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Citation for the original published paper (version of record):

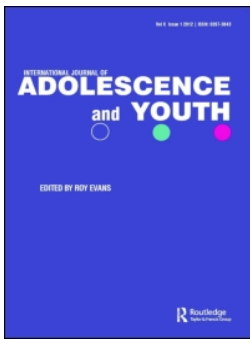
Randell, E., Jerdén, L., Öhman, A., Starrin, B., Flacking, R. (2015)
Tough, sensitive and sincere: how adolescent boys manage masculinities and emotions.
International Journal of Adolescence and Youth, 21(4): 486-498
<http://dx.doi.org/10.1080/02673843.2015.1106414>

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Permanent link to this version:

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To cite this article: Eva Randell, Lars Jerdén, Ann Öhman, Bengt Starrin & Renée Flacking (2016) Tough, sensitive and sincere: how adolescent boys manage masculinities and emotions, *International Journal of Adolescence and Youth*, 21:4, 486-498, DOI: [10.1080/02673843.2015.1106414](https://doi.org/10.1080/02673843.2015.1106414)

To link to this article: <http://dx.doi.org/10.1080/02673843.2015.1106414>



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Published online: 23 Nov 2015.



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Tough, sensitive and sincere: how adolescent boys manage masculinities and emotions

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ABSTRACT

This study aimed to explore adolescent boys' views of masculinity and emotion management and their potential effects on well-being. Interviews with 33 adolescent boys aged 16–17 years in Sweden were analysed using grounded theory. We found two main categories of masculine conceptions in adolescent boys: gender-normative masculinity with emphasis on group-based values, and non-gender-normative masculinity based on personal values. Gender-normative masculinity comprised two seemingly opposite emotional masculinity orientations, one towards toughness and the other towards sensitivity, both of which were highly influenced by contextual and situational group norms and demands, despite their expressions contrasting each other. Non-gender-normative masculinity included an orientation towards sincerity emphasising the personal values of the boys; emotions were expressed more independently of peer group norms. Our findings suggest that different masculinities and the expression of emotions are strongly intertwined and that managing emotions is vital for well-being.

ARTICLE HISTORY

Received 2 July 2015
Accepted 7 October 2015

KEYWORDS

Adolescence; boys; emotion management; grounded theory; masculinity; well-being; qualitative study

Introduction

Managing emotions

Emotions intricately affect social interaction, and the ability to appropriately deal with difficult emotions is an important skill for adolescent boys to master. It has been claimed that expression of emotions in young boys is strongly connected to contextual institutional dynamics and friendships (Mac an Ghail & Haywood, 2012). Adolescents are actively engaged in socialisation and, according to the interactionist perspective, our knowledge about ourselves and the surrounding world is created and given meaning within interpersonal relationships (Mead, 1934). Hochschild (1979, 1983) provides a way of understanding emotions as social expressions of the emotional state of the individual and as part of the presentation of self. According to Hochschild (1979, 1990), individuals follow 'feeling rules', socially shared norms regarding what emotions are appropriate to show, and when. Hochschild uses an interactionist perspective following Mead (1934) and Goffman (1959). Mead (1934) underlined the importance of social interaction for human development, i.e. internalising the generalised attitudes and perspectives of significant others, and the behaviour conditioned by the social context. Goffman

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(1959) suggested that behaviours in public settings always include the presentation of self, a performance of a character to the audience in face-to-face interaction. Furthermore, Goffman postulated that emotions are social and that self-presentations are modified depending on the acceptance or rejection of others. Goffman's 'actors' made an effort to manage outer impressions and appearances and mainly focused on surface acting.

Hochschild (1979) further emphasises the management of inner emotions, i.e. deep acting, working on real emotion inside the individual. In surface acting, facial expressions and outer appearances are modified, while in deep acting, the inner emotions are shaped (Hochschild, 1983). By 'emotion management' we mean the work required to generate emotions that are appropriate for a situation (Hochschild, 1979). The expectations to enact situationally appropriate feeling rules result in different emotional responses among individuals, which involves both surface and deep acting (Hochschild, 1979, 1983).

Gender constructions

This study explores masculinity views, by which is meant construction of masculinity norms, values, beliefs and perceptions that individuals have internalised (Connell, 2005; Pleck, Sonenstein, & Ku, 1993). For adolescents, school is an important arena to form 'feeling rules' and boys tend to be actively engaged in gender constructions to form and perform masculinity (Connell, 1996, 2008). It has been argued that both sex and gender are socially and culturally constructed (Butler, 1990; Fausto-Sterling, 2008). Emotional expressions have been shown to be gendered and being a boy or a girl is often connected to stereotypes concerning what to display when 'doing gender' (De Visser, Smith, & McDonnell, 2009; Oransky & Marecek, 2009; West & Zimmerman, 1987). Many boys are socialised to hide weakness and conceal expressions of emotional vulnerability (Scheff, 2003). It has been shown that parents display different emotions when addressing their daughters and sons (Goldshmidt & Weller, 2000). This differential treatment and behaviour, in combination with how peers, teachers and others behave and respond to adolescents, has a strong influence on how gender is produced emphasising the interactional nature of gender (Pleck, 1995; West & Zimmerman, 1987, 2009). Traditional masculinity usually refers to such attributes as toughness, anti-femininity and little emotional expression (Burn & Ward, 2005). Adolescents constantly evaluate behaviours and expressions in relation to normative conceptions of gender to discredit/accept masculine or feminine practices (Messerschmidt, 2009). Therefore, gender norms are socially constructed and what we perceive as 'masculine' and 'feminine' is contextually specific, cultural and changeable (Barker, Ricardo, Nascimento, Olukoya, & Santos, 2009; Connell & Messerschmidt, 2005; Tischler & McCaughy, 2011).

