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“JUST SHAVE IT OFF”: A THEMATIC ANALYSIS OF MEN'S BALDNESS FORUMS

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Abstract

Introduction

Head hair comprises a critical part of the male appearance ideal, which itself is a crucial signifier of a man's masculinity. However, difficulties in recruitment have meant that research has not yet fully explored how men construct the loss of head hair (baldness), perhaps because it is considered “feminine” to disclose body dissatisfaction experiences to a researcher or other people.

Methods and Design

Online forums provide an opportunity for the anonymous discussion of body dissatisfaction that may overcome this obstacle. The first 260 forum posts from the two most popular baldness forums were thematically analysed.

Ethics Statement

Institutional ethics approval was granted.

Results and Discussion

We identified three themes titled: (1) Baldness is an ugly and demasculinising condition, (2) Baldness is stigmatised by a superficial society and superficial women and (3) Resistance to baldness despair. Our findings show baldness distress, and stigma exist though so does resistance, which can be comforting to men experiencing baldness or any form of body dissatisfaction.

Conclusion and Implications

Online forums are a salient resource to enhance our understanding of men's balding concerns and disclosure barriers. Independent, professional and effective baldness support that unpacks baldness masculinised and medicalised framing is recommended.

Keywords: baldness; body dissatisfaction; men; online forums, thematic analysis

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INTRODUCTION

The masculine appearance ideal refers to the immense pressures men face to have “conventionally attractive” features like mesomorphic, young, facially symmetrical, minimal body hair, a square jaw. This ideal is widely promoted through action dolls and magazine cover stars that have progressively gained muscle and dropped bodyweight with successive editions to popular men's media that feature very few (3–11%),^{1,2} if any, visible images of men that differ from this ideal.^{3,4} Consequently, men can experience a range of health impacts when they fail to meet the ideal's unremitting standards including eating disorders, mental health issues, steroid (mis)usage and suicidal

ideation.^{5–8} One key component of the masculine appearance ideal is a full head of hair. Hair is also independently important for masculinity, signifying masculine values of virility and success. Content analyses confirm men with hair loss as rarely represented in popular media.^{3,4} When they are featured (e.g., on hair loss websites), they are portrayed as sad, lonely, and/or unloved.⁹ In contrast, men with full heads of hair are frequently featured^{3,4} and are depicted as successful, happy and sexually attractive.⁹ Even though the centrality of head hair to the appearance ideal and masculinity are interlinked, no prominent qualitative research on how hair loss (baldness) is experienced by

men exists. The quantitative assessments of baldness' impact to date have been criticised for having poorly validated methodology, biased samples and extensive commercial influences leading to overinflated findings¹⁰ with some notable exceptions^{11–13}. To date, there have been no qualitative studies with balding men about their experiences of baldness; however, some have been included in qualitative studies about wider issues regarding body image and appearance.^{14,15} In a previous study, Ricciardelli¹⁵ interviewed 14 Canadian men (aged 18–53 years) seeking or having undergone some cosmetic surgery (not hair transplants). Some of the men had mild hair loss, but none were bald. She found that all 14 of the men interviewed were preoccupied with hair loss (despite many of them having full heads of hair). A full head of hair was considered an integral part of their identity and attractiveness. Additionally, men identified the ideal, masculine male as having a full head of hair. Participants greatly feared balding and felt it would decrease their wellbeing and self-esteem significantly.

Jankowski et al.¹⁴ recruited 42 British men (mean=21.02; standard deviation = 5.21) into a body confidence intervention. Approximately 3–6 participants had any hair loss, though none were bald. Nonetheless, regardless of baldness, participants worried about hair loss. Specifically, one participant reported, “I would say like the kind of hair thing for me ... I'm getting a receding hairline which is why I've actually not cut my hair for like 3 months or something because I'm just trying to get it to grow over the receding hairline it does get to me ... it's just the fact that you're losing your hair or going to lose your hair. [It] is just a demeaning thing” (Group 8). Furthermore, Jankowski et al.¹⁴ found that participants believed exceptions to the appearance ideal had to be compensated for including upper arm body hair, greying hair and baldness. However, not all aspects of appearance were equal nor could all aspects be compensated for sufficiently. Specifically, “participants were ‘not sure [if] balding would necessarily pass’. As Gordon expanded: ‘if he has a shaven head, he has to look like Vin Diesel ... if you're going to go for [the bald look], you've got to look good ... massive’ (p. 7). Referring to films, participants elucidated ‘you don't

see a bald skinny guy being the superhero do you?’ (Lance), and ‘everything else has to be decent’ (Ted). In particular bald men need ‘muscles to counteract’ (Gagan) their baldness” (p. 7).

These studies offer a tentative framework to understand baldness, specifically that it comprises a pivotal part of the male appearance ideal and can be a site of stigma and dissatisfaction for men. However, the few qualitative research studies have not focussed on balding men's experiences directly but studied other people's perceptions of baldness.^{14,15} In addition, these studies suggest disclosing body image concerns in face-to-face settings, in the presence of other people and a researcher, is particularly difficult for men. Ricciardelli¹⁵ noted participants' difficulty with this, believing that admitting body dissatisfaction made men weak and unmasculine, a finding others have replicated,¹⁶ despite research highlighting men's need to talk about these issues.^{14,17} Online forums, where men talk to other men without the presence of a researcher, often in an anonymous manner, provide a valuable avenue for research. Recent examinations of online forums have yielded insights into the complexities of men's body dissatisfaction experiences.^{17,18}

The current study

Online forums provide users with space to contribute their experiences and freely discuss their baldness with a degree of anonymity from each other (by the creation of usernames etc.) with fewer concerns about contravening, hegemonic standards of masculinity that impede disclosure.^{15,17} This study explored men's accounts of baldness online, here a thematic analysis of forum posts was undertaken from a critical realist perspective to understand how baldness experiences were constructed.¹⁹

