I say, I got more passive towards it. I just don't monitor it or keep an eye on it at all. I just kind of know it's there, I'm heavy and that's that... growing up, living with it, always being overweight... it just kind of got to the point where it became more natural. So, I've never really been thin, to say, 'uh I miss being like that'. It's just the way I've always been. I think my mum has always said that I was even a chubbier baby as well so it's not something that's developed at any point. It's not something I've seen myself as different and then become like this, it's just I've always been like this... it's kind of, in a way, part of who I am, but it is still something that would be good to at least improve.*

Unexpected events and key moments in life that prompted weight gain were not always directly connected to childhood experiences and could crop-up at any point of the life course. The recent periods in Mark's life when he gained significant weight were initially instigated by treatment for cancer,

*I got prostate cancer two and a half years ago. Obviously, I've had chemo, radiotherapy, and hormone treatment. The hormone treatments mainly put more fat on areas I've never had it before.*

Then, more recently, during COVID-19 lockdown and being furloughed from work, Mark's wife was diagnosed with cancer,

*My wife got diagnosed with cancer of the womb. So, I spent a lot of time with her... I was supposed to do a load of work at home and it never got done. She didn't want it done at the time. So obviously I was inactive for a full month, which isn't good.*

The weight gain men had experienced through caring for family members, the death of loved ones or being bullied illustrate how increased bodyweight is not simply a result of an intentional individual act to eat more and avoid physical activity, but a relational phenomenon informed by connections, interactions and comparisons with others, which can limit the capacity to make choices while being an emotional

and distressful experience. The relationality aspect of unanticipated life events that men cited as being influential to periods of significant weight gain is best highlighted by Wayne, who gained a considerable amount of weight following the break-up of his first marriage,

*I had a previous marriage. One of the things when my first marriage broke up... was to eat as compensation, so I put on weight. Then, looked at myself and thought, 'gosh'. Between marriages I put on a lot of weight... I thought, 'God, I don't want to be that fat git anymore.' But you don't realise it... until you maybe look at photographs. You think, 'I'm the fattest person in that picture.'*

As previously discussed, significant weight gain was something that most men in our sample became conscious of only once they experienced it for the first time during adulthood. However, for some of these men, while they were aware of and expressed some repugnance towards their weight gain, this was appraised as an unwelcome but less important by-product of the more pressing worries they held about their persistent encounters with depression, also triggered by unforeseeable life events. This was explained in some detail by Ben,

*I went through a period of time... and unfortunately got involved with some particularly violent people. I finished up suffering with post-traumatic stress disorder. In hindsight, looking back, that was the beginning of a struggle with weight. I had become so depressed that I really wouldn't care less... I got to the point whereby putting weight on in the big picture of things wasn't as important perhaps, or as crucial to me at that time as other things going on in my life... I think depression and weight gain, there's an awful lot more there than certainly I realised at the time, perhaps, I don't know if there is a connection between weight and depression or anxiety. I think for some people it could go the other way completely... they lose a lot of weight and I think for other people, you shut other things out... your self-image is so low that putting weight on, to be honest, is par for the course... it's how you're feeling.*

During the depressive episodes of Ben's life, he not only gained weight, but also actively avoided participating in weight management services. Based on his prior experiences of attending commercial weight management programmes, he did not want

to further risk his delicate mental state,

*In depressive periods of my life... I wouldn't have even been interested, not the slightest little bit would I have thought, 'oh, you know, one way here of helping would be to go and lose weight'. I wouldn't even put myself through it. It would have been like, 'if I go there, they will tell me I'm massively overweight'. Well, I know this myself, and I just would not have done it. Absolutely not a hope.*

Callum recounted similar experiences of the connection between depression and weight gain, brought about through a combination of getting divorced and a high pressure job, which also affected his readiness to engage with support,

*A lot of it is also about your mental health and state of mind. I don't take any meds for it, but I do deal with anxiety and depression... I put on weight when I'm stressed. Before I was diabetic, I used to comfort eat and I've been divorced twice... I think mental health is absolutely critical. I get very easily discouraged and also, for varying reasons, I have a high pressured and very responsible professional position and I don't think anybody that's had dealings with me would tell you that I have self-esteem issues... when I'm back at home I do. I can put on the professional face and deal with anything, I get through the front door and I worry about anything that moves and anything that I can hear... and that all impacts on my willingness to look at weight loss.*

Most men were currently involved in some form of weight management programme, but based on their previous experience, were wary that unexpected life events could easily disrupt their dietary or physical activity routines at any point. Along these lines, the manner in which the COVID-19 pandemic and resulting lockdown had suddenly transformed participants' everyday lives and reshaped service provision, resulted in weight gain for men such as Barry,

*That hasn't helped, with lockdown. Because again, going back to that being addicted to food and sort of trying to make that not sound stupid... routine has always helped me. The routine of every day I get up and I have my breakfast at this time, and I have my lunch at this time. I always found that that was the best way for me to deal with it*

*and other people would say "oh don't you find it boring having the same thing for breakfast, same thing for lunch, and similar thing for dinner every night?" and I don't actually, I find that easy and I find that achievable because, for me, it keeps me on the straight and narrow. It's those spontaneous choices that can sometimes knock me off track. So, having that rigidity helped and obviously having had that rigidity taken away somewhat hasn't helped me... unfortunately then all of a sudden going into lockdown really threw me off and now I've ended up putting about two stone back on, which albeit I'm still a long way from where I was, is frustrating and disheartening, so now it's about me trying to mentally get back to that right place and it is still a struggle.*

Immediately following the commencement of lockdown, Tyler found that the increased isolation from others made it easier to stick to his physical activity and dietary regime. Nevertheless, Tyler still gained weight during the lockdown period, as he made the most of the initial and short-lived easing of restrictions by spending time outside with close friends and family, that previously he had been unable to spend time with,

*The first six weeks or so [of lockdown], I was absolutely fine. I was dead healthy, I was working from home, I was looking at what I ate, I was going out running, I was on the rower. And then after that, because you hadn't had any social interaction, couldn't see anyone. Then obviously, the weather started to get good and then suddenly when you could meet up in people's gardens... that was the difference. Me and my wife started going and seeing everybody in groups of six or whatever it was - just sitting in the garden, having drinks with friends and stuff, and that's when it started going tits-up.*

Although negotiating and dealing with unanticipated and unsettling events is part and parcel of everyday life for many people, it is worth bearing in mind that all men interviewed were currently living with stigmatised bodies and, to varying degrees, already in the complicated position of wanting to permanently change their existing lifestyles and deep-rooted habits. Therefore, men living with obesity represent a unique group in some respects, and their struggles to negotiate unforeseeable events in the unfolding of their lives which became manifested in weight gain, are both unsurprising and understandable, as their lives, identities, behaviours and emotions were

anything but stable prior to becoming further unsettled. The scenario of Andy is worth highlighting in this respect, and his story is also typical of those trends in the data already discussed. Labelled as 'chubby' since childhood and developing a sporty identity through becoming a professional golf player whilst establishing a dietary intake to carry out these duties which did not change after he stopped playing, were central to Andy's experiences of initial weight gain,

*I've always been a big lad, 'big-boned' as they say... I was always a wee bit chubby as a kid... the regular sport stopped well over ten years ago and obviously, if you carry on eating the same amount, you're doing less, then obviously the pounds are going to creep on, and creep on they did.*

These circumstances in which significant weight gain unintentionally took place, were brought about once Andy relocated for work purposes, which made accessing regular physical activity involvement more difficult than he had envisaged,

*ever since I relocated up here (East of England), I would say that's the start of it (significant weight gain), because down there I was maintaining a much healthier weight. I was still a big lad. If I'd gone on a [weight management] course, they would have said 'yeah, you're at the tipping point [of obesity]'... the golf, the tennis, the squash (before moving), it probably all kept me on a level, as far as calories in and calories burnt was concerned. My life was a lot easier then, I had the business down in Surrey. The gym was there, the tennis club was literally the other side of the wall, the squash was where the gym was, and the golf courses were all right on my front door. In Surrey, you've got these wonderful golf courses literally all over the place. Everything was very easy. And when there's a change in circumstances, like a move and your focus gets a bit more on the business, it's very easy for that to drift unless you're very determined to recreate all those slots [of free time] again. That's certainly drifted and then just fell apart... I had everything boxed up, very easy, all on my doorstep, enjoying it all, none of it was a chore. I love my sport; I still love playing tennis on the very occasional times I do get out... that was the crux, when I relocated, I just didn't piece all the things back together again...*

*and the business started getting busier and busier.*

An increased busyness at work and prioritising this area of life, often in the interests of financially supporting a family, was also a typical feature within the men's experiences of weight gain. So much so that it merits its own discussion.