Accordingly, there is a multiplicity of notions defining masculinity that reflect the diversity of what men do, what they are, and how they are recognised, perceived and acknowledged in a given context. The concept of hegemonic masculinity can be defined as highly valued and culturally dominant in a given setting (Connell & Messerschmidt, 2005; De Visser et al., 2009). Hegemonic masculinity, characterised by emotional and physical toughness and risk-taking behaviour, is based on power relations in which men who deviate from dominant or hegemonic norms of masculinity are often oppressed and considered 'subordinated' or 'marginalised' (Connell & Messerschmidt, 2005; Gough, 2006). The concept of hegemonic masculinity has also given rise to criticism. Other masculinity notions, such as 'oppositional' (e.g. criticising and actively working against the norm of male domination in society) and 'inclusive' (i.e. embracing a variety of behaviours coded as 'feminine' with decreased levels of homophobia), are constructed to complement the notion of hegemonic masculinity (Anderson, 2008; Connell & Messerschmidt, 2005; Demetriou, 2001; Hearn, Nordberg, & Andersson, 2012; Johansson, 2011; Kimmel, Hearn, & Connell, 2005). In addition, the idea of a 'caring and present father' in the Scandinavian context contributes to a diversity of masculinities (Johansson & Klinth, 2008).

In Sweden, the gender equality policy affects a number of areas, which are all characterised by equal opportunities, rights and obligations regardless of gender (Gådin, Weiner, & Ahlgren, 2011; Hearn et al., 2012). For example, in the Nordic countries, the majority of graduates at tertiary level are women, and

men account for less than 40% (Stranden, 2015). Furthermore, family politics is expressed in the dual-earner/dual-carer family model and the idea of a caring father was politically promoted and introduced already in the 1970s (Nyberg, 2012). In 2002, Sweden introduced additional statutory paternal leave of 2 months, which is unique, enabling fathers to use 25% of the total parental leave (Stranden, 2015). In terms of gender equality, Sweden together with other Nordic countries is considered progressive by international comparison (Hausmann, Tyson, & Zahidi, 2012).

Health and gender

WHO's definition of health is 'a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity', representing a holistic approach to health and capturing its subjective dimension (WHO, 1946). Emotions, such as anger and sorrow, play an important role for health and well-being, but emotions must be regulated and dealt with to be conducive to health (Charles, 2010; Gross, 2002).

Adolescents are prone to emotionally influenced behaviours and often have difficulties in controlling behaviour and emotions (Dahl, 2004). Research shows that adolescent depression rates peak between 15 and 18 years of age, indicating a risk for increased mental health problems in older adolescents (Hankin et al., 1998). There is a growing concern about the deteriorating mental health in adolescent boys and girls worldwide (Eckersley, 2011; Jerden, Burell, Stenlund, Weinehall, & Bergström, 2011; Patel, Flisher, Hetrick, & McGorry, 2007). The health discourse often positions men as emotionally repressed, highlighting that gender and health are closely interrelated (Evans, Frank, Oliffe, & Gregory, 2011; Gough, 2006; O'Neil, 2013). Boys are pressured to be tough and silent, which may have important implications for their health and well-being (Courtenay, 2003; De Visser et al., 2009). A large body of research shows gender differences. Compared with girls, adolescent boys are more likely to drop out of school and be involved in accidents. They are also far more likely to be perpetrators and victims of violence and, although rare, have a higher rate of suicide (Gudlaugsdottir, Vilhjalmsón, Kristjansdóttir, Jacobsen, & Meyrowitsch, 2004; Kimmel, 2010; Wasserman, Cheng, & Jiang, 2005; WHO, 2000). In addition, rates of help seeking are lower, especially in older adolescent boys aged 16–20 years (Marcell, Ford, Pleck, & Sonenstein, 2007).

Perceptions about masculinity have been shown to create gender role strain (Pleck, 1995) and gender role conflict (O'Neil, 2013; O'Neil, Good, & Holmes, 1995), which impacts male health (Courtenay, 2000). There has been an increase in attention given to how different masculinities are expressed in young men's health behaviour (De Visser et al., 2009; Marcell, Eftim, Sonenstein, & Pleck, 2011). Hearn et al. (2012) argue that there is a lack of research on the effects of different masculinity beliefs on health in Sweden. Although much is known about various notions of masculinity, less is known about the relationship between forms of masculinity and emotion management as well as the potential effects of views of masculinity and emotion management on the well-being of adolescent boys. Therefore, the aim of this study was to explore adolescent boys' views of masculinity and emotion management and their potential effects on well-being.

Methods

Setting and sample

This study was conducted in a town with 56,000 inhabitants located in central Sweden, where the average educational level among adults is comparable to the educational level of the general population in Sweden. A purposive sampling procedure was adopted to achieve maximal variation (Coyne, 1997). Therefore, the participants were recruited from three upper secondary schools following different programmes: one school with mostly vocational programmes, one with mainly academic programmes and one large school with a combination of vocational, academic and introductory programmes and programmes for students with learning disabilities.

The first author (E.R.) contacted the schools through the headmasters and head teachers, visited classes and gave oral presentations on the study, which presented an opportunity for students to ask questions. All male students were given written information about the study, together with a consent form and a pre-stamped envelope. They were instructed to sign the consent form and return it to the first author if they consented to being interviewed. The criterion for inclusion was that participants were boys aged 16–17 years.

In total, 33 adolescent boys participated, 17 attending academic programmes, 11 following vocational programmes, 4 attending introductory programmes, and 1 attending a programme for learning disabilities with a vocational focus. Most of the boys were Swedish-born but five had an immigrant background, one from outside Europe, and four from within Europe. The study population came from varying socio-economic backgrounds and lived in both urban and rural areas.