METHODS

Materials and sampling strategy

The most popular baldness forums in the UK are “hairlosstalk” and “baldtruthtalk”.²⁰ Within these forums subforums, are orientated to baldness topics that contain several threads. Each of the “coping” subforums was selected (see Table 1) because these featured on both forums and were specifically about men discussing their experience of baldness, whereas

Table 1. Forum Post Details from “Hairlosstalk” (HLT) and “Baldtruthtalk” (BTT)

Website		Thread			
Website name	Monthly visitors (Alexa, 2019)	Year posted	Total number o	Total posts on thread	Words across the 130 posts analysed
HLT ^a	434,796	2017	200,391	6492	23,118
BTT ^b	156,693	2013	204,864	247	22,285

^aHLT thread pseudo-title: “Why I’m Often Failed By Women”.

^bBTT thread pseudo-title: “Binge Eating Because Of My Baldness”.

others focused on other issues (e.g., “treatment”¹, patterns of baldness or women’s baldness). The first 130 text posts of each of the most commented upon threads were analysed and downloaded. This totalled 260 posts, approximately 45,000 words; a similar data corpus size to other previous research.^{22,23}

Ethical approval

The study obtained institutional ethics approval (MW02OCT19). Whilst these data are publicly available. Specific steps were taken to further anonymise contributions. This included assigning pseudo-username to forums’ contributor quotes, avoiding collecting any unnecessary data and finally omitting any identifying information in the data collected (in line with BPS ethics guidance).²⁴

The research team

The study was conceptualised by GJ (31, White, gay man), who also led the analysis. He has a particular interest in baldness, as an overlooked site of men’s body dissatisfaction (his PhD topic) and as something commercially medicalised. BB (35, White, cis woman) and NDS (43, White, cis woman) collaborated in the analysis (both of whom have published research using thematic analysis). All authors collaborated on manuscript development. All authors come from the field of psychology. MS (26, mixed, man) completed his BSc psychology dissertation on men’s body image and was GJ’s and NDS’ former student. GJ, BB and NDS have PhDs. BB’s and NDS’ research interests concern the manifestation of body image in online

spaces, with specialisms in applied interventions and maternal wellbeing, respectively.

Analytic procedure

The authors conducted a reflexive, inductive, thematic analysis of the threads guided by Braun and Clarke.^{25,26} Thematic analysis can be defined briefly as “a way of identifying what is common to the way a topic is talked or written about, and of making sense of those commonalities”.^{25, p. 59} This “making sense” also reflects the inherent, deductive nature of any analysis (quantitative, mixed or qualitative), where the researcher(s) always brings something to the research. In this case, we wanted to reflect on the way men constructed their experiences of baldness on the forums (meaning the analysis was data-driven and inductive). However, the research aims reflect, and the authors remained mindful of the body of knowledge that might have informed this analysis, for example, that male body dissatisfaction can be a profoundly painful experience,^{16,27} and that this experience is culturally influenced.^{3,28} The threads were downloaded and printed on 23 October 2019 and read thoroughly (Step 1). Pilot codes of interest were noted relevant to the research aim(s) (e.g., “distress,” “dating” and “treatments”; Step 2). The first author then met with the third and fourth authors to discuss this early coding. At this meeting, the first author was challenged on any perceived assumptions that may have influenced his analysis and offered alternative interpretations of the data to enhance reflexivity within the subsequent coding of the rest of the dataset. The first author then coded the complete data set systematically and generated semantic and latent codes to illustrate the surface meaning and underlying socio-cultural context, respectively, which were grouped based on relevance

1 The term “treatment” is placed in speech marks throughout the manuscript, given male pattern hair loss is not a medical condition but a normal part of ageing that carries no physical health consequences to it and thus, does not require “treatment.”²¹

to the research aim(s). Then, 26 posts were randomly selected from one of the threads and were sent to the third and fourth author to code independently. All three authors met to discuss their independent coding. Following these discussions, codes from the subset of data were iteratively grouped into potential themes by the three authors as part of Step 3. These discussions aided in a collaborative and better interpretation of the data whereas more quantitative forms of inter-rater reliability, are not recommended by thematic analysis experts.^{26,29} The first author then developed themes across the complete data set (Step 4). Some themes were categorised as subthemes and grouped under one overarching theme, whereas others remained distinct or were discarded. These were then named and reviewed again by the third and fourth authors (Step 5). Finally, three themes in total were refined, endorsed and presented in Table 2 along with illustrative quotes and excerpts.

The first author changed the original usernames of the forums' contributors to fake usernames, and pseudo-titles were also used for the forums' thread titles to promote anonymity. Where possible, these pseudo-usernames were constructed using similar formats and meanings of the original usernames to retain potentially important context to the quotes (e.g., a hypothetical original username of "IndianPlayboy" was changed to "AsianStud"). Pseudo-titles were also used for the forums' thread titles to further preserve anonymity.

FINDINGS

Three overarching themes were developed to capture men's subjective experiences and perceptions of baldness in the context of body dissatisfaction. Theme 1: "Baldness is an ugly and demasculinising condition" had four subthemes to represent men's baldness constructions and the psychological impact of baldness. Theme 2: "Baldness is stigmatised by a superficial society and superficial women", had two subthemes reflecting societal causes of distress for men, whereas Theme 3: "Resistance to baldness despair" differed, by comprising some men's unwillingness to accept despairing explanations and a call for perspective. Subtheme titles and illustrative excerpts are provided in Table 2.