### ***Increased responsibility, status and pressure in work and family life***

Work was a prominent factor in men's experiences of gaining weight. This included the culture of specific occupations, the patterning of work hours, the increased status, pressures and expectations of promotion and the consequences of earning more money. Such experiences were attached to the stage of the life course whereby men adopted the identity of a being provider for their families. Therefore, during their thirties, and early forties for some of those who became fathers slightly later in life, most of the men set about earning as much money as possible and sacrificed taking care of themselves in the process. Although, experiences of an increasingly intense work life were not restricted to only those who were fathers, as men without children also found themselves subject to expectations from employers to become more ambitious and take on extra responsibility in their work roles at this stage of life. Due to the age of participants, such experiences held common ground across our research sample, with two of the three interviewees in their twenties the only exceptions. Data provided by participants currently in their thirties and forties were also especially rich and revealing, as they were in the midst of encountering such increased responsibilities and expectations at the time of interview.

Amount of work hours and their patterning were frequently cited by interviewees as limiting their opportunities to access weight management services. For Tim, his work shift pattern meant that he could only attend the free to access football-based weight management programme in his catchment area 'every other week', and as already explained in the previous chapter, once men like Tim had discovered football-based programmes, there was a reluctance to engage with the perceived inferior alternative of commercial weight management services. While most of the men formed a 'football or nothing' outlook to weight management support once they had experienced this environment, Frank had a less dismissive perspective of other forms of weight management service. Yet he still ruled out returning to commercial-based programmes, as the extensive meal planning and preparation required was not feasible to maintain in the context of his work life,

*Weight Watchers was pretty good actually. I just struggled with committing time and up until, like the start of the year when I started the business up, I'd always worked shift work and nights and it's always kind of hard to commit to a routine and do meal prep or like actually get home at a decent time to cook a proper dinner. That's why Weight Watchers didn't work for me.*

Prior to accessing weight management services, taking-up a shift-based employment position resulted in Brett having to give-up his regular involvement in physical activity and competitive sport, which he now identifies as being influential to the significant weight gain he experienced in his thirties,

*When I moved from my job at the nursery to working for the children's hospice and all the shifts... that's when I stopped playing football because it was like, 'you know what? I just haven't got time'. I can't be bothered to get up and drive an hour and a half every Sunday morning, run round for an hour and a half, and the weather's horrible... I've got to work at 3:00 in the afternoon. So that's when I just stopped doing any exercise... then, over the course of, and it wasn't like an immediate 'oh, I've quit and, in a year, I've put on three stone', it was very much a very gradual process where I put on weight slowly, and I think you're less noticeable of it when you add it slowly. I don't think you realise... I didn't really think about it... like I say... I've never been a skinny bloke.*

From the vantage point of his early forties, Brett reflected on a clear break in his life course when entering his thirties, brought about by increased responsibilities, making weight gain more likely,

*When you're in your twenties and you've got more free time, you're like 'oh let's go to the gym, let's go and exercise', as you get older and you have more commitments in life, work becomes more... not consuming, but you have to put more into work. It's not a case of turn up, work, go home. It's working a bit harder, works a bit more stressful... the last thing you want to do is 'ah I've had a really crap day at work, I think I'll go for a run'.*

In George's case, it was specifically promotion at work that provided the structural conditions for significant weight gain to take place,

*I used to play football quite regularly, played lots of sports, and then predominantly through work, I sort of got in a position, got on the first rungs of management and really had to concentrate a little bit on my career as opposed to things like playing football and things of that nature. That then sort of led to me becoming inactive, working long hours, not observing a really good diet. And before you know it, you're sort of in your forties and you're putting weight on at quite an alarming rate... when I moved from my thirties into my forties... giving up sport, and also workwise as well... I've definitely made a big connection probably in the last couple of years around my weight being directly linked to my work life.*

The different cultures of specific types of occupation also informed contrasting dietary habits while at work. Nevertheless, the outcome of weight gain was a shared experience resulting from what some of the men referred to as 'unnecessary' and 'excessive' eating while at work, regardless of the type of employment role they fulfilled. Tim provided insight into the dietary routine of being a manual worker,

*We was in a café most of the time... we'd have a café breakfast in the morning, on the way to work... we're working our sort of four hours... and then we'd go down to the café again for another breakfast. So, I was having far too many calories each day and I was just putting on so much weight... it just piled on.*

While George, employed as a director, pointed toward the temptations regularly available in the work environment of an office, which he felt had led to some of his weight gain experiences,

*I work in an environment where there's loads and loads of snacks on offer all the time. It's so easy to sort of reach for the biscuit tin. I think a lot of the guys [at work] have had various different vices. Some of them... they like a drink, so it's alcohol. I don't, I'm 99% teetotal, on holiday or at Christmas, I'll have a drink, but that's it. But for me, my vice was always the biscuit tin at work, and you know, very quickly one will turn into half a dozen.*

The need to have a 'vice' as George termed it, to briefly escape from the pressures of work, was another aspect of the data which carried resonance for other participants situated in a variety of employment types.

Amongst the men living with obesity in our study, it seemed to be the case that these vices or 'naughty pleasures' involved increased calorie intake and were thus conducive to weight gain, as Gareth recalled, 'I was in an extremely stressful job... I'd eat a bit more and I'd probably have a few more beers every night'. As Gareth alludes to, notwithstanding the dietary rituals and norms of different types of occupations, work-related stress was the prominent trigger which encouraged behaviours associated with weight gain for most men when reaching the peak of their working lives. Hayden, a senior engineer, singled out his current work life as having a pivotal impact on his weight gain in recent years,

*Particularly the last couple of years (of significant weight gain), really, and I know why. My job, I don't like it - I'll be honest with you. I don't get along with the boss, and that's what I'm trying to address at work, which is ongoing... The job I'm doing basically hasn't really been done to a proper level before, and I've just been sort of chucked into it, like, 'there's the job - get on with it'.*

Due to the way Hugo's life unfolded, becoming a father put a stop to regular exercise, which initially gave rise to weight gain. This was then compounded by additional stress-based eating to deal with the new pressures of being promoted to headteacher, which increased the rate at which weight gain occurred,

*I had kids and the activities got reduced, I started putting on weight, and then when I became a headteacher... I started putting on more weight then, maybe stress related eating, too many snacks in the staff room, things like that.*

The interaction between the additional responsibilities of becoming a father and increased pressure brought about through employment progression which laid the foundations for the increased likelihood of weight gain at this stage of life was also recognised by Barry. Although, becoming a father for the first time motivated Barry to successfully lose a significant amount of weight. It was only when his second child was born that his time became more stretched and made regular physical activity less feasible,

*The pending arrival of my son was the catalyst in the first place for me wanting to lose weight, so I don't think they (children) had any extra or unexpected impact on my weight loss other than just generally wanting to be healthier for them and hopefully be around as long as*

*I possibly can... what's fallen away over the last year is that walking, because having two children means that I've got far less time. When I first started Slimming World, I had a child on the way but didn't have any children, and even when I had one child it was far easier. Now I've got two, it's a much harder ask for me to finish work and then say to my wife, 'I know you've had the kids all day, but I'm going to go out for a walk for an hour now'. Then by the time I get the kids to bed and settled it's eight o'clock and then my wife and I have dinner, so it's really hard trying to fit that time in, whereas it used to be far simpler. It's not impossible, it's just harder to do that now.*

Prioritising his children's quality of life was also elementary to Barry's ambitious and conscientious approach to work,