The study was approved by the Regional Research Ethics Committee at Uppsala University. Ethical considerations were taken into account throughout the study. Parental consent was not needed, according to the Swedish guidelines for research involving children, as all participants were over 15 years of age (Hermerén, 2011). The participants signed an informed consent form and every participant had the opportunity to ask questions both before and after the interview. The face-to-face interviews concluded by asking the participants whether there was anything that had emerged from the interview that they wanted to discuss.

Data collection

A constructivist grounded theory approach, which involved gathering the data and performing the analysis simultaneously, was chosen, given the purpose of the study (Charmaz, 2006). This theory sees both data and analysis as being created through an interactive process between the data, researcher and participants, emphasising the closeness to the data and the interpretive understanding (Charmaz, 2006).

Individual interviews were conducted with 33 adolescent boys in 2011–2012 by the first author (E.R.) who is an experienced female social worker. The interviews lasted between 35 and 70 minutes (total 27 hours). Because the aim was to explore adolescent boys' experiences, the interviews were kept informal and conversational (Charmaz, 2006; Glaser, 2011). To be able to probe issues coming up in the interviews, we used a thematised interview guide with broad themes, around which the conversation focused (Lincoln & Guba, 1985). The guide included the following themes: manliness/masculinity that appealed to the participant; norms and values around masculinity; norms affecting well-being; emotions and emotion management (e.g. how to deal with emotions, what to display, when and how). Rather than use a fixed set of questions, this allowed us to use a flexible, iterative and emergent research design, which is a requirement in grounded theory (Charmaz, 2006).

Data analysis

The interviews were digitally recorded and transcribed in full. Data were analysed using the grounded theory method of constant comparison, from data collection and initial coding to data collection and focused coding (Charmaz, 2006). Each interview was coded line by line while staying close to the data. In addition, to develop categories, each interview was analysed by subsequent comparative analysis with other interviews. Focused coding, in which more detailed descriptions were gathered, was performed until saturation was reached.

The process included making constant comparisons between identified categories and checking for relationships between them, and finally integrating the categories (Charmaz, 2006). In grounded theory, one goal is to conceptualise an emergent pattern (Glaser, 2011). Unlike Glaser, who claims that the core variable is central, Charmaz (2006) disregards the relevance of the core category and argues that theoretical codes serve as interpretive frames, offering an abstract understanding of relationships.

The first author (E.R.) and last author (R.F.) read all interview transcripts; E.R. coded all interviews. All codes and concepts were discussed, developed and analysed together based on discussions within the research team throughout the analyses and were, accordingly, a negotiated outcome.

Results

Our findings show that there are two main categories of masculine conceptions in adolescent boys: the category of gender-normative masculinity and that of non-gender-normative masculinity. Boys who adopt gender-normative masculinity tend to conform to the social norms of the group and follow the rules that govern behaviour and expressions about what is considered appropriately masculine (or feminine).

The category of gender-normative masculinity comprises two seemingly opposite sub-categories of orientation: *towards toughness* and *towards sensitivity*. Although the related emotional expressions are in contrast with each other, both are dependent on and highly influenced by peer group norms and the collective value base. The category of non-normative masculinity includes the sub-category of orientation *towards sincerity*. Boys who adopt non-normative masculinity tend to emphasise distancing themselves from traditional or peer group norms, by focusing on individual masculinity and their own value base.

Gender-normative masculinity

Gender-normative conceptions of masculinity comprise orientations towards toughness and towards sensitivity, which are influenced by contextual factors. Common to both orientations is a need to act and behave in a socially acceptable manner as well as emphasis on the peer group as a formative arena. Different social contexts contribute to various requirements regarding what emotions to display. As one boy explained, 'When you are with your male friends, you are maybe big and tough, but with your girlfriend you are kind, cute and helpful'. When balancing the roles of how to be a young man, local gender practices and the collective value base, especially within a school or community setting, affect a boy's expressive behaviours. One participant described the influence of contextual factors:

It all depends on where you live and what school you go to. Where I lived before, a guy should have a tractor, he should use moist snuff and he should not like girls. Here it's completely different: you must have good grades, you should not drink alcohol, you should be rich and have a girl.

Orientation towards toughness

Orientation towards toughness is indicated by having a masculine attitude, i.e. by *showing a cool or tough demeanour*, and *hierarchical positioning*. Regarding emotional management, markers of this orientation are *concealing emotional pain* and keeping sensitive emotions inside.

Showing a cool or tough demeanour not only demonstrates physical and mental strength but also expresses an indifferent, cool appearance in public, mostly in the presence of peers. This position requires a plurality of characteristics, the most important being the act of concealing weakness and a fear of showing inadequacy. Being 'tough', 'cool' and 'macho' are essential behaviours to avoid humiliation. Toughness is communicated through bodily expressions such as, 'when visiting the dentist you say no to an anaesthetic'. It is also signalled through acts of bravery. One boy said, 'You should take the role of a hero and not chicken out and you shouldn't show that you're afraid'. Trying to be a hero can be seen as a response to avoid shame, i.e. it is important to suppress everything that might indicate weakness and effeminacy of character. Furthermore, female-like attributes, appearances and behaviours should be rejected to avoid being judged as sensitive or homosexual: 'A guy should not be gay or girly'.

Hierarchical positioning involves following the social norms of the group in order to fit in with peers, struggling for status and position within the hierarchy and being occupied with the role of defending traditional masculinity norms and values. By 'traditional masculinity norms and values' we mean showing strength, acting tough and avoiding all signs of weakness. Boys conform to peer-endorsed masculine behaviours in which signs of weakness and fear are repressed and emotions such as aggression or frustration are approved of and encouraged. Hence, strong peer group pressure forces them to follow the social norms of the group and mask their true feelings. One boy explained: 'It's like in a pack

of wolves: you have to show that you're strong; otherwise you can be left out'. By surface acting, the boys position themselves hierarchically in relation to each other and gain respect from others acting the role in a given social context. As one of the participants said, 'I think that there are people who are themselves and people who play a role, and those who play a role want to act masculine and maintain a masculine persona'.