THEME 1: BALDNESS IS AN UGLY AND DEMASCULINISING CONDITION

This theme has four subthemes (Table 2). Together the subthemes encapsulate how men constructed baldness specifically on the forums as a tough medical condition that requires "treatment". This "condition" was difficult because it made men ugly and unmasculine.

Baldness hurts psychologically

Baldness was described as damaging to men's psychological wellbeing. This occurred in multiple ways, directly by causing disorders and symptoms such as having "anxiety" (Bruce88), "panic attacks" (HW87), "emotional suffering" (Mark120), "depression" (HW87), "psychosis" (HW87) and "body dysmorphic disorder" (Tide765). Baldness was psychologically distressing indirectly too by causing "isolation" (NowALoser) and subsequently "losing a part of [your] identity [and no longer] be[ing] carefree" (23=63). The psychological toll of baldness was generally described as profound, devastating and overwhelming.

Baldness is a treatable medical condition

One contributor assigned himself a medicalised username (e.g., "TestosteroneVictim"), presenting himself as a profoundly harmed victim of the sex hormone believed to cause baldness (see Table 2 for his excerpt). Baldness was also commonly referenced to as "male-pattern baldness" (MPB;Black&Bald) and on occasion as a "disease" (Tide765). This collectively spoke to the medicalisation of baldness by contributors, where baldness was constructed as a condition that subsequently required "treatment". Contributors would self-diagnose through the Norwood-Hamilton scale frequently used by dermatologists.³⁰ This scale depicts male baldness in a progressive pattern commonly interpreted as having "minimal hair recession"¹ to "severe recession."⁷ Contributors invoked the scale stages to refer to themselves and others accordingly as "NW1s, NW2s" (Black&Bald) etc. and to track their baldness journey "in the space of 18 months I went from NW2 to NW4" (TestosteroneVictim). Those who were low "NWs" would express concern that they might progress: "I worried like hell when I first started [receding]. While my hair looked "perfect" to others ... I dreaded the horseshoe look" (Jeremy 91). Some

Table 2. Subtheme Titles and Illustrative Excerpts

Theme title	Subtheme title	Illustrative excerpts
Baldness is an ugly and demasculinising condition	Baldness hurts psychologically	“I don’t think there’s even one person on the face of this miserable planet who’s as depressed or as greatly affected by baldness as I am. I’ve been a prisoner of this hell (baldness) for the past 20 years. It had completely taken over my life before it (the baldness) even started. I’m not dead, but that’s all I can say to describe my living”. I worried like hell when I first started [receding]” (TestosteroneVictim).Baldness means not “going out at all” [and as] “only talking with very few people” (Blahblablah).
	Baldness is a treatable medical condition	“it’s all good if you are worried about your hair loss progressing further and come here to keep up to date with treatments” (Bald&Blue). “If it bothers you so much, why don’t you just invest in a very high-quality hair system?” (England-).
	Baldness makes you ugly ¹	“I see so many guys in the gym who are buff , but due to hairloss ugly” (YesYes) “Some guys can go as far as NW3 and it still looks ok if they have the right features. Others can recede minimally and lose points because it just throws off their proportions. If baldness has f*cked with your face it has f*cked with your face, it does not matter if you are NW2 or NW7” (Black&Bald).
	Baldness is demasculinising	“it seems kind of girly to me for a man to be too manicured” (Intellectual) “[guys should] most importantly [be] looking masculine” (RobT).
Baldness is stigmatised by a superficial society and superficial women	Society is superficial	“Looks matter a lot [and] the competition is fierce”(Bruce88) “We are evolutionarily programmed to be the most social animals on the planet. Why do you think we’re the only primates (of dozens of species) to be with so little [body] hair? It’s argued that it’s so that we can enjoy sex more” (Intellectual).
	Women are superficial	“There’s less women available at this age and the decent ones that aren’t even lookers to begin with are seen as a catch; if they meet a certain criteria (like not having kids and being thin), which the single good looking guys in this age bracket clean up all the scraps! Leaving pretty much nothing” (Porkchop). “I am not bald....I get a lot of sex, usually with married women of men who are losing their hair” (SkiMT)

(continued)

Theme title	Subtheme title	Illustrative excerpts
Resistance to baldness despair		<p>“Now that I’m bald, it’s not as crippling as I thought...most of the time it’s all in your head anyway. [You think it’s] really the end of the world. It’s not” (HW87)</p> <p>“Don’t be the MGTOW type [Men Getting Their Own Way, an online anti-feminist community] who bashes women all day long for wanting a man on her level and is surprised that they don’t find his NW4, his gut and his semi-NEET [Not in Employment, Education, or Training] lifestyle attractive” (Bruce88).</p>

contributors would differentiate “low NWs” (23=63) and “SUPER NORWOOD 7” (Mark120) type contributors. “Low NWs” were depicted as suffering less than others on the forums because their baldness was milder. Therefore, they should moderate their comments to reflect this, it was argued, in respect to those who “suffered more” from baldness. This was challenged as unfair gatekeeping by some. Specifically, some responded that baldness was distressing regardless of its severity: “It is a different type of worry. We worried for what was to come” (Jeremy 91). Continuing this medicalisation, contributors felt it was rational to seek “treatments” to prevent baldness progression. “Treatments” mentioned were commonly hair transplants, pharmaceuticals and scalp pigmentation. Some also advocated shaving the head. These “solutions” were depicted as quick routes to happiness as “onto a new life” (England) and as straightforward. Notably, in the way, they were preceded: “just invest in a very high-quality hair system” (England), “just buzz your hair down” (Nicework!), and ultimately, “just treat your loss” (Ted Bundy). Conversely, the side effects and financial costs of any of these “treatments” were rarely acknowledged. Some contributors would note the ineffectiveness of “treatments” citing their own experiences of medications and transplants that failed to delay or reverse their baldness: “Just had my SIXTH HT last December and now I’m thinning again in the very same area that has had SIX HTs” (BigBear). Otherwise “treatment” advice, including surgeon and pharmaceutical recommendations, were a prominent part of the threads.