*I've always been quite motivated by money. I never really had a number in my mind as to what good money is, because it's one of those things, if you earn x amount and you think 'that's great' and then a year later you think 'oh, I want to earn y amount'... maybe not everyone's built that way, but for me I always think 'oh, actually, that's become normal, I now aspire to do this or earn this'. I've always been motivated to earn as much as I can and make sure that, by my own standards, I'm achieving what I want to achieve in a work sense. I think some of it has also been led by having kids... it has kicked that on a gear. When I moved from my last company to this company it was a very significant uplift in money and, to me, a big factor for that was wanting to make sure that my kids would never have to worry about anything... giving ourselves a better opportunity to not have to have the kids worry about money, and I don't mean sort of spoil them and give them whatever they wanted, but I think I would always want to make sure that I had plenty of capital behind me and plenty of income so we could live a comfortable life. I don't need a mansion, I don't need a Porsche, I just want to live a comfortable life where if I want to take the kids out to the zoo, we can do that, and we don't have to be counting every penny.*

Therefore, work patterns and environments, relationships with colleagues, and the expectations and increased hours required for career progression

were central to stress-related eating and increased calorie intake. Becoming a father then often exacerbated these pressures while also further restricting the likelihood of regular physical activity participation. The intermingling of these factors for the men, especially during their thirties and forties amongst the older participants in the sample, were crucial to the onset of experiencing weight gain. Men often spoke about how weight gain was a consequence of concentrating on more important domains of life at a time in their lives when they had to negotiate several competing pressures and expectations. In short, the inclination and pressure to perform efficiently at work, often in the interests of providing for a family, resulted in the men sacrificing taking proper care of themselves, with weight gain viewed as an unfavourable but unavoidable by-product of earning a living to provide for themselves and others. Now in his mid-fifties and employed as a London Stock Exchange director, Steve spoke about the significance of the conditions in which he started to gain weight around 20 years earlier, brought about by the inter-related responsibilities of work and fatherhood, accompanied by the effects of biological ageing,

*I was pretty active in sports until 35. That's also the time I became a dad... up until that point, weight was very steady... I think gradually during my fatherhood... well, the kids growing up, I was doing less and less exercise because I was also getting promoted at work. My work is very sedentary, and a lot of it is sitting at a desk in front of a screen... you'll know better than me, 35 onwards is probably when your metabolism starts to slow down. So that combination of, yeah, fatherhood, age and work.*

Steve went on to explain how becoming a father transformed his life, and due to the gendered premise of a 'dad bod', his weight gain was somewhat normalised.

*You become much more domesticated (as a father). I talk about life before kids and after kids. Your priorities all change and it's a lot less about self. People talk about 'dad bod' and things like that don't they, so I think your self-image goes because you're so focused on these tiny little humans that you need to look after. I didn't really look after myself for maybe 15 years, because you're looking after the family. My wife always jokes that she took me off the market, by feeding me up, so I became less attractive to other women.*

Sacrificing taking proper care of himself, and gaining considerable weight as a result, was part of Steve's identity as the main provider for the family at this stage of his life,

*I mean that was very stressful (getting promoted), you put long hours in, and you know, I'm commuting two hours each way. So that's 14 to 16 hour days... forties are a difficult decade for lots of people because you're grinding it out aren't you, you're just trying to pay off the mortgage, trying to feed and clothe the kids... it's probably similar for most people, it's probably the hardest decade. That decade where the kids are really growing up and you're just a money machine.*

Although the most prevalent connections between their work lives and weight gain were described by the men as arising from the pressures, expectations and dietary influences of employment circumstances and environments, there were also some instances where men suggested that getting promoted at work, and thus earning more money, resulted in more expensive eating practices. Keen to exercise their recently acquired capacity to spend money more freely, some men associated specific points of career advancement with weight gain,

*I was earning a bit more, so I could eat better. We was going out for takeaways and stuff like that, going out for meals, and I started putting it on again... I didn't even do much about it for a while and I just got bigger. (Tim)*

Whilst in a contrasting socioeconomic position to the increased financial freedom brought about by promotion at work, men who found themselves unemployed at stages of their lives also referred to this as a circumstantial factor closely related to their experiences of weight gain. Andy was unemployed at the time of interview, and had been so for the past eight years,

*It started accelerating a lot when I left my last position, which was the end of 2012. So, it's been a while now since I was in full-time employment, as you can hear. So, I would imagine that's probably the time that I gained the most. I was in poor shape before then, but I definitely ballooned during that stage.*

The comparable outcome of unwelcome weight gain prompted by vastly different employment scenarios paints a bleak picture of how society structures a troublesome situation for men living with obesity who want to lose weight. This section of the chapter has

highlighted that men living with obesity experienced significant weight gain in the various contexts of working tirelessly to progress their work career, once they had gained promotion, and during periods of unemployment. As such, weight gain amongst men as a likely consequence of the successes, failures and dangerously competitive climate of contemporary workplaces probably also tells us something about the difficulties associated with being a man living in late capitalism.

### ***Negotiating the life course and weight gain***

Smith and Holm (2011) have previously suggested that men living with obesity predominantly explain instances of weight gain in reference to life course transitions. Of note in their study was the significance of the series of alterations to everyday social obligations recounted by men when moving from youth to adulthood, especially in the domains of education, work, and family life. Like the men in our study, life course transitions were understood as encouraging weight gain through preventing the amount of physical activity participation the men had become accustomed to during their youth. Smith and Holm (2011) thus propose their findings indicate that a relevant preventative public health initiative would involve encouraging sports clubs and governing bodies to make a more concerted effort to retain the participation of men as they move from youth into adulthood. However, our data and analysis provide a more detailed perspective, which challenges the likely impact of Smith and Holm's (2011) recommendation that limiting the amount of physical activity participation lost due to entry into adulthood via continued participation in youth sport would reduce the likelihood or at least the rate of weight gain. Our analysis demonstrates that although there was a genuine appetite amongst men to continue regular engagement in their childhood and youth sports of football and rugby, this was simply not feasible due to the time constraints brought about by various competing demands of adult life stage expectations. Moreover, men in both our study and Smith and Holm's (2011) also pointed out that serious injuries acquired by playing sport earlier in life meant that they could no longer play in a competitive manner following medical advice. Despite the constraining factors of adult responsibilities and expectations as well as the obstacle of lasting injury, most men in our study who had played sport during childhood and youth, none of whom currently played for a club, were unwilling to take-up alternative physical activities which were not in keeping with the competitive sporty identities they had established earlier in life.



In one way, this explains the popularity and importance of football-based weight management programmes to most of our participants, which only demand around an hour of the men's time and where physical contact with other players is restricted to reduce injury prevalence. Yet, this evidence also questions the likely impact of Smith and Holm's (2011) suggestion of encouraging sport organisations to promote adulthood participation in competitive sports that men no longer have the required spare time or physicality to fully commit to. Instead, our findings centre upon the significant role played by dietary habits men established during childhood in parallel with the relatively greater amount of physical activity most of the men were involved in during their childhood and youth. While these dietary habits were sustained into adulthood, their levels of physical activity were not, and some men identified this as the crucial turning point in their experiences of unwanted weight gain. Although it may seem odd to suggest increased dietary interventions and awareness amongst young males who are regularly active through competitive sport as they approach entry into adulthood, it is this population of men in particular that our data and the available literature from a similar study earmark as being on the cusp of experiencing significant, unwanted and continued weight gain. Due to utilising football-based weight management programmes as a convenient setting from which to recruit men living with obesity to participate in the study, it is possible that our data could be skewed in relation to recruiting a high proportion of men who played competitive sport during childhood. However, it is worth mentioning that participants who identified maintaining the type of diet required for regular sport participation after their participation had ceased as a pivotal moment in the onset of long-term weight gain was a perspective shared by some men with no experience of football-based weight management programmes. Furthermore, the similar findings of Smith and Holm (2011) were drawn from a participant sample of people living with obesity recruited via prior involvement in a representative national dietary survey, which seems to rule out any potential bias in our data in relation to uncovering such a trend and enhances the transferability of our findings to the experiences of weight gain amongst other adult men living with obesity.