For boys who are oriented towards toughness, emotions are managed by *concealment of emotional pain*, which leads to emotional restriction in expressing difficult emotions such as fear, sadness and shame. Expressing those emotions causes a potential threat to the adolescent's image and this is hence a reason for suppression, while showing aggressive behaviour may increase their status. Toughness provides surface protection against being shamed. However, the consequences of the demands of acting tough and the lack of sharing sensitive emotions may negatively affect well-being. One boy explained,

I kept a lot inside of me ... I think that's because you don't want to show that you're weak. I think boys want to hold back and not really show how and what they feel ... boys want to have that macho image.

Restricted emotional expressions, as well as being compelled to tackle everything on their own, contribute to emphasis on managing by themselves. One participant said, 'If you think hard enough, you will finally overcome them [the emotions]'. Seeking help is linked to feelings of embarrassment and shame and, subsequently, asking for professional help is not considered an option. As one boy said, 'You put up the shield and become that masculine person that you really are not and then maybe you don't go and ask for help'. Furthermore, seeking support is not in line with the image of being 'a perfect guy'. Expressing reluctance towards seeking professional help is caused by fear of being 'labelled' psychologically weak. Moreover, emotions can be released through the body. 'You just go out and play some paintball and get rid of all your troubles', according to one participant. Performing challenging sports and activities was frequently used by the participants to help them to 'forget everything'. Even self-harming (e.g. burning, or use of drugs) was used to manage painful emotions. One boy explained, 'I have engaged in some self-destructive and abusive behaviour when I've felt bad ... I've burned myself with a cigarette'. Some of the participants acted out emotions through the body in a confrontational manner, often resulting in harming others or property.

Orientation towards sensitivity

In contrast to the orientation towards toughness, in the orientation towards sensitivity, indicators of traditional femininity are highlighted and desired: *expressing feelings and needs*. The individual's emotion management places emphasis on *being able to be open*, provided that the relationship is secure.

Expressing feelings and needs implies a desire to be able to convey sensitive emotions and express needs. Boys with an orientation towards sensitivity appreciate being soft and being able to show expressions traditionally considered feminine. They emphasise certain aspects of appearance, such as being well groomed or well dressed, and care for their personal appearance: 'Masculinity has taken a step towards femininity: now it's okay to be interested in clothes. Fifty years ago that would have resulted in a shot in the back of the head'. They prefer a masculinity that includes traditional female expressions, in which having a relational focus, showing concern for and supporting others and being a caring person are valued qualities, while toughness is rejected. However, despite their willingness to be open, these boys may experience themselves as weak because showing sensitivity may not be an appreciated quality in certain peer groups. Like boys with an orientation towards toughness, boys oriented towards sensitivity experience difficulties in help seeking, such as turning to a counsellor, but for different reasons. While those oriented towards toughness consider help seeking as a sign of weakness and reject it, these boys would like to be able to seek help, but hesitate because of the group norm. Accordingly, some participants express a desire for gender equality, meaning that boys should have the freedom to show emotions and seek help if and when needed. Differences between the genders were described in terms of 'unfairness', i.e. it is unfair that it should be more natural and easier for girls to show emotions. One participant said,

There is so much written in the media about girls having a hard time, and I don't want to contradict that – they do. But I think that guys have a very hard time too, and no one writes about that, which makes it hard to be an emotional guy who shows that he's sad.

Regarding emotion management, being open about one's sensitive and painful emotions, such as sadness, which is considered taboo according to more traditional masculinity norms, is preferred in this orientation. *To be able to be open* requires security in relationships. Emotional openness can be expressed in several ways, but the ability to recognise and verbally express emotions is valued. One boy explained, 'I am a sensitive guy, I easily show my emotions and I consider myself to be quite good at expressing myself emotionally'. However, being open about emotions can lead to vulnerability. One participant explained, 'If you express weakness, and I did, it's a failure because there's nobody who wants to be weak'. By expressing sensitive feelings, boys with an orientation towards sensitivity expose their emotions to others, risking comments and possible criticism from peers. However, the desired strategy is to be able to express their feelings and share them with others depending on the companionship.

Another strategy involves 'sort of telling' or reformulating, which means that some parts of the individual's true emotional concerns can be exposed to others: 'Yes, you talk about it to some extent, but you don't say everything. But yes, you can be relatively honest'. When revealing something that they experience as emotionally shameful, individuals using this strategy reformulate their disclosure and focus on a more 'acceptable' problem, as a way to mask their insecurity.

One major aspect of promoting openness of emotions is the individual's sense of security in relationships. As one boy puts it, 'With a counsellor, it feels that you have to tell your whole life story in order to get help, but your close friends know most things about you and they can help'. Feeling safe and having a friend who would not reveal your real identity to somebody else was described by one participant:

I think that many guys are kind of afraid of how people will perceive them, and they think that it may seem unmanly to sit and talk about feelings. But I think that as long as I feel safe with those I'm with, it's no problem.

Another important aspect facilitating openness towards sensitive emotions is communication through social media, i.e. being able to share one's emotions behind the screen while maintaining anonymity. This offered a possibility for the participants, including the less verbally skilled, to express emotions through websites and social media or within a known network community. As one participant said, 'That tough guy has existed much longer than the sensitive guy ... and I think that Facebook has contributed to the new image. Boys are writing about love and wisdom, which they may not have done in real life.'

Non-gender-normative masculinity

In non-gender-normative conceptions of masculinity, an individual view based on personal norms and own values is emphasised, independent of collective norms and values. It involves a conscious distancing from prevailing gender norms or a strong focus on individuality, similar to the notion of resistance described by Way et al. (2014).