Baldness makes you ugly

Although baldness was medicalized by the contributors, it was clear the chief concern men had was not about health but about their appearance and masculinity. Contributors regarded baldness as making them significantly less attractive. Specifically, as making contributors “ugly” (23=63), “less than” (HW87), as looking “terrible” (23=63), “disgusting” (Dbhair), “shit” (Jeremy91) and as “25 going on 65” (Black&Bald). Baldness was also seen as ugly making indirectly. Some saw baldness as always making men unattractive regardless of any other factors. Others noted it was more unattractive if it occurred when they were younger, if it was severer, if they had the wrong face shape or were shorter, if they were single, and if they had thick, lustrous hair to begin with. Contributors made frequent comparisons of losing hair to being fat. Some saw fatness as worse than baldness and thus theirs and other contributors’ “saving grace” (presuming other contributors were slim): “So true. Being fat = game over. Period. I see jacked, sharp-dressed bald dudes pull honeys in at 30+. I never see some fat slob pulling honeys” (BlastMe). Body weight and other aspects of appearance were seen as much less important in defining contributors’ attractiveness relative to baldness, such as becoming mesomorphic.

Baldness is demasculinising

Whilst baldness may be stereotypically assumed to make men more masculine (given its association with testosterone and aggression), forum contributors noted this occurred only for some men, the ones who

are V-shaped, heterosexually successful and appearance ideal in all other respects (such as Sean Connery and Vin Diesel). For most men, including those on the forum, baldness was demasculinising. This apparent contradiction where baldness is stereotyped as masculine but experienced as demasculinising can be partially explained because of the heightened emphasis on the appearance ideal in recent years. This ideal, as well as being hirsute, was described as “lean, mean and sharp-dressed” (BlastMe), “jacked” and being “toned and hunched, (having) big shoulders... reasonable sized arms, toned stomach” (England-). Head hair is a critical component of the male appearance ideal: “if you get into shape but are bald ...you [are still] unattractive” (23=63). Subsequently, contributors described other appearance concerns they had including over their teeth and body hair. The appearance ideal was as important to men as was being masculine, indeed the former could lead to the latter. In addition, the celebrity men who were celebrated as embodying the appearance ideal were “alpha” males (e.g., Alec Baldwin, American Psycho’s Patrick Bateman) with full heads of hair. Baldness made men ugly, not only by taking them away from the appearance ideal (e.g., “getting grey hair [which] is due to worrying about baldness” (23=63)), but also in feminising their appearance. Specifically, contributors lamented weight gain as indirectly arising from coping with baldness including from binge eating: “neglecting the gym right now due to HL – scared I might accelerate it” (23=63) and from baldness pharmaceutical side effects: “develop[ing] gynecomastia because of [baldness] medication” (HW87). However, central to masculinity was not caring or investing in their appearances too much, nor moaning or complaining on internet forums, which would leave men at risk for being accused of being an “over emotional drama queen, you remind me of a chick!” (Bald&Blue). Thus baldness, its impact not only in making men ugly but also in the reportedly profound psychological impact it could exert, meant that men’s masculinity was reduced; a further blow to their status in society.

THEME 2: BALDNESS IS STIGMATISED BY A SUPERFICIAL SOCIETY AND SUPERFICIAL WOMEN

This theme speaks to contributors’ construction of a highly superficial society where sex was important (2.1; Society is Superficial) and where women, who were constructed as deeply superficial themselves, cruelly withheld sex from contributors (2.2; Women are Superficial). Although contributors themselves were driven by sex, they did not construct themselves as superficial.

Society is superficial

Contributors depicted the world as a superficial space where people were innately superficial. To some contributors, only highly attractive men could ever be sexually active (and thus happy). For other contributors, less attractive men could also gain happiness/sex if they “looksmax[ed]” (Bruce88), that is, engaged in strategies to improve their appearance, such as gain-ing muscle, “treating” or disguising their baldness and dressing sharply. Sometimes this needed to be more extreme: “only with plastic surgery and (ste)roids I might have chance” (Blahblahblah). But there would always be a limit to looksmaxxing: “Your genetic blueprint gets you laid not your ‘game’” (Dbhair). This could be hard to accept, as contributors would admit: “You just have to...discover what your plateau is and accept it no matter what your expectations were beforehand. And that’s the hardest part”. This meant: “[not] complaining that [you] can’t get model-looking 9/10 girls to commit to [you], let alone acknowledge [your] existence. It’s off-limit[s].... and always will be” (Bruce88).

Society’s superficiality included a failure to understand the profound impact baldness could have on men. Contributors felt that if baldness were as common among women, sympathy would be greater: “Imagine if a hot girl lost her hair - how would she feel? Why should it be any different for guys? [Just] because a lot of men lose hair, does not make it OK” (23=63). Similarly, some contributors would dismiss their own baldness suffering: “I got the same response as [other contributor] does here. People saying ‘it is

fine' etc. [eventually I went into] denial and said shit like 'I'm sure it won't get worse. It will stay like this' etc etc ... I knew deep down I was lying....it messes you up" (Jeremy91). Particularly frustrating to some contributors was advice that baldness was a trivial problem that could be easily remedied away.

Contributors would resent this advice not only for ignoring the real pain they felt but also for downplaying the advantages that hirsute, conventionally attractive, men had over the contributors: "People who are born to be attractive like to think that they did something special to achieve the success they've had. They also like to think that it's as easy as it is for them for everyone else" (Dbhair).