### ***Work life, employment circumstances and weight gain***

In terms of the influence of work life upon weight gain, there is evidence that work-related stressors can encourage changes in weight amongst men and women (Hannerz et al., 2004; Lallukka et al., 2005), although there is some doubt about how strong these associations are (Nyberg et al., 2012; Solovieva et al., 2013). For the most part, studies illustrate that

higher job strain increases the likelihood of weight gain amongst overweight men and the likelihood of weight loss amongst men with a lower BMI (Hannerz et al., 2004; Kivimaki et al., 2006; Nyberg et al., 2012). Thus, it seems likely that the men in our sample were predisposed to work-related weight gain influences, due to currently living with obesity. Previous research intimates that although work-related stress and strain play a part in weight gain amongst men already living with overweight and obesity, this is brought about through interaction with various life course pressures and responsibilities, such as fatherhood (Umberson et al., 2011), as well as unexpected and unsettling life events (Nyberg et al., 2012), as also explained by the men in our study.

However, when this unanticipated life event is loss of employment, subsequent onset of weight gain has been identified by two UK-based longitudinal data sets (Monsivais et al., 2015). The patterning of this relationship was also not limited to men and might be more prevalent amongst women. The findings provide further evidence of socio-economic inequalities regarding the prevalence of obesity, higher bodyweight, and weight gain amongst lower socio-economic groups (Ball & Crawford, 2005). Monsivais et al. (2015), the authors of the paper, recommend that further research is required concerning the material and psychosocial mechanisms which may underpin the potentially causal relationship between loss of employment and weight gain. The accelerated weight gain experienced by Andy, who described how his weight has 'ballooned' since he became unemployed, is characteristic of the connection between weight gain and unemployment, especially pertinent in the current economic climate, where UK redundancy rates in the eight months since the outbreak of COVID-19 have increased at a faster rate than the same initial period of the 2008-9 financial crisis (ONS, 2021).

### ***Implications for policy and practice***

The experiences of weight gain amongst men living with obesity presented in this chapter carry implications in terms of the crucial role of the life course scenarios in which significant and unwanted weight gain occurs, not simply through biological ageing but via the various social expectations and pressures the men experienced as they encountered and negotiated different life stages.

- There is need for greater recognition of the life course context in which weight gain and the development of obesity take place within public health policies, not simply through biological ageing, but via the various social expectations experienced by men as they encounter

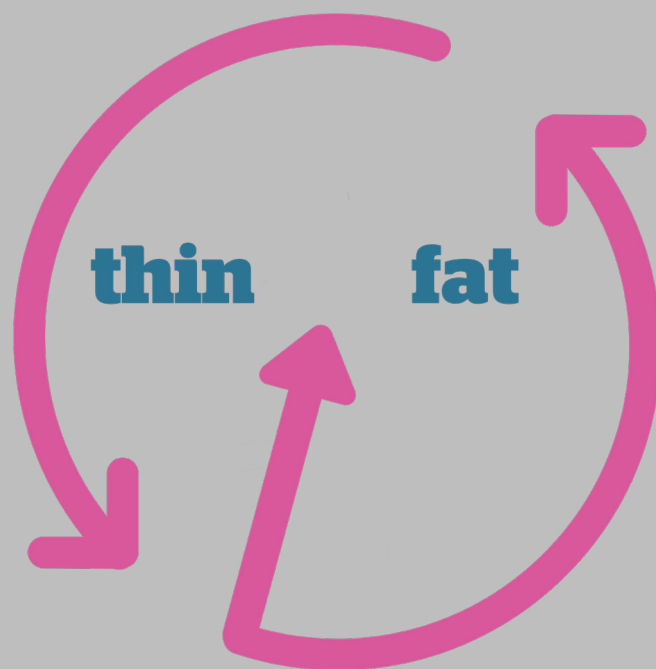
and negotiate the adult life course. We have presented data that highlights early adulthood, becoming a father, the peak of working life, and career progression as pivotal stages in life when men seem to be more likely to gain weight. Furthermore, due to being in the constantly unsettling scenario of facing the omnipresent stigma of living in an obese body, when encountering unanticipated life events such men are already in an unstable predicament, which can trigger behaviours that promote a vicious circle of weight gain and depression. Consequently, attempting to lose weight is not always their most pressing health and wellbeing concern, and until this is acknowledged, obesity reduction and prevention strategies will miss the points in the life course at which they will likely have most impact.

- While regular sport participation is often associated with a healthy childhood and the development of a sporty identity, it appears that amongst men, the most popular sports they devote time to during childhood are not sports which are conducive to regular participation across adulthood. Men in our study also expressed a lack of interest in participating in alternative physical activities which were not indicative of the type of sporty identity they had established as children. This became problematic for men, as they cited the maintenance of childhood dietary habits, established within a life course stage when involved in regular sport participation, as the underlying cause of significant initial weight gain during adulthood. There is evidence to suggest, both in our research and another study containing a representative sample of men, that dietary advice and interventions amongst men who have recently finished or are about to end their regular participation in football and rugby could act as a preventative strategy against the development of significant weight gain and obesity.

## Chapter 3

# **Rapid Fixes, Long-term Failure, and Identity Adjustment:**

Men's experiences of weight cycling



Understood together and over the unfolding of time, men's recollections of weight loss and weight gain discussed in the previous two chapters represent the phenomena of weight cycling. This is a common experience amongst people involved in dieting and weight loss strategies and also extends to specific populations of people with lean and 'normal' bodyweights (Montani et al., 2015). People of 'normal' weight status more likely to seek the significant and rapid weight loss that encourages weight cycling include children seeking to obtain an 'ideal' slim body, older age women, those looking to improve their sport performance, and entertainment industry employees (Montani et al., 2015). Although there is limited evidence that weight cycling poses a further health risk to those living with obesity (Mehta et al., 2014), the men in our study found this a persistently frustrating and demoralising element of their experiences of attempting to lose weight. This initiated doubts amongst the men, as to whether weight loss beyond a certain threshold was possible. Subsequently, a shared experience across men's stories of weight cycling was how weight loss advice provided by weight management services was initially effective, but gradually this efficacy waned, also making it difficult for the men to maintain their motivation to sustain what they saw as sweeping changes to their lifestyles. As a result, men often cited their own lack of discipline as the underlying catalyst for weight regain, further compounded by the difficulties they had experienced in avoiding weight regain after completing individual diet plans. To the extent that some men made comparisons between experiences of commercial weight management programmes and diet plans in terms of the prevalent outcome of rapid but unsustainable weight loss followed by weight regain. Experiences of gaining weight through involvement in commercial weight management programmes also evoked emotions of extreme shame, which made for unsettling ordeals counterproductive to continuing to access services and sustained weight management.

In this chapter, weight cycling is initially explored in the context of unhealthy experiences of practicing individual dietary weight loss strategies. All the men we spoke with, except the one participant who had not previously attempted to lose weight, referred to instances of weight cycling experienced through engaging in individual weight loss practices. This also emphasises how the men generally struggled to avoid weight cycling when attempting to instigate and maintain vast lifestyle changes with limited, if any, social support. Such unsuccessful experiences acted as a motivating factor for seeking support from weight management services, and accordingly, the chapter then turns attention toward the men's experiences of weight cycling, which were frequently connected to

encounters with commercial weight management programmes by those who had accessed this type of service. In closing the chapter, discussion revolves around the blame game of weight regain to illustrate the multi-faceted complexity of weight cycling. Here, we highlight that identity adjustment amongst men living with obesity should take precedence in efforts by policymakers and service providers to improve health and wellbeing outcomes and experiences for such men who want to lose weight.