Orientation towards sincerity

Non-gender-normative masculinity includes an emotional orientation towards sincerity, which endorses a masculine attitude of 'being yourself' and *being a respectful individualist*. Included in this preference is a willingness to stand up for one's ideas and be the person one really is without infringing upon others. Central to identity and well-being is a sense of *having the courage to be truthful about one's emotions* and a preferred strategy is telling honestly how one feels.

Being oneself despite social norms that govern behaviour in groups therefore characterises this orientation. Boys with this orientation express their individualistic views in which adjusting to their peers and collective values is of lesser importance. Even though different social contexts do have some influence, the situational and personal factors, 'just being you', are far more important compared with contextual factors. One boy explained, 'You are a bit different with different friends and in different

situations, but I have no problem being myself'. A characteristic of this orientation is the right to be oneself in social contact with others. As one boy said,

You just have to try to be yourself, and if your friends come by when you are together with your girlfriend, don't play tough because you will hurt her even though you don't mean to. So be the person you are, regardless of who you meet.

Another participant explained that it required a great deal of effort to resist peer pressure and emphasise the personal view: 'It takes a lot of courage and clearly defined values to speak out – courage to be the person who you are!'

When *being a respectful individualist*, personal values and independence are highlighted. Valued qualities include the ability to express true beliefs and opinions despite social norms. The qualities of a masculine guy were described as follows: 'Masculine is a great guy with a good personality, who is a good friend. There are people who are very masculine and if a guy would hug another guy, maybe not everybody dares to. What's wrong with that?' A wish to be genuine and to stand up for oneself while being respectful to others is part of the qualities described. A feeling of self-respect and respect for others was emphasised by some participants. 'I am who I am and I'm proud of my gender ... it's really masculine to show respect to everybody'. Another example of what it means to be a respectful individualist and a masculine guy was generosity shown towards others in accepting who they are, as described by one boy:

I think that everybody has the right to be who they are and to have their own interests, and no one is wrong. Everybody can look like and do what they want and I accept that. I wouldn't like someone to change for my or anyone else's sake.

Regarding emotion management, *having the courage to be truthful with emotions* requires openness including sharing one's emotions and showing one's feelings. Boys with an orientation towards sincerity are not particularly concerned about possible consequences of their openness, or about contextual factors. One boy emphasised how he prioritised 'always being truthful with myself' and other participants pointed out how honesty should be prioritised in all relationships. Sometimes a turning point, such as a critical incident, can make a boy feel close to others and reveal his feelings: 'The thing is that no one says anything, but once you start talking to someone else, you'll discover that he feels the same way, and then he thinks I'm brave and strong for showing my emotions'. This use of the word 'brave' implies that it takes courage to display certain emotions. Being honest about one's emotions is highly valued. Concerning sharing one's problems with others, one boy who was not concerned about what others might think stated,

I absolutely agree that you have to show emotions and ignore that toughness thing. I'm open and can talk when many others can't or won't, because they are afraid they might get a silly comment. But you have to take a chance and solve your problems.

The courage to show and share emotional concerns was advocated. As one participant noted: 'If you feel bad, then you have to show it; you just can't keep it buried and hidden because it will lie there and push even more, and finally, you'll explode or go crazy'.

Discussion

This study aimed to increase our understanding of adolescent boys' views of masculinity and emotion management and their possible consequences for well-being. The study identified two main categories of masculine conceptions: gender-normative masculinity and non-gender-normative masculinity. The boys' approaches to masculine expressions and emotion management were linked to their value base, their capacity to resist norms and their sense of relational security. The feeling rules in different social contexts affected their expressions and often the demands that the participants experienced in different situations and contexts required careful balancing of competing views. Whereas toughness and expressing a cool demeanour were more desirable in the presence of certain peer groups, showing emotions and empathy for others was sought after in close or intimate relationships. The participants

revealed that boys can be considered weak, especially in group situations, if they are emotional – and yet, in close and intimate relationships they are expected to show emotions. Connell (2005) argues that most men embody hegemonic and subordinated masculinities simultaneously.

Although the included boys performed balancing in the way they expressed their emotions, three preferred emotional masculinity orientations were identified: orientations towards toughness, towards sensitivity and towards sincerity. Some common and distinctive characteristics became manifest when comparing the three orientations. Firstly, there was a tension between peer group-based and individually based masculinity orientations. Boys who were oriented towards toughness and those oriented towards sensitivity were influenced by social norms located within peer groups, school programmes and the local community, which contributed to shape a normative gender practice regarding what emotions to display, and how. Both these groups were hindered by the same peer group norm, albeit in different ways. And while the boys oriented towards toughness wanted to conceal certain emotions, the sensitive boys wanted to share. The boys oriented towards sincerity, on the other hand, stressed the importance of independence and individuality and claimed to be less affected by peer group norms.

Secondly, performing masculinities also seemed to involve tensions between the new vs. the more traditional way of being an adolescent boy. Boys with an orientation towards toughness held to the more traditional masculinity ideology (Burn & Ward, 2005) dominated by being tough, exhibiting self-restraint and holding back emotions. This position, which is closer to hegemonic masculinity (Connell & Messerschmidt, 2005), was associated with a fear of being labelled 'gay' or 'girly', and therefore led to concealing expressions of weakness, especially in a group context. It has been argued that more gender-equitable masculinities that challenge the traditional values can emerge even in a setting characterised by a strong traditional masculinity (Torres, Goicolea, Edin, & Ohman, 2012). Although Sweden is one of the most gender-equal countries with a strong gender equality discourse (Gådin et al., 2011; Hearn et al., 2012), in this study we found a gender stereotypical masculine culture with consciously performed behaviours, which restricted the possibility for some adolescents to express their need for emotional support.