Women are superficial

Women were both othered and coveted on the forums. Largely, the goal by contributors was to have sex with women. This can be seen from the following examples. First, from the sexual bragging on the forums ("I get a lot of sex"; SkiMT), second, the celebration of porn ("[which] is becoming next level"; RobT), third, when one contributor asked what would another discuss on a date, the reply was "favourite sex positions" (Dbhair), finally, when a contributor wished to demonstrate his ex-girlfriend's lack of commitment in their relationship he gave one singular example: that she was "withdrawing sex very early in the relationship" (Bruce88). Ironically, contributors never identified their goals to have sex, or themselves generally, as superficial; only others were.

Women were regularly ranked on a 0 to 10 scale of physical conventional attractiveness: "I got to have 4 quality (cute, not fat, educated) girlfriends on my level (6-6.5/10)...[not] model-looking 9/10 girls" (Bruce88). Only the higher-ranking women were worth having sex with. Women who were lower on the attractiveness scale were referenced accordingly (e.g., as: "an ugly, fat female colleague"; Thei) but also, lamented, as the only sexual options the contributors had.

Contributors condemned what they perceived as women's discrimination towards balding men. Women were depicted as "demanding [and] unforgiving" (Bruce88). They were referred to as animals or objects ("puppies" (Bruce88), "scraps" (PorkChop)) and sometimes misogynistically: as "dumb sluts" (DryHump) and "ugly landwhales/attention whores

or feminazis" (JackTheLad6). Women were positioned as superficial, valuing looks over everything: "appear-ance is the only thing [women] really care about... (not counting status and money)" (DryHump). Women were also depicted as rejecting bald men in favour of hirsute men "The only woman I ever loved, rejected me and dated some superhot norwood 0 tall guy and laughed at me and called me old...." (Mark120). This rejection caused deep pain, especially if the contributors had previously been successful in dating and been considered conventionally attractive:

"Now, it's like I am almost despised or something. No second looks, nothing... ever. If anything, I get the quick look at and the look away. It's fucking sad. But, then again relieving, because I am tired of depending on women for anything." (RobT)

THEME 3: RESISTANCE TO BALDNESS DESPAIR

This theme speaks to the resistance to the above two forums' themes. Contributors did not comprise one homogenous voice and some men sought to counter the despair (Theme 1) and even the sexism on the forums (Theme 2). This appeared to arise from a genuine empathy and solidarity among contributors or, more pessimistically, an impatience with other contributor's perceived "moaning".

Resistance to baldness despair existed on the forums. Contributors highlighted other explanations for the problems described on the forums including others' lack of social skills or self-imposed isolation or that the problems contributors complained about were exaggerated and not "real problem[s]" (CopingEveryday). Because the problems on the forums were typically dating related, contributors would focus on countering these despairing explanations. For example, one contributor wrote about his conventionally attractive, hirsute, friend who had experienced dating problems to show other contributors that dating problems could happen to anyone—bald or not: "I'm sure there are men in [women's] lives much better looking than me, and [women] didn't want to date them either" (Intellectual). Another similarly noted that a woman

might reject a man as a dating partner for reasons unconnected to his appearance: “Sometimes women are actually not in the mood to date, it’s not necessarily about the guy in front of them, he might be totally fine” (Intellectual). Occasionally other contributors would be criticized for holding women to higher standards than they themselves would be held (see Table 2 for excerpt).

Subsequently, contributors would remind each other to have perspective, such as by accepting that “our lives are one instance; we get one shot. Make the best of it” (BlastMe). This contrasted with “real” problems such as having a terminal disease or “being fat = game over” (BlastMe). Regardless, contributors would highlight that life was full of problems and baldness was unconnected to this, that dating was always difficult to navigate, or that life was unpredictable. Others were encouraged to be realistic about baldness’ impact.

As can be seen from above, sometimes contributors’ resistance was substantiated with their own experience or was common-sensical (e.g., where life-threatening conditions are invoked on the forums to give other contributors perspective on the issue of baldness). However, on occasion, other contributors’ resistance could be neoliberal (i.e., the cultural message that individuals rather than society are wholly responsible for their own wellbeing; Petersen, 1996), where success was depicted as something achievable and within every contributor’s means. For example, one contributor wrote that “every man and woman should look within themselves for happiness” (Thei). Success came from “looksmaxxing” but also developing dating skills: “put in the work and you’ll get what you deserve” (Bruce88). Those that did not do this and suffered nonetheless, were “just extremely weak minded”. The neoliberalism, on occasions, intertwined with sexism: “You will never find happiness in women. very, very few have. You don’t need women to be happy, you need yourself” (RobT; see Theme 2). Overall, this resistance formed a minimal contribution to the forums. Contributors would often ignore this or change the subject in the next reply (as evidenced by the seemingly fewer “quoting” of these posts, compared to other posts, in reply).

DISCUSSION

In the online forums that were the focus of this study, baldness was constructed as an ugly, demasculinising and difficult condition (Theme 1). Furthermore, society and women (but not contributors themselves) were seen as stigmatising balding men (Theme 2). Lastly, although resistance to these two accounts occurred on the forums (Theme 3), this was somewhat minimal. Here, we discuss these findings in terms of research, theory and practice.