### ***Individual weight loss practices***

For men with experience of integrating individual dietary weight loss strategies into their lifestyles a commonality amongst their appraisals was that dieting worked in the first instance, and sometimes brought about rapid weight loss, but was not a feasible solution for long-term weight management,

*I've done Atkins diet before, again I lost about two stone, and obviously since then put it back on. I've tried SlimFast. Again, it worked for a while... but obviously your urine starts to smell of meat. It's not pleasant. It does work, but it's probably not the best diet to stay on anyway... A [relatively] massive amount of anything isn't good for you. Whether it's protein, carbohydrates, or whatever... it works, but not to that extent. (Mark)*

These sentiments were echoed in Wayne's experiences of going through 'a lot of false starts', and the 'mixed results' experienced by Callum, who contrary to the overarching reported benefit of losing weight, also found this weight loss method to be detrimental to his overall health,

*When I was at my peak [weight] I was diagnosed as diabetic, and one of the things I was told is 'you need to lose weight'. I wasn't given any guidance on how to lose weight and I played around with things like the Atkins diet... the weight came off like a balloon, really came off very fast, but it went straight back on again when you stop doing it. And if I'm honest, while I was doing it, I wasn't really feeling all that well.*

For Elliot, and other interviewees with experience of sticking to strict dietary routines, lack of long-term weight loss after reverting back to a more feasible lifestyle once the diet plan had finished was the crucial experience which highlighted to the men the lack of sustainability inherent to this approach,

*I've tried Slim Fast, and they work for a little bit but they're not sustainable, I*

*always find that you can do it for a couple of weeks, and you can probably lose half a stone depending on how strict you are, but then, once it's over, you've got nothing to replace what you were having, instead of having the milkshakes you have a Meal Deal sandwich, the weight flies back on.*

Most of the men who shared weight cycling experiences like Elliot's were reluctant to participate further in dietary plans. Whereas Elliot, prior to the 12 months before interview, had persistently used a dietary plan as an initial 'springboard' for then attempting more sustained weight loss via other means. However, as the above interview excerpt suggests, this strategy had resulted in repeated experiences of weight cycling, and significant weight gain overall for the majority of the past 10 years, since Elliot was 15 years of age.

Some men also flagged-up the likely role played by traditional masculinities in informing their initial preferences to try and lose weight by themselves, to maintain an image of strong independence. This was opposed to reaching out for help from services, which they thought would symbolise weakness and a dependence on others,

*I've got to confess I'm one of those people who I'd normally try and do things myself, whether rightly or wrongly... you always see these programmes where Weight Watchers people are made to look silly that haven't lost the respective weight. I don't know whether it's a play-up on the actual topic maybe, but for that reason I had never gone along, and I've never wanted to pay to lose weight. So, I have never really joined anything serious like any dieting clubs at all. I suppose I'm a typical male in thinking that I can do it myself [laughs].*  
(Peter)

Shane, a former weightlifter, who continued to compete into his forties and had experienced weight cycling for the past 25 years after developing depression at around the age of 45, was reluctant to accept one-to-one telephone support from the public-funded weight management programme he had begrudgingly started attending, even though engaging with this service had, thus far, interrupted the constant repetition of weight cycling,

*They ring you up every couple of weeks, in this My Weight Matters, and they say, 'just ringing to check-in, are you losing weight? blah, blah, blah'. I said, 'not really', they said 'oh, but you've lost two kilos in 12 weeks'. I said, 'have I? I might have lost two kilos*

*but at this moment in time I'm probably one kilo less than at the beginning'... 'Oh yes, but it's all slowly'.*

Except for Callum, all other men involved in the study who had experienced weight cycling brought about by following a diet plan had then moved their focus toward weight management services in the hope of finding a more feasible and sustainable solution. However, in the main, those men who had opted to participate in commercial weight management programmes, rather than football-based or public-funded forms of service, continued to weight cycle. These men relayed storied experiences that illustrate issues with the ways commercial weight management services are structured and provided, which tended to produce undesirable outcomes that included and reached beyond crude numeric fluctuations in weight, by also damaging men's sense of self-worth.

### **Commercial weight management programmes**

Although men attended commercial weight management programmes in search of a method to break their continuous experiences of weight cycling, some men, such as Hugo, experienced little difference between doing an individual dietary programme and following the dietary regime of commercial weight management programmes, also reflected in the same outcome of weight cycling,

*The F-Plan Diet... it was just a high fibre diet; it was a bit trendy in the last century. And that was quite good, that worked quite well. But it didn't succeed so I gradually put on more and more weight as I got less exercise. I went to Slimming World a couple of years ago, I tried to lose some weight and managed to lose a few pounds... I just didn't find it very easy and it's sort of gone back on.*

Another parallel was drawn by Elliot, in terms of how commercial weight management services also encourage members to purchase their dietary products, 'if you're on Slimming World... they do a range of frozen meals in Iceland, but they're horrible, they don't taste very good'. Although he invested more time and money into commercial weight management services than individual diet plans, Elliot eventually got tired of the weight cycling and stopped receiving support via this route,

*Weight Watchers, Slimming World... they never really worked long-term for me... it never worked for us, me or my nan. We go for a bit, then as soon as we stop losing weight and you put a bit on, it feels like it's not worth going back so you stop*

*going. Because that kept happening, I just refused going back, never worked, not worth paying all that money for.*

Through attending commercial weight management programmes over a 20-year period and concomitant experiences of weight cycling, Harry was also critical of this type of programme due to a lack of weight

loss beyond a certain point and the limited advice offered by consultants,

*You start asking them questions and you think 'well, actually I'm not getting a very good answer back with this one' and that's when you realise that you're not really getting anywhere... the people who are running it are not dietitians, they have very, very little knowledge... when I've went to these classes for the first three weeks you'd be losing three, four, five pounds a week, which is great when you got on the scales, but then you found once you've lost about half a stone then it really is down to Sellotape on your mouth and keep running up and down the road to lose any more weight because they had no more knowledge.*

As with individual dietary plans, most men identified the unsustainable amount of initial weight lost through attending commercial weight management programmes as a fundamental drawback to why, overall, they considered them to be an ineffective long-term weight management strategy,

*I've done the Slimming World, lost a lot of weight but put it all back on. Done Weight Watchers lost it, put it back on... Slimming World, the first week I lost what I now see as too much weight. But I didn't realise that at the time. I lost like 11 pound in the first week... within the first month I'd lost nearly two stone and it literally was just falling off me... both Weight Watchers and Slimming World is very much 'how much can you lose this week? how much can you lose this week?' It almost seemed to be pressured to lose as much as you can... the fact that you have a 'Slimmer of the Week' award, what's that all about? (Ben)*

As well as the interpretation held by some of the men that the structure and delivery of commercial weight management services encouraged unsustainable and rapid weight loss, thus increasing the chances that weight regain would eventually converge upon them, Matt was conscious that such programmes had attempted to complicate his relationship with food by making him feel guilty about eating and

drinking for pleasure by giving foods a 'syn' score. With higher scores affixed to foodstuff that should be consumed less often, Matt was further bewildered by the attachment of relatively high syn scores to foods that other people and dietary plans consider to be healthy and lower syn scores to produce such as alcoholic beverages,

*I'm now starting to look into intermittent fasting... there's a lot of things that Slimming World do, say and advertise that completely contradicts what I've been learning through intermittent fasting... so, on Slimming World, me, as a bloke of a certain weight, I'm allowed 35 syns a day, yeah? So, if I was to have a can of Strongbow, that would be nine syns. Whereas like on intermittent fasting, they would say 'don't have Strongbow because it's full of sugar, it is a very sugary alcohol. It's like fizzy carbonated, it's very bad for you'. And then with Slimming World, when you look at an avocado, one avocado is 14 syns, right? And with intermittent fasting people are saying 'they're very good because they're healthy fats, good for society, good for like keeping your belly full, making you feel full, making you feel that kind of satisfaction that you would get from other foods'.*

Bringing together men's doubts about the credibility of dietary advice offered, comparisons drawn with unsustainable individual dietary plans, stories of rapid weight loss and being told to view the consumption of foods as more or less sinful, it is unsurprising their experiences and enduring judgements of commercial weight management programmes were characterised by weight cycling and disappointment,

*Why did I return [to a commercial weight management programme]? Well basically because I noticed my weight was going up again and clothes were being too tight to put on and suddenly think 'I've got to do something about this'. So, they're the only choices out there really and truly, so you go back to it again thinking 'maybe...'; you see something on the television, they've changed the way they're doing it now, you know, it's a new regime and all the rest of it, but when you get there it's the same regime turned round the other way. (Harry)*

For men who persisted with commercial weight management programmes beyond the initial

point of the 'weight coming back on' following initial rapid weight loss, there was also something of a pattern between feeling emotionally unsettled and fluctuations in weight, described by Stuart as a 'lifelong battle'. Elliot's explanation of this phenomena, indicative of the thoughts of men with similar experiences, centred upon a disregard amongst commercial programmes for the emotional aspects of weight management and living with obesity, in favour of imposing a doctrine of only behavioural weight loss requirements and judgements upon attendees,