Regarding the orientations towards sensitivity and sincerity, the included boys said they appreciated openness in expressing emotions, but the difference was in how dependent they were on relational and contextual factors. Boys who adhered to the orientation of sensitivity emphasised being emotional, but to be able to be open and share emotions depended on secure bonds in relationships. Boys who were oriented towards sincerity preferred honesty in emotions and were more self-reliant in relationships and less dependent on contextual factors. One possible explanation for this position of strength may be their capacity to resist. Resistance, or non-conformity, to norms of masculinity has been described to emphasise the agency of the individual and is associated with higher self-esteem and well-being (Way et al., 2014). Orientations towards sensitivity and sincerity represent an approach related to both 'oppositional' and 'inclusive' masculinity (Anderson, 2008; Johansson & Ottemo, 2015). It has been suggested that gender is embedded in a societal structure and that gender identity emerges from social interaction, described as the process of 'doing gender' (Risman, 2004; West & Zimmerman, 1987). In the youth context, in which situational, relational and individual aspects contributed, it appeared also to consist of forming and 'being' gender. In expressing their gender, the adolescent boys enacted various masculinities that involved both masculine and feminine attributes as a way of acting and being young men.

Boys processed their emotions in relation to their own value base or in relation to peer group norms. Hypothetically, certain qualities in emotion management can be distinguished for each emotional orientation: the boys who were oriented towards toughness were more prone to use bodily strategies such as challenging sports, while boys oriented towards sensitivity emphasised expressive strategies through sharing, and finally those who were oriented towards sincerity had a preference for cognitive strategies. Hochschild (1983) describes cognitive, bodily and expressive strategies as well as emotion work on specific emotions. Both surface acting and deep acting (Hochschild, 1979) were used in emotion management; characteristics for the process of dealing with emotions were the balancing between private and public, between external requirements (e.g. peer pressure) and internal values

and between concealing and revealing emotions. This balancing act may be a dilemma faced by most modern teenage boys. The boys were sometimes forced to play a role when interacting with their peers for the benefit of the audience on the 'front stage' (Goffman, 1959). The feeling rule of 'showing strength' affected the well-being of some boys; boys who experienced difficulty sharing their problems were more prone to risk their well-being and manage their emotions in a challenging or destructive manner. We found intentional self-harm in some boys and it appears that deliberate self-harm was employed to manage difficult and sensitive emotions. This illustrates that the body is an essential part of dealing with emotions. Research indicates that emotion work can also be corporeal work and that intentional self-harm or self-injury is an embodied method of managing emotions, generally more frequently seen in adolescent girls than in adolescent boys (Chandler, 2012; Laye-Gindhu & Schonert-Reichl, 2005).

A group of included adolescents were fearful of being seen and judged by others, which hindered their help-seeking behaviour, which is consistent with previous studies (MacLean, Sweeting, & Hunt, 2010; Marcell, Klein, Fischer, Allan, & Kokotailo, 2002). Some participants expressed a desire for help seeking on equal terms between boys and girls (e.g. adolescent boys should be able to seek help just as girls can). Turning to professionals for support may be considered a 'last option' and was associated not only with shame and failure, but also with a lack of trust. Ciarrochi, Deane, Wilson, and Rickwood (2002) have shown that adolescents who are poor at managing emotions are the least likely to seek help. Shame is the master emotion that is present in everyday situations regulating the expressions and occurring when bonds are threatened (Scheff, 2003). Therefore, being a teenage boy in need of support may signal weakness in the eyes of both the teenager himself and the significant others.

Our study demonstrates that although many adolescent boys were able to talk openly about the subject, one group of boys were affected by a 'manage it yourself attitude', in which they tried to conceal emotionally related problems. Hence, to increase well-being in adolescent boys, more needs to be done, e.g. in schools, leisure activities and youth health care institutions. Through influencing attitudes and values, schools and workplaces are important arenas for addressing healthy masculinities and gender equality in emotional expressions, as well as in help-seeking behaviours on equal terms.

Limitations and strengths

Lincoln and Guba (1985) propose four criteria for a study to be considered trustworthy: credibility, transferability, dependability and confirmability. In this study, credibility and dependability were strengthened by the large amount of interview data and rich descriptions, as well as the use of the iterative process, with constant comparisons made. The analyst triangulation method, in which all authors in the research team were involved in negotiating the outcome and reflexivity throughout the research process, helped to establish confirmability of the results. The research team consisted of a paediatric nurse, a general practitioner, a social worker, a sociologist and a physiotherapist, which contributed to multiple perspectives and an interdisciplinary approach.

One limitation of this study concerns the transferability of the results. The study was conducted in a small town setting, and the transferability and generalisation of the findings to other settings may be limited. However, this study contributes to the knowledge about adolescent boys' views of masculinity in Sweden. In future studies, we should explore how different masculinity views impact boys' well-being in larger populations and in comparison with other countries.

Conclusions

In this study, two main categories of masculine conceptions in adolescent boys were identified: gender-normative masculinity and non-gender-normative masculinity. Gender-normative masculinity comprised two types of emotional orientation towards masculinity: towards toughness and towards sensitivity. These two orientations, although opposite to each other, were affected by the group norm and the collective value base, and the performances of the boys with these orientations were connected to contextual and situational demands. The orientation towards sincerity was more non-gender-normative,

focusing on the individual's views and the own values of the adolescent boys, which were distinctly less influenced by the peer group norm.

A large group of boys in this study were able to express their emotions openly. What was important for these adolescents' well-being was their ability to recognise and share their emotions, as well as their access to secure relationships. Our findings suggest that masculinity and expressions of emotions are strongly intertwined and therefore we cannot describe and understand masculinity without taking emotional expressions into account. Furthermore, managing emotions is vital for well-being.

Disclosure statement

No potential conflict of interest was reported by the authors.