BALDNESS DISTRESS AND BALDNESS STIGMA

Baldness dissatisfaction was generally reported as severe and largely, as severer than other forms of body dissatisfaction (Theme 1). Only dissatisfaction from being fat was worse than baldness dissatisfaction (perhaps recognising the now well-documented and pervasive fat stigma).^{31–33} Contributors also reported facing stigma relating to baldness (Theme 2), which supports other tentative, qualitative research that baldness can be experienced as distressing and as something that is stigmatised.^{14,15,34} It also concurs with research showing a critical aspect of the masculine appearance ideal includes a full head of hair.^{3,4}

Resistance to baldness despair

Our findings can also offer an alternative view of baldness’ impact. Whilst baldness is a stigmatised concern for some men, it is not a concern for all men and is not necessarily devastating. Specifically, Theme 3 demonstrated resistance on the forums to the notions that baldness was distressing and/or stigmatised. Researchers have found^{35,36} that those who are balding can and do develop alternative and more positive perspectives on baldness (including by comparing baldness to terminal medical conditions). Indeed Kranz¹² found that men who accepted their baldness were significantly less distressed than men who attempted to compensate or “reverse” their baldness, and that this was the case regardless of age, especially if baldness was more significant. The findings are particularly pivotal when considered in

the broader socio-cultural context, where the idea that baldness must be devastating is widespread and extensively promoted through the process of “commercial medicalisation.”⁹ Commercial medicalisation refers to the deliberate practice of depicting baldness as a stigmatising and isolating medical condition in need of “treatment” to benefit businesses who profit when their baldness “treating” products are purchased.⁹ This is despite evidence that male pattern baldness is not a disease.^{37–40} Medicalisation occurs through forums and bald websites. For example, baldness websites, social media pages and forums appear neutral spaces to share information about hair loss as their title and homepages suggest. However, many promote commercial baldness services.^{9,41,42} For example, among 750 posts from the 30 top Facebook pages on hair loss, 87% were adverts for hair loss procedures or products.⁴² Furthermore, some contributors have been identified as paid to promote some “treatments” on the forums and discredit others by medicalising baldness.^{43–45} Indeed the broader hair loss “information” community is controversial, criticised for being replete with undisclosed corporate influences and being highly competitive over the share of balding market consumers.^{9,43} Indeed, the founder of one hair loss forum notes it is situated within “an industry full of scams.”⁴⁶ This study identified baldness medicalisation (Theme 1) specifically via contributors’ deployment of the Norwood Hamilton scale³⁰ and uncritical acceptance that “treatments” existed for baldness (Theme 1). The Norwood Hamilton scale has been described as a poor measure of baldness^{9,47} and as more accurately a piece of “visual rhetoric...the progressive phases of hair loss represented in the scale convey the sense of an inevitable progression to complete baldness” than an accurate diagnostic tool. Similarly, the “treatments” referenced on the forums for male pattern baldness (e.g., transplants and finasteride) may result in aesthetic changes only rather than providing any medical benefits to an individual. Indeed, some can result in medical harms, for example, infections in hair transplants,⁴⁸ elevated depression and suicidal ideation in finasteride.^{49,50} Few sub-threads on the forums emphasised coping instead of “treatments” progression or other

explicitly medicalised aspects of baldness. If resistance occurred even on these forums, then resistance in the real world. Resistance to baldness distress is rarely reported because of medicalisation. To date, research on the psychosocial impact of baldness has largely assessed biased samples of balding men seeking out treatments who are more likely to be distressed than other balding men (e.g., men recruited via a hair loss clinic).¹⁰ The few studies that assess non-biased samples of balding men find the majority of men (75–95%) do not seek out “treatments”^{12,40,51,52} and are not distressed (e.g., of 4101 participants⁵² 77% reported no dissatisfaction or bother). Nonetheless, baldness medicalisation is powerful where this occurs through forums, websites and even healthcare^{9,53}

The role of gender in body dissatisfaction accounts

Gender and masculinity are critical in understanding men’s baldness experiences for three reasons: first, because baldness was a demasculinising condition for contributors. Second, objectification, an important component of misogyny that harms women,⁵⁴ also may harm men (Theme 2). Our analysis showed men surveyed their baldness continually, reduced their whole worth to their appearance, and bleakly depicted the world as entirely superficial. Men’s self-objectification has also been found in previous studies.^{27,28,55,56} Third, sexism existed in the forum’s accounts where women were denoted as sex objects or animals but blamed for men’s body dissatisfaction. Previous research has also found that men talking online^{57,58} or about their body dissatisfaction^{27,28,55,59} often perpetuate sexism too.

Recent APA work⁶⁰ provides helpful guidance to support men who have psychological distress such as baldness dissatisfaction when it is gendered. The task force is composed of a panel of expert psychologists specialising in male wellbeing. Guideline 3 states: “Psychologists understand the impact of power, privilege, and sexism on the development of boys and men and on their relationships with others” (p. 9). Many forums have explicit policies against hate speech but fail to implement them.⁵⁸ Helpfully, an automatic content moderator that is 95% accurate at detecting misogynist speech now exists. Thus, the sexism on the forums is critical to challenge, not only because it

contributes to the oppression of women, but also because not challenging it fails to help men themselves (e.g., by detracting from the real drivers of baldness and the potential for effective remedy).^{28,55}

Supporting men with body dissatisfaction

Regardless of whether baldness is devastating or not, the consistent message given to those balding should be that pharmaceutical product, transplants and other "treatments" may not be their solution and have side effects, expenses and limitations.^{9,12,34,53} Informed consent is necessary when electing to act against baldness, and there are many options to "dealing" with baldness, including accepting, humouring and even honouring it.^{9,12,34,53} Indeed, the resistance to despair on the forums and elsewhere could be potentially liberating for men. It may encourage them personally to make more informed choices ("perhaps baldness doesn't need to be stopped"). An intervention then that offers nuanced information around baldness is needed. Furthermore, an intervention must unpack the gendered and masculinised experiences of baldness for men whilst challenging the misogyny that often colours these accounts.