*How you're feeling affects what you're eating. Slimming World and Weight Watchers, it's not about that, it's not about how you feel, it's about 'this is what you should and shouldn't be eating, have you done it?' There are no personal touches to it.*

This approach by commercial weight management consultants left other men, such as Ben, scared to attend future sessions when they feared they might have gained weight since their last weigh-in,

*I hit the three stone [weight loss target] within a couple of months or whatever, and it was, 'well, I've done it', you know, stupidly, I've done it. At that point if only I'd have carried on, I would have been fantastic, but it wasn't... I knew there'd be a week... it was a holiday week, a perfectly natural reason to actually put on a pound, but nevertheless, it was a case of 'I'm just not going to do it. I'm not going to go and face that', and I used the excuse 'well I'm away on holiday still', which would have been true. And that was it... once I'd made that decision that one week, that was it... I was never going to go back after then.*

Ben's story paints a harrowing picture of the experience of being exposed to the emotionally insensitive philosophies that seemed to underpin the social context of commercial weight management programmes. The unabating fear of gaining one pound in bodyweight despite losing three stone overall played a prominent role in the weight cycling that ensued, and eventually Ben found himself in the same circumstances in which he had started,

*There was never going to be a return to happy clappy when you lost four pounds or whatever. I was never, ever going to go back, even though the following week I could well have lost three or four pounds and that would have been it. But it wasn't, when I got to that point, whereby I knew I'd put on a pound, or two pounds with*

*Slimming World... I'm not going to do it; I'm just not going to face it. And then the following week, it was that quickly, I was just back to eating absolute rubbish again. OK, I didn't put the three stone back on overnight, but I just knew long-term I was going to be back exactly where I started.*

Ben's reluctance to return to the social context of commercial weight management programmes might also be partly explained by a masculine reticence to avoid feeling inferior in a room full of women and being perceived as having behaved irresponsibly since his last weigh-in. Contrary to this suggestion, the more complex motives for Ben's reluctance to return appeared to be more informed by the sentiments he held for having to watch others go through the ordeal of being told they had regained weight. These sentiments were grounded in and evidenced by his prior experiences,

*It doesn't suit me. I'm sure for a lot of people it is fantastic. It can be motivational and everything else, for some bizarre reason I'm always thinking of the poor one person in the group or two people in the group that haven't lost any weight. For some reason I seem to focus more on them, than on myself... I think I know how they're feeling going by the looks on their faces... you see them go from the scales and I can remember, oh crikey, Weight Watchers... I can remember a lady bursting into tears, at the scales. You shouldn't be feeling like that, you know... she couldn't stay for the group meeting. It was like, 'Christ, seriously is that what trying to lose a few pounds does to you?' For me personally, it doesn't work, it just does not work.*

Frank spoke in-depth about his observations of how unpleasant and insincere the social environment of commercial weight management services could be when someone had gained weight,

*I just didn't really like the atmosphere. When they'd be sat around talking about other people in the group when they're not there, you're sitting there listening to them slagging off someone who's not there, and when they're there they are all pally pally with them saying, 'you've done this, you've done that, you've tried really hard, well done'. And as soon as they walk out the room, it's 'f\*\*king silly cow, why has she managed to do that? how come she can't do it?' What they're*

*saying about you behind your back could not be worse.*

All in all, it could be argued that the overall unfavourable wellbeing consequences of weight cycling experienced by most men who attended commercial weight management services carry more far-reaching consequences than the weight cycling associated with practicing individual diet plans. Although the weight cycling instigated by individual dietary plans was frustrating, this initial setback often served as a prompt for participating in the more comprehensive approach to weight management of engaging with services. When these services were commercial rather than public-funded or football-based programmes, not only did men's bodies undergo similar patterns of fluctuations in weight as when they had been exposed to diet plans, but men were also subjected to the emotionally unsupportive delivery and sometimes distressing social context of commercial weight management programmes. This left men no better off in terms of BMI and bodyweight than in any previous stage of their lives and, due to the neglect of the emotional aspects of weight management provision, men found themselves in a more precarious position in terms of their self-worth, doubtful about whether they would ever lose the amount of weight they desired and keep it off, and uncertain about where to turn next for support. There was also evidence that commercial weight management services unnecessarily complicated and heightened the sense of emotional shame of eating certain foods, which were also connected with experiences of weight cycling. Some of the men we interviewed subsequently discovered football-based programmes, that gave rise to some of the favourable outcomes covered in our chapter on weight loss experiences, and others began attending public-funded programmes, which were typically reported as being more emotionally sensitive. Yet, at the time of interview, other men living with obesity were still in the precarious position in which their unhappy experiences of commercial weight management services had left them.

### ***Pointing the dial: The blame game of weight regain and identity adjustment***

While the previous section focused on the connections between weight cycling and commercial weight management programmes, there was also something of a blame game that took place within participants' descriptions of the weight regain aspect of weight cycling. As might be expected given the content of the previous section, some of this blame was levelled at the perceived shortcomings of weight management services, especially commercial weight management programmes. Yet interviewees also blamed themselves for experiencing weight regain,

with frequent reference to 'falling off the wagon' and 'slipping back into old habits'. To some extent, these forms of popular discourse can be understood as representing no more than behavioural lapses. Notwithstanding this interpretation, our data also suggest that participants were simultaneously referring to something more meaningful when they spoke these words, in the form of the intricacies of attempting to navigate identity adjustment. Of note here was how participants who had attempted to lose weight were in the process of both escaping from, and being pulled back, to their former selves, culpable for their bodies becoming obese in the first instance. To further complicate matters, but also central to any understanding of the phenomena of obesity that holds practical relevance, some men also directed blame toward the ease with which one can gain weight while living in an increasingly obesogenic society.

In this final section of the chapter, we draw on the accused root causes that feature in this blame game, to do some justice to the complexities of participants' experiences of the weight regain aspect of weight cycling. While weight management programme type and delivery as well as living in an obesogenic society that simultaneously shames 'fat people' are undoubtedly important factors in weight regain for those living with obesity, we illustrate that it is identity adjustment which is at the crux of men's experiences of weight regain. Of course, experiences of identity adjustment overlap with both the agency involved in practicing weight management strategies and the structural contradictions of everyday fat shaming and readily available opportunities for weight regain, but it is primarily the complexities of identity adjustment to which policymakers and service providers should pay most attention to prompt improved outcomes for men living with obesity who wish to lose weight.

Gareth's reported experiences of gaining and losing weight were typical of the phenomena of weight cycling articulated by most of the men we interviewed, where descriptions of yo-yo shifts in bodyweight, difficulties with sustaining radical lifestyle changes and slipping back into old habits were commonplace,

*I was doing Slimming World probably up to about two years ago, and I found I done really well, it's just like everything, I've done really well to start with, and that's my problem. I'm just like a yo-yo... once I get the bit between my teeth, I can do it and then sustaining it is what I struggle with. I did Weight Watchers like when I was a lot younger, but I've been doing Slimming*



*World on and off. It was slightly different in that everything had points. But obviously, as I've got older and I've got kids, and I've got other things going on and works busy all the time... you have to make the time to make the meals and everything else. And when time is short, you know, you'd kind of slip into old habits. I've tried to say to myself, 'right this week, I'm going to cut this out and I'm going to cut that out'. Every sort of other year I've gone three or four months without having a drink. I've got that MyFitnessPal app. Again, I started that a couple of months ago, done really well on that for a few weeks and then, you know, off the wagon again.*

Peter's similar experiences to those of Gareth led him to form the perspective that fluctuations in his weight were due to his 'half-hearted' approach to following guidance offered by weight management services. Despite having his physical activity and dietary routines disrupted by COVID-19 lockdown restrictions, Barry felt that anything other than blaming himself for the bodyweight he had subsequently accrued would be an attempt to divert attention away from his own individual failings,

*Lockdown has certainly posed some challenges for me. But then, equally, being harder on myself I wonder whether I'm just using lockdown as an excuse. In the way that I am, I don't like people who make excuses. I think it's really easy to find excuses and I sit 'round those Slimming World groups and you listen to people say why they've had a bad week and you think 'you're kind of clutching at straws there, you're scratching your head trying to find any reason'. For me, although I think lockdown has had an impact, and I genuinely think it has because it's knocked me out of my routine, I also think the fault lies with me and, in my own mind, I leaned too heavily on lockdown as a reason that I've put weight on and some of it is me just letting things slide.*

Likewise, a character failing of a lack of self-discipline was how Geoff perceived his persistent experiences of weight regain,

*I can blame all sorts of things, but yeah, bottom line is because I don't have that self-discipline to stick to things, to consistently eat healthily, to exercise regularly, not to binge on chocolate, not to drink beer when I don't need to.*

Whereas Hugo took the position that his inabilities to avoid 'temptation' on a long-term basis were not entirely his own fault. Instead, he believed his engagement with commercial weight management programmes and individual diet plans had not sufficiently prepared him to psychologically negotiate the lure of particular foods.