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References

- Anderson, E. (2008). Inclusive masculinity in a fraternal setting. *Men and Masculinities*, 10, 604–620.
- Barker, G., Ricardo, C., Nascimento, M., Olukoya, A., & Santos, C. (2009). Questioning gender norms with men to improve health outcomes: Evidence of impact. *Global Public Health*, 5, 539–553.
- Burn, S. M., & Ward, A. Z. (2005). Men's conformity to traditional masculinity and relationship satisfaction. *Psychology of Men & Masculinity*, 6, 254–263.
- Butler, J. (1990). *Gender trouble: Feminism and the subversion of identity*. New York, NY: Routledge.
- Chandler, A. (2012). Self-injury as embodied emotion work: Managing rationality, emotions and bodies. *Sociology*, 46, 442–457.
- Charles, S. T. (2010). Strength and vulnerability integration: A model of emotional well-being across adulthood. *Psychological Bulletin*, 136, 1068–1091.
- Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. London: Sage.
- Ciarrochi, J., Deane, F. P., Wilson, C. J., & Rickwood, D. (2002). Adolescents who need help the most are the least likely to seek it: The relationship between low emotional competence and low intention to seek help. *British Journal of Guidance & Counselling*, 30, 173–188.
- Connell, R. (1996). Teaching the boys: New research on masculinity, and gender strategies for schools. *Teachers College Record*, 98, 206–235.
- Connell, R. (2005). *Masculinities*. Cambridge: Polity Press.
- Connell, R. (2008). Masculinity construction and sports in boys' education: A framework for thinking about the issue. *Sport Education and Society*, 13, 131–145.
- Connell, R., & Messerschmidt, J. W. (2005). Hegemonic masculinity – Rethinking the concept. *Gender & Society*, 19, 829–859.

- Courtenay, W. H. (2000). Constructions of masculinity and their influence on men's well-being: A theory of gender and health. *Social Science & Medicine*, *50*, 1385–1401.
- Courtenay, W. H. (2003). Key determinants of the health and well-being of men and boys. *International Journal of Men's Health*, *2*(1), 1–30.
- Coyne, I. T. (1997). Sampling in qualitative research. Purposeful and theoretical sampling; merging or clear boundaries? *Journal of Advanced Nursing*, *26*, 623–630.
- Dahl, R. E. (2004). Adolescent brain development: A period of vulnerabilities and opportunities. Keynote address. *Annals of the New York Academy of Sciences*, *1021*(1), 1–22.
- De Visser, R. O., Smith, J. A., & McDonnell, E. J. (2009). 'That's not masculine': Masculine capital and health-related behaviour. *Journal of Health Psychology*, *14*, 1047–1058.
- Demetriou, D. Z. (2001). Connell's concept of hegemonic masculinity: A critique. *Theory and Society*, *30*, 337–361.
- Eckersley, R. (2011). A new narrative of young people's health and well-being. *Journal of Youth Studies*, *14*, 627–638.
- Evans, J., Frank, B., Oliffe, J. L., & Gregory, D. (2011). Health, illness, men and masculinities (HIMM): A theoretical framework for understanding men and their health. *Journal of Men's Health*, *8*, 7–15.
- Fausto-Sterling, A. (2008). The bare bones of race. *Social Studies of Science*, *38*, 657–694.
- Glaser, B. G. (2011). *Getting out of the data: Grounded theory conceptualization*. Mill Valley, CA: Sociology Press.
- Goffman, E. (1959). *The presentation of self in everyday life*. New York, NY: Doubleday.
- Goldshmidt, O. T., & Weller, L. (2000). "Talking emotions": Gender differences in a variety of conversational contexts. *Symbolic Interaction*, *23*, 117–134.
- Gough, B. (2006). Try to be healthy, but don't forgo your masculinity: Deconstructing men's health discourse in the media. *Social Science & Medicine*, *63*, 2476–2488.
- Gross, J. J. (2002). Emotion regulation: Affective, cognitive, and social consequences. *Psychophysiology*, *39*, 281–291.
- Gudlaugsdottir, G. R., Vilhjalmsdottir, R., Kristjansdottir, G., Jacobsen, R., & Meyrowitsch, D. (2004). Violent behaviour among adolescents in Iceland: A national survey. *International Journal of Epidemiology*, *33*, 1046–1051.
- Gädin, K. G., Weiner, G., & Ahlgren, C. (2011). School health promotion to increase empowerment, gender equality and pupil participation: A focus group study of a Swedish elementary school initiative. *Scandinavian Journal of Educational Research*, *57*, 54–70.
- Hankin, B. L., Abramson, L. Y., Moffitt, T. E., Angell, K. E., Silva, P. A., & McGee, R. (1998). Development of depression from preadolescence to young adulthood: Emerging gender differences in a 10-year longitudinal study. *Journal of Abnormal Psychology*, *107*, 128–140.
- Hausmann, R., Tyson, L. D., & Zahidi, S. (2012). The global gender gap index 2012. *The Global Gender Gap Report*, 3–27.
- Hearn, J., Nordberg, M., Andersson, K., Balkmar, D., Gottzen, L., Klinth, R., Pringle, K., & Sandberg, L. (2012). Hegemonic masculinity and beyond: 40 years of research in Sweden. *Men and Masculinities*, *15*, 31–55.
- Hermerén, G. (2011). *Good research practice*. Stockholm: The Swedish Research Council.
- Hochschild, A. R. (1979). Emotion work, feeling rules, and social structure. *American Journal of Sociology*, *85*, 551–575.
- Hochschild, A. R. (1983). *The managed heart: Commercialization of human feeling*. Berkeley: University of California Press.
- Hochschild, A. R. (1990). Ideology and emotion management: A perspective and path for future research. In T. D. Kemper (Ed.), *Research agendas in the sociology of emotions*, (pp. 117–142). New York, NY: State University of New York Press.
- Jerden, L., Burell, G., Stenlund, H., Weinehall, L., & Bergström, E. (2011). Gender differences and predictors of self-rated health development among Swedish adolescents. *Journal of Adolescent Health*, *48*, 143–150.
- Johansson, T. (2011). Fatherhood in transition: Paternity leave and changing masculinities. *Journal of Family Communication*, *11*, 165–180.
- Johansson, T., & Klinth, R. (2008). Caring fathers: The ideology of gender equality and masculine positions. *Men and Masculinities*, *11*, 42–62.
- Johansson, T., & Ottemo, A. (2015). Ruptures in hegemonic masculinity: The dialectic between ideology and utopia. *Journal of Gender Studies*, *24*, 192–206.
- Kimmel, M. (2010). *Boys and school: A background paper on the boy crisis* (SOU 2010: 53). Stockholm: Swedish Government Official Report.
- Kimmel, M., Hearn, J., & Connell, R. (2005). *Handbook of studies on men and masculinities*. Thousand Oaks, CA: Sage.
- Laye-Gindhu, A., & Schonert-Reichl, K. (2005). Nonsuicidal self-harm among community adolescents: Understanding the "whats" and "whys" of self-harm. *Journal of Youth and Adolescence*, *34*, 447–457.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.
- Mac an Ghail M., & Haywood, C. (2012). Understanding boys': Thinking through boys, masculinity and suicide. *Social Science & Medicine*, *74*, 482–489.
- MacLean, A., Sweeting, H., & Hunt, K. (2010). 'Rules' for boys, 'guidelines' for girls: Gender differences in symptom reporting during childhood and adolescence. *Social Science & Medicine*, *70*, 597–604.
- Marcell, A. V., Eftim, S. E., Sonenstein, F. L., & Pleck, J. H. (2011). Associations of family and peer experiences with masculinity attitude trajectories at the individual and group level in adolescent and young adult males. *Men and Masculinities*, *14*, 565–587.
- Marcell, A. V., Ford, C. A., Pleck, J. H., & Sonenstein, F. L. (2007). Masculine beliefs, parental communication, and male adolescents' health care use. *Pediatrics*, *119*, e966–e975.

- Marcell, A. V., Klein, J. D., Fischer, I., Allan, M. J., & Kokotailo, P. K. (2002). Male adolescent use of health care services: where are the boys? *Journal of Adolescent Health, 30*, 35–43.
- Mead, G. H. (1934). *Mind, self & society: From the standpoint of social behaviorist*. Chicago, IL: University of Chicago Press.
- Messerschmidt, J. W. (2009). "Doing gender": The impact and future of a salient sociological concept. *Gender & Society, 23*, 85–88.
- Nyberg, A. (2012). Gender equality policy in Sweden: 1970s–2010s. *Nordic Journal of Working Life Studies, 2*, 67–84.
- O'Neil, J. M. (2013). Gender role conflict research 30 years later: An evidence-based diagnostic schema to assess boys and men in counseling. *Journal of Counseling & Development, 91*, 490–498.
- O'Neil, J. M., Good, G. E., & Holmes, S. (1995). Fifteen years of theory and research on men's gender role conflict: New paradigms for empirical research. In R. F. L. W. S. Pollack (Ed.), *A new psychology of men* (pp. 164–206). New York, NY: Basic Books.
- Ransky, M., & Marecek, J. (2009). "I'm not going to be a girl": Masculinity and emotions in boys' friendships and peer groups. *Journal of Adolescent Research, 24*, 218–241.
- Patel, V., Flisher, A. J., Hetrick, S., & McGorry, P. (2007). Mental health of young people: A global public-health challenge. *The Lancet, 369*, 1302–1313.
- Pleck, J. H. (1995). The gender role strain paradigm: An update. In R. F. Levant, W. S. Pollack, R. F. Levant, & W. S. Pollack (Eds.), *A new psychology of men* (pp. 11–32). New York, NY: Basic Books.
- Pleck, J. H., Sonenstein, F. L., & Ku, L. C. (1993). Masculinity ideology: Its impact on adolescent males' heterosexual relationships. *Journal of Social Issues, 49*, 11–29.
- Risman, B. J. (2004). Gender as a social structure: Theory wrestling with activism. *Gender & Society, 18*, 429–450.
- Scheff, T. J. (2003). Shame in self and society. *Symbolic Interaction, 26*, 239–262.
- Stranden, V. (2015). *Nordic gender equality in figures 2015*. Copenhagen: Nordiska ministerrådet (p. 36).
- Tischler, A., & McCaughy, N. (2011). PE is not for me: When boys' masculinities are threatened. *Research Quarterly for Exercise and Sport, 82*, 37–48.
- Torres, V. M. S., Goicolea, I., Edin, K., & Ohman, A. (2012). 'Expanding your mind': The process of constructing gender-equitable masculinities in young Nicaraguan men participating in reproductive health or gender training programs. *Global Health Action, 5*, 1–14.
- Wasserman, D., Cheng, Q., & Jiang, G. X. (2005). Global suicide rates among young people aged 15–19. *World Psychiatry: Official Journal of the World Psychiatric Association, 4*, 114–120.
- Way, N., Cressen, J., Bodian, S., Preston, J., Nelson, J., & Hughes, D. (2014). "It might be nice to be a girl. Then you wouldn't have to be emotionless": Boys' resistance to norms of masculinity during adolescence. *Psychology of Men & Masculinity, 15*, 241–252.
- West, C., & Zimmerman, D. H. (1987). Doing gender. *Gender & Society, 1*, 125–151.
- West, C., & Zimmerman, D. H. (2009). Accounting for doing gender. *Gender & Society, 23*, 112–122.
- WHO. (1946). *Preamble to the constitution of the world health organization as adopted by the International Health Conference*. [Official Records of the World Health Organization, No. 2, p. 100] 1948: New York, June. Retrieved May 4, 2012, from <http://www.who.int/suggestions/faq/en/>
- WHO. (2000). *What about boys? A literature review on the health and development of adolescent boys*. Geneva: The World Health Organization.