Governing the healthy male citizen: Men, masculinity and popular health in *Men’s Health* magazine

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**Abstract**

Recent commentators have noted the potential of newer neo-liberal discourses of health care to position responsibility for the management of well-being with the individual. Often promoted through the inculcation of risk avoidance and management, such discourses are played out in myriad settings, including the popular media. Magazines are one such media site in which diverse exhortations for the achievement of health, well-being and the perfectible body are made, and Bunton [1997. Popular health, advanced liberalism and good housekeeping magazine. In A. Petersen & Bunton R. (Eds.) *Foucault, health and medicine* (pp. 223–247). London: Routledge] has identified ‘magazine medicine’ as a significant manifestation of more dedifferentiated models of health care. Recent discussions have placed men’s health high on research and policy agendas, with a concomitant interest in more popular realms. The UK magazine *Men’s Health (MH)* is indicative of these trends, and represents a site at which discourses of men, health and masculinity are constructed. Typically reflecting neo-liberal models of health, here men are constructed as active and entrepreneurial citizens able to maintain their own health and well-being through the judicious management of risk in contexts appropriate to dominant discourses of hegemonic masculinity. Data which resulted from a critical discourse analysis of a 2-year sample (21 issues) of *MH* are considered and findings related to medicalisation, individualisation and risk discussed. It is suggested that magazine texts such as *MH* reflect newer individualised models of health care and neo-liberal strategies of health governance premised upon constructing a healthy male citizen, willing and able to take responsibility for their own well-being.

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**Fight cancer with marge**

Eating polyunsaturated fats may slow prostate cancer growth. Scientists found that men with less-advanced tumours had higher polyunsaturated fatty-acid levels than men with more advanced tumours. “Good” fats block cancer cell chemical signals, lessening their growth. Up your good-fat intake with nuts, avocados, olive and fish oils *(MH, October 2005, p. 25).*

Ladies have a thing for abs. “We peek at them when you reach for something,” says Florence Duchateau, personal trainer and *MH* weight-loss advisor. But you knew this. The mystery to women is why you focus on working muscles that

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impress guys. “Men want big biceps so other men can see them,” says Pega Ren, a clinical sexologist in Vancouver, Canada. “People get fit not only to attract others sexually but also to stand tall among peers. “That’s OK, but don’t forget the ladies. “When you walk past a woman, she’s checking out her favourite body parts. Biceps are fine, but far down our list of favourites,” says Duchateau. Let’s tell you what those favourites are, why she loves them, and the exercises to do in order to build them (MH, July 2005, p. 62).

Introduction

The two quotes above are taken from issues of Men’s Health (MH) magazine published in 2005. Together they typify the diverse constructions of men’s health and the male body found regularly within the pages of the magazine, whilst simultaneously illuminating late modern rationalities of health care and health governance as well as contemporary constructions of masculine identity. When encountering the first, the uninformed reader might be forgiven for thinking that the text is drawn from a ‘scientific’ medical or nutritional journal, with its use of technical language regarding ‘fatty acids’, ‘tumours’, ‘chemical signals’ and their potential interaction in the aetiology of prostate cancer. In the second, ‘experts’ in weight loss and sexology begin to advise men on how to use exercise to mould their bodies in appropriate ways to attract female partners.

Both extracts take as their focus the male body, the former concerned with the body as the site of disease and illness and the latter with its symbolic significance in social and sexual interaction. In this way, these sound bites encapsulate current ‘popular’ discourses of health, well-being and the body that have become ubiquitous within late modern cultures. Within such cultures, individuals are increasingly constructed as active consumers of health advice; as responsible citizens with an interest in, and a duty to maintain, their own well-being both to improve health and fight disease, yet also to construct a socially appropriate and acceptable body form, the demands for which are ever increasing under the conditions of late modern consumer culture (Featherstone, 1991). Significantly, such extracts illustrate how advice on health, well-being and body maintenance has ceased to reside solely as the preserve of a small group of professionals in medicine and health work. Rather, a concern with the appropriate interaction of fats and cells and how this can protect against disease, or the building and maintenance of an aesthetically pleasing body, becomes the responsibility of the active health consumer or entrepreneur (Boni, 2002) able to invest time and resources in the construction of a healthy self.

This paper contends that extracts such as those presented above, themselves a small but representative sample of the successful monthly publication MH magazine, are illuminative of late modern rationalities of health care and health governance, as well as dominant discourses of masculinity. Both are indicative of dedifferentiation (O’Brien, 1995), whereby health moves outward from its narrow sectoral focus in medicine and the allied professions to become a ubiquitous aspect of everyday life, located in diverse settings and media, such as magazine texts; what Bunton (1997) has identified as the late modern phenomenon of ‘magazine medicine’. As Bunton’s historical analysis of Good Housekeeping magazine notes, such a phenomenon is a well-established aspect of women’s magazines (see also Beetham, 1996). General interest magazines for men are a newer phenomena, however (see Jackson, Stevenson, & Brooks, 2001), and health information and advice has more recently become a core feature of their content, culminating with the emergence of specialist health focused magazines, such as MH, over the past decade.

Further, both extracts represent new rationalities of health care and governance within which individuals are positioned as active, enterprising citizens responsible for their own well-being. In the text of MH, health broadens out to encompass both the physical and social body. Concerns include maintaining well-being and the avoidance of disease, the construction of the body as a signifier of success and masculine identity and as a source of ‘capital’ in interpersonal interaction. In this way, MH is indicative of more recent conceptualisations of health as a complex and multifaceted social phenomenon that is inextricably linked with other factors such as identity and lifestyle (Kellehar & Leavey, 2004), and most significantly for the subject of this paper, gender. Such discourses, it is argued, work to construct a ‘healthy male citizen’ under the directives of neo-liberal, risk-oriented cultures which promote individualised responsibility for the management of health and well-being.
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