60 year-old Dean, who had regained two stone in bodyweight after initially losing five stone over the past few years, adopted a more pessimistic position, by detailing his suspicion that weight regain was going to be problematic for him to avoid following the damage he had already done to his body earlier in life,

*Looking at old photographs of holidays, I look at myself and think, 'my God, I don't want to go back there'. In those days, I didn't really worry about it. I just got on with it and enjoyed all the good things in life with no thought towards what it's doing to me.*

Harry raised concerns that his experiences of weight regain had been enabled by multiple factors, including his younger self, which he was attempting to detach himself from. Although he was finding this difficult within the context of living in an obesogenic society,

*I've never been a small person. Then as I got older... problems, they got more difficult... I've always struggled with weight. I've done all the weight courses you can go on, and they're all basically useless because it doesn't matter what they say in the beginning of it, as you get into it, after three or four weeks, it's running and physically exercising as much as you can and don't eat anything... I'm part of that society that easily puts on weight. I've never been a thin person since I've been young... When I was young there wasn't that much money around and if food was put on your plate, you eat it all, you didn't leave anything on your plate, you eat it all, and so that stays with you through your life.*

Stuart's occasional reversion to binge eating was indicative of men's uncertainty of inhabiting a fragile space between the previous and desired self and the turbulence of experiencing this seemingly endless identity adjustment,

*I still think I've got a problem with food, yeah... I have good times and bad times. There are good times when I'm really on it and I stick to my calories and then bad*

*times where I just sort of go off the rails still... binging, secretly binge eating, go to McDonalds and have some burgers [laughs] yeah, it's a bit embarrassing to talk about, really... it's something I've always done... but I'm in a better place now on the whole. I mean, I still go for it when I can but I'm a lot better than I was.*

Such data underscores that losing weight and maintaining this over an extended period of time is not simply a case of dietary and lifestyle changes determined by individual choice, but a transition which also requires corresponding identity adjustment, and is thus informed by prior habits. A return to behaviours symbolic of aspects of the self from which men were trying to escape, that encouraged weight regain and cycling, could be triggered by changes in everyday circumstances brought about by both recent life events, like becoming unemployed, and more structural changes to society, such as the COVID-19 lockdown,

*This time last year I was at my lowest I've been since probably a teenager, I got down to 16 stone 10. Then I got made redundant this time last year. Again, sought solace in eating, so I put a couple of stone on. Then lockdown came and I sort of fluctuated. At the moment I sort of fluctuate around 19 stone, but I've obviously got another couple of stone to get back down to around 17. I'd be happy at around late 16, early 17. I know it's still big, but for me it's not.*

In scenarios where men had regained weight but remained in a position of having lost significant weight overall since deciding to engage with weight management services, there remained some level of compulsion to go back to previous habits. This sense of compulsion was particularly strong for Barry, who compared his everyday encounters with food to those of a recovering alcoholic,

*I just really bloody love food. Given the opportunity, if I didn't have to worry about my weight, if I was one of those people that made a super-fast metabolism, I'd eat all day long, all day, every day. I love food. I love all kinds of food. You put a plate of food in front of me I will probably like it. I like savoury stuff, I like sweet stuff... the reason I say it's almost like an addiction is because if I'm confronted with it I can feel the compulsion to eat it. If I'm given a piece of cake, I can physically feel the compulsion to eat that and it requires a*

*concerted effort to not do it, because I know if I eat that bit of cake, it's a slippery slope because I'm then going to eat something else... I'm not an alcoholic thankfully or a gambling addict, but just like my understanding of how that works, that if an alcoholic goes into a pub, they may be able to resist everything that's there, but if someone gives them a pint and they drink it, that second pint's going to come a lot more easily. That's the way I see my own issue with food... the reason also that I label it almost an addiction is because I'm three and a half years into Slimming World and I still feel the compulsion to eat stuff, I still feel that I have to make conscious decisions to mentally turn things down. It isn't automatic... confronted with a piece of cake I can still feel the temptation, that temptation has never gone away for a moment for me... I don't expect that compulsion to ever go away. I feel stupid saying it's an addiction in a way because I don't think anyone would ever medically diagnose you with a food addiction... my understanding is you're never a recovered alcoholic, you're always a recovering alcoholic because if someone tries to give you a beer, you're probably tempted by it, but it's just about 'have you got that power to turn it down? Have you got the power to walk past the bookies? Have you got the power to leave your vice, whatever your addiction is?' And it feels that way still with food for me.*

The data presented in this chapter regarding the weight cycling experiences of men living with obesity reveal how it appears to be common for men to seek support from weight management services only once they had weight cycled through briefly practicing individual dietary plans. While there was an understanding amongst the men that following a strict dietary regime was an unhealthy experience, for the most part this did serve to stimulate their interest in accessing weight management services. Men who consequently became involved in commercial weight management programmes reported that they continued to experience weight cycling, which they saw as being connected to the emotionally insensitive way commercial weight management programmes were structured and delivered. While there was much criticism levelled at this form of service, this also formed part of a more ubiquitous blame game that emanated from men's unsettling experiences of the weight regain aspect of weight cycling. In addition to the sometimes harrowing experiences of attending commercial weight

management sessions, men also blamed their own lack of self-discipline, despite an awareness voiced by some men that living in an obesogenic society made sustained weight loss more difficult than it needed to be and weight regain more likely. At the centre of men's concerns about service provision and delivery, difficulties with negotiating everyday food temptations inherent to the unavoidable structures of contemporary society, and self-doubt about whether they possessed the character traits to be able to avoid weight regain, was an unshakable anxiety that they would be unable to leave behind their former selves and were destined to eventually return to 'old habits'. In conclusion, although the health implications of weight cycling appear to be minimal and at best unclear, men's experiences of this phenomenon invoked harmful consequences for their self-worth and overall wellbeing, whilst also revealing the significant role played by the turbulent yet desired identity adjustments that underpinned their behavioural inclinations. Moreover, men living with obesity are more than aware that they are already at relatively greater risk of undesirable health outcomes.

### ***Experiences and lived consequences of weight cycling***

Despite a lack of previous in-depth qualitative research on men's experiences of weight cycling, Bombak and Monaghan (2017) have paid some detailed attention to women's weight cycling experiences. There are some parallels to be drawn with our current study, as like the men we interviewed, the women had experienced living with obesity, although unlike our investigation, not all participants were living with obesity at the time of interview. Nevertheless, women who had lost sufficient weight to fall outside of the crude medical BMI descriptor of obesity when interviewed, still expressed a nervousness that the preferred self-identity they were in the process of reshaping for themselves could be endangered if they were to make even the most minor relapse into what they described as their 'deviant' and 'obesogenic' previous behaviours (Bombak & Monaghan, 2017: 931). Thus, like the experiences of weight cycling described by the men we spoke with, women were not able to completely detach themselves from their prior selves, even when they had left their heavier bodies behind and were on a personally desirable trajectory in terms of their quantitative weight and lived self-identity. Weaving together our interpreted meaning from the men's interview data with that of Bombak and Monaghan's (2017) representation of women's experiences, we argue that, regardless of gender, the figurative weight of stigma that structures the motivation to leave behind the shamed obese self for those living with obesity carries equal if not greater

and more immediately observable ramifications than the relative risk of poor health.