The need for effective intervention is underscored, given contributors' view of what society values (Theme 2). The forums were dedicated to baldness, but contributors detailed other aspects of their appearance (like wealth, masculinity and status) that they believed were essential in a man's success. Success arose from sex, and only those who were conventionally attractive, including head hair, could have sex. The gendered society constructed on the forums was harsh, unforgiving and deeply unfair, according to forum contributors. An intervention to alleviate men's baldness dissatisfaction must be carefully constructed. Feminist, empirical interventions can guide us here.^{61,62} Such interventions highlight the importance of the following: (1) challenging the cultural environment that drives body dissatisfaction, (2) providing tools to individuals to cope in the environment in the immediate, (3) involving individuals collaboratively affected in the design and finally (4) challenging aspects of gendered roles that may be harmful, including those conflated with the appearance ideals

(such as head hair's association with manliness).

STRENGTHS AND LIMITATIONS

Strengths included, a research design free from researcher influence (e.g., a forums analysis) which may have helped counter masculine-driven barriers to disclosure. Second, our research was neither commercially funded nor biased. Hence, this study helps build a trustworthy analysis of baldness' impact and its role in men's body dissatisfaction. Future studies should aim to explore baldness in diverse samples of men, away from forums that have conflicts of interest or threads that are not about "coping", as these might be less used by bald older men who will not discuss it online.

REFLEXIVE ANALYSIS

All authors broadly share a feminist approach to research that acknowledges the role of patriarchal and capitalist structures in shaping psychological phenomenon, this philosophical lens, along with a past scholarship from this tradition.^{9,62,63} informed the analysis (e.g., interpretation of medicalisation within the dataset). As critical realists, we accept the construction of themes and acknowledge how other researchers with different underlying philosophies might have reached different conclusions from the same data analysis. That said, throughout our analysis, we did engage in methodical and reflexive activities that aimed to meet the criteria for trustworthiness.^{64,65} For example, NDS and BB met GJ regularly to challenge how personal reflections and values were shaping his analysis and also offered alternative interpretations (e.g., reframing baldness as demasculinising, rather than feminising as per GJ's initial considerations).

CONCLUSIONS

Themes developed from the forums' threads indicate that baldness was constructed as an ugly, demasculinising condition (Theme 1). Superficial society compounded the stigma and pain of this condition, according to contributors (Theme 2). Resistance to these narratives of baldness was evident but relatively minimal in impact (Theme 3). The authors highlight the utility of online forum threads to gain insight into men's subjective experiences and constructions of balding. These findings underscore the importance of

baldness for men as a key component of their body dissatisfaction (masculinity and health) as stigmatised and as in need of support.

CONFLICTS OF INTEREST

No potential conflict of interest was reported by the authors.

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REFERENCES

1. Law C, Labre MP. Cultural standards of attractiveness: A 30-year look at changes in male images in magazines. *J Mass Commun Q*. 2002;79(3):697–711. <http://dx.doi.org/10.1177/107769900207900310>
2. Pope Jr. HG, Olivardia R, Gruber A, Borowiecki J. Evolving ideals of male body image as seen through action toys. *Int J Eat Disord*. 1999;26:65–72. [http://dx.doi.org/10.1002/\(SICI\)1098-108X\(199907\)26:1%3C65::AID-EAT8%3E3.0.CO;2-D](http://dx.doi.org/10.1002/(SICI)1098-108X(199907)26:1%3C65::AID-EAT8%3E3.0.CO;2-D)
3. Jankowski GS, Fawcner H, Slater A, Tiggemann M. ‘Appearance potent’? Are gay men’s magazines more ‘appearance potent’ than straight men’s magazines in the UK? *Body Image*. 2014;11(4):474–81. <http://dx.doi.org/10.1016/j.bodyim.2014.07.010>
4. Jankowski GS, Slater A, Tiggemann M, Fawcner H. The appearance potency of gay and straight men’s websites. *Psychol Sex Rev*. 2016;7(2):48–62.
5. Barlett CP, Vowels CL, Saucier DA. Meta-analyses of the effects of media images on men’s body-image concerns. *J Soc Clin Psychol*. 2008;27(3):279–310. <http://dx.doi.org/10.1521/jscp.2008.27.3.279>
6. Griffiths S, Hay P, Mitchison D, Mond JM, McLean SA, Rodgers B, et al. Sex differences in the relationships between body dissatisfaction, quality of life and psychological distress. *Aust N Z J Public Health*. 2016 Jul 3;40:518–22. <http://dx.doi.org/10.1111/1753-6405.125387>.
7. Jacobi C, Fittig E. Psychosocial risk factors for eating disorders. In: Stewart Agras W, editor. *The Oxford handbook of eating disorders*. 1st ed. New York: Oxford University Press; 2010. p. 123–36.
8. Kanayama G, Barry S, Hudson JI, Pope Jr. HG. Body image and attitudes toward male roles in anabolic-androgenic steroid users. *Am J Psychiatry*. 2006;163(4):697–703. <http://dx.doi.org/10.1176/ajp.2006.163.4.6979>.
9. Harvey K. Medicalisation, pharmaceutical promotion and the Internet: A critical multimodal discourse analysis of hair loss websites. *Soc Semiot*. 2013 Nov;23(5):691–714. <http://dx.doi.org/10.1080/10350330.2013.777596>
10. Frith H, Jankowski GS. Psychosocial impact of androgenetic alopecia on men: A systematic review & meta analysis [Internet]. [cited 2020 Dec 15]. Available from: <https://osf.io/uvzp9>
11. Franzoi SL, Anderson J, Frommelt S. Individual differences in men’s perceptions of and reactions to thinning hair. *J Soc Psychol*. 1990 Apr;130(2):209–18. <http://dx.doi.org/10.1080/00224545.1990.9924571>
12. Kranz D. Young men’s coping with androgenetic alopecia: Acceptance counts when hair gets thinner. *Body Image*. 2011 Sep;8(4):343–8. <http://dx.doi.org/10.1016/j.bodyim.2011.06.006>
13. Wells PA, Willmoth T. Does fortune favor the bald? Psychological correlates of hair loss in males. *Br J Psychol*. 1995 Aug;86(3):337. <http://dx.doi.org/10.1111/j.2044-8295.1995.tb02756.x>
14. Jankowski GS, Gough B, Fawcner H, Halliwell E, Diedrichs PC. Young men’s minimisation of their body dissatisfaction. *Psychol Health*. 2018;33(11):1343–63. <http://dx.doi.org/10.1080/08870446.2018.1496251>
15. Ricciardelli R. Masculinity, consumerism, and appearance: A look at men’s hair. *Can Rev Sociol Can Sociol*. 2011;48(2):181–201. <http://dx.doi.org/10.1111/j.1755-618X.2011.01261.x>
16. Adams G, Turner H, Bucks R. The experience of body dissatisfaction in men. *Body Image*. 2005 Sep;2(3):271–83. <http://dx.doi.org/10.1016/j.bodyim.2005.05.004>
17. Whitaker C, Gough B, Fawcner H, Deighton-Smith N. Young men’s body dissatisfaction: A qualitative analysis of anonymous online accounts. *J Health Psychol*. 2019 Feb 28;26(5):636–49. <http://dx.doi.org/10.1177/1359105319832352>
18. Flynn MA, Stana A. Social support in a men’s online eating disorder forum. *Int J Mens Health*. 2012 Jul 1;11(2):150–69. <http://dx.doi.org/10.3149/jmh.1102.150>
19. Bhaskar R. *A realist theory of science*. 2nd ed. London: Routledge; 2008. 304 p.
20. Alexa. Alexa: The web information company [Internet]. [cited 2012 Oct 23]. Available from: <http://www.alexa.com/>
21. NHS. Hair loss [Internet]. [cited 2020 Mar 17]. Available from: <https://www.nhs.uk/conditions/hair-loss/>
22. Hall M, Grogan S, Gough B. Bodybuilders’ accounts of synthol use: The construction of lay expertise online. *J Health Psychol* [Internet]. [cited 2015 Jul

DOI: <http://dx.doi.org/10.22374/ijmsch.v4i1.55>

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- 6]. Available from: <http://hpq.sagepub.com/cgi/doi/10.1177/1359105314568579>
23. Hall M, Grogan S, Gough B. 'It is safe to use if you are healthy': A discursive analysis of men's online accounts of ephedrine use. *Psychol Health*. 2015 Jul 3;30(7):770–82. <http://dx.doi.org/10.1080/08870446.2014.994632>
 24. British Psychological Society. Ethics guidelines for Internet-mediated research [Internet]. [cited 2017 Apr 10]. Available from: <https://www.bps.org.uk/sites/www.bps.org.uk/files/Policy/Policy%20-%20Files/Ethics%20Guidelines%20for%20Internet-mediated%20Research%20%282017%29.pdf>
 25. Braun V, Clarke V. Thematic analysis. In: Cooper H, Camic PM, Long DL, Panter AT, Rindskopf D, Sher KJ, editors. *APA handbook of research methods in psychology. Research designs: Quantitative, qualitative, neuropsychological, and biological*. Vol 2. Washington, DC: American Psychological Association; 2012. p. 57–71.26.
 26. Braun V, Clarke V. Reflecting on reflexive thematic analysis. *Qual Res Sport Exerc Health*. 2019 Aug 8;11(4):589–97. <http://dx.doi.org/10.1080/2159676X.2019.162880627>.
 27. Griffiths S, Murray SB. Muscle dysmorphia: Clinical resentation and treatment strategies. In: Anderson LK, Murray SB, Kaye WH, editors. *Clinical handbook of complex and atypical eating disorders* [Internet]. [cited 2018 Apr 27]. Available from: <http://www.oxfordclinicalpsych.com/view/10.1093/med-psych/9780190630409.001.0001/med-9780190630409-chapter-14>
 28. Bordo S. *Unbearable weight: Feminism, western culture, and the body*. 2nd ed. Berkley, CA: University of California Press; 2003.29.
 29. Terry G, Braun V. "I think gorilla-like back effusions of hair are rather a turn-off": 'Excessive hair' and male body hair (removal) discourse. *Body Image*. 2016 Jun;17:14–24. <http://dx.doi.org/10.1016/j.bodyim.2016.01.006>
 30. Hamilton JB. Patterned loss of hair in man: Types and incidence. *Ann NY Acad Sci*. 1951 Mar;53(3):708–28. <http://dx.doi.org/10.1111/j.1749-6632.1951.tb31971.x>
 31. Bacon L. Health at every size: The surprising truth about your weight [Internet]. [cited 2014 Jan 12]. Available from: http://books.google.co.uk/books?hl=en&lr=&id=Xbh5FVEW118C&oi=fnd&pg=PR15&dq=health+at+every+size&ots=Xrnoxol3-0&sig=Jco0t3L346gf7NBS4_BGp1FaJjw
 32. Bacon L, Aphramor L. Weight science: Evaluating the evidence for a paradigm shift. *Nutr J*. 2011;10(9):2–13. <http://dx.doi.org/10.1186/1475-2891-10-69>
 33. Burmeister JM, Carels RA. Weight-related humor in the media: Appreciation, distaste, and anti-fat attitudes. *Psychol Pop Media Cult*. 2014;3(4):223–38. <http://dx.doi.org/10.1037/ppm0