### ***Implications for policy and practice***

In this chapter, we have presented evidence fundamental to men's experiences of weight cycling, revealing frequent associations with practicing individual dietary weight loss plans and attending commercial weight management programmes. We then described the blame game of weight regain, central to men's insecurities that their efforts to maintain sustained weight loss would always be hampered by returning to their 'old habits'. Informed by these insights, we highlight the following implications for policy and practice:

- In terms of the outcome of weight cycling and the pattern of rapid weight loss followed by gradual weight regain, participants observed little difference between following individual dietary weight loss plans and commercial weight management programmes. Furthermore, most men described the experience of attending commercial weight management programmes as unsettling, through aspects of such programmes that confused and further emotionalised their relationship with food whilst also adopting a strictly behavioural approach to explain and encourage weight loss. Therefore, to encourage more instances of long-term sustained weight loss amongst men living with obesity who attend commercial weight management programmes, we recommend a more affective and genuinely personal approach, that sufficiently acknowledges the delicate position that attendees are placing themselves in. We have also presented some evidence that intimates subliminal messaging about the sins of eating used by commercial weight management services is connected to instances of weight cycling amongst men.
- For men living with obesity who want to lose weight, fears about reverting to old habits, doubts about having enough self-discipline, and the difficulties of living in an obesogenic yet size shaming society are reflected within their ongoing identity adjustments. These turbulent intricacies of identity adjustment are inseparable from and strongly informed men's responses to experiencing weight regain. Thus, the predominantly behaviour-focused approach to losing weight employed by commercial weight management services, which overlooks this, does not fully prepare those men who attend to emotionally negotiate distressing encounters with weight regain.

# Conclusion



This study set out to investigate experiences of losing and gaining weight amongst men living with obesity. In terms of men's experiences of weight loss, our analysis of the collected interview data highlights the important role played by the type of social support instigated through the collective action of practicing weight loss strategies with other men and women also living with obesity. Regarding the men's experiences of weight gain, dealing with unanticipated yet significant life events and negotiating gendered expectations connected with the adult life course represented periods of time when this was more likely. Understood collectively and over time, experiences of gaining and losing weight constitute instances of weight cycling. These fluctuations in bodyweight were commonly experienced by men who had attended commercial weight management programmes, which, by overlooking the turbulent and delicate identity adjustment the men were immersed in, fell short of adequately preparing the men for experiencing weight regain. Distressing encounters with weight regain and harrowing memories of attending commercial weight management programmes cemented some men's deep-rooted fears that they lacked the self-discipline to permanently lose their unwanted bodyweight and were destined to eventually return to the 'old habits' which had led to the development of obesity. Extremely aware they were living in an obesogenic society, men who articulated such fears found themselves in a predicament whereby they were no better off in respect of their desired bodyweight, but worse off in terms of their sense of self-worth and overall wellbeing than when they set out on their journey to lose weight.

### ***Implications for policy and services***

Based on these findings, we outline the following implications that could inform developments and transformations to weight management services and policy:

- The type of social support arising from collective action in weight loss strategies with other men and women is more engaging for men than the female-centred group discussion element of conventional weight management programmes.
- To increase the involvement in and adherence to weight management programmes amongst men living with obesity, service providers might look to incorporate weight loss practices relevant to physical activity or diet into their programmes.
- While regular sport participation is often associated with a healthy childhood and the development of a sporty identity, it appears that amongst men, the most popular sports they

- Dietary advice and interventions amongst men in the UK who have recently finished or are about to end their regular participation in football and rugby could act as a preventative strategy against the development of significant weight gain and obesity.
- There is need for greater recognition of the life course context in which weight gain and the development of obesity take place within public health policies, via the various social expectations experienced by men as they encounter and negotiate the adult life course. Early adulthood, becoming a father, the peak of working life, and career progression appear to be pivotal stages in life when men are more likely to gain weight.
- Due to being in the constantly unsettling scenario of facing the omnipresent stigma of living in an obese body, when encountering unanticipated life events men are already in an unstable predicament, which can trigger behaviours that promote a vicious circle of weight gain and depression. Therefore, the lived consequences of weight stigma mean that attempting to lose weight is not always men's most pressing health and wellbeing concern.
- Most men described the experience of attending commercial weight management programmes as unsettling, as aspects of such programmes confused and further emotionalised their relationship with food whilst also adopting a strictly behavioural approach to explain and encourage weight loss.
- We recommend a more affective and genuinely personal approach amongst commercial weight management programmes, that sufficiently acknowledges the delicate position that attendees are placing themselves in. As the existing behaviour-focused approach to losing weight employed by commercial weight management services does not fully prepare men to emotionally negotiate distressing encounters with weight regain.
- For men living with obesity who want to lose weight, fears about reverting to old habits, doubts about having enough self-discipline, and the difficulties of living in an obesogenic yet size shaming society are reflected within their ongoing identity adjustments.

### ***Study limitations and future research***

As with the majority of experience-oriented qualitative research that blends elements of purposive and convenience sampling strategies, people willing to volunteer their time to participate tend to provide data indicative of the most extreme experiences of the phenomena being investigated. However, quality sampling practices in social research are best guided by social significance, not statistical logic (Gobo, 2004). This is especially the case amongst the phenomenon under investigation in this report, as instances of living with obesity are not randomly distributed across UK society, but socially patterned, most prominently within socio-economically disadvantaged and ethnic minority groups (GOS, 2007). Along these lines, the representativeness of social research, upon which any potential generalisability is based, is ultimately performed by the data the participant sample provides, and cannot be guaranteed through research design (Gobo, 2004). Furthermore, data provided by those men who have encountered the most extreme experiences of living with obesity are arguably the most crucial and insightful for policy and service development.

A more legitimate criticism of our work is the lack of voice from minority ethnic groups. While there is bound to be some degree of transferability between our findings and the experiences of ethnic minority men, as at the most basic level obesity is concerned with the human body, we are likely to have missed opportunities to acquire intelligence unique to ethnic minority experiences of living with obesity, engaging with and resisting weight management practices. We also failed to recruit men living with obesity involved in the body positivity movement, who would have provided a unique outlook and form of experience. Although, the sharp uniqueness offered by the radical position adopted by many body positivity activists in terms of fighting weight stigma and refusing to engage in weight management practices for weight loss purposes would probably be better explored using a different set of research objectives. Moreover, the design of our study might go some way to explain why the body positivity activist we contacted refused to take part in the research.

In addition to the drawbacks of our study pertinent to the demographic and experiential variety of the sample, which should be considered in future research, our work has also identified findings that merit further investigation. We would encourage researchers to study the extent to which sporty identities developed during childhood through participation in football and rugby act as a constraint to regular physical activity engagement throughout adulthood for men and as a potential precursor to

the onset of obesity. More qualitative attention could also be paid to how employment status, job type, patterning of work hours and working environments seem to play an influential part in development of obesity, especially amongst men who are career-focused and motivated to earn more money to provide for their families. We would also recommend the use of ethnographic methods within commercial weight management settings to scrutinise the impact of programme design and delivery upon the wellbeing and long-term weight status of men and women attendees.

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## **Glossary**

**BMI** - Body Mass Index: a measure that uses your height and weight to work out if your weight is healthy. See NHS (2019) [What is the body mass index \(BMI\)? - NHS \(www.nhs.uk\)](https://www.nhs.uk)

**Commercial Weight Management Programmes** - Weight management programmes that advertise and sell their products to members as part of a profitable franchise. Examples include Weight Watchers and Slimming World.

**Football-based Weight Management Programmes** - Weight management programmes designed around playing football, accessible to adults who meet health-related criteria. Examples include Shift the Timber and MANvFAT.

**Public-Funded Weight Management Programmes/Services** - Weight management programmes and services funded by government authorities, accessible to adults who meet specific geographic and health-related criteria. Examples include Everyone Health Southend-on-Sea, MoreLife Essex, OneLife Suffolk and My Weight Matters.

**Weight Cycling** - The repetitive cycle of losing and regaining significant amounts of bodyweight. See Brownell et al. (1986) [https://doi.org/10.1016/0031-9384\(86\)90411-7](https://doi.org/10.1016/0031-9384(86)90411-7)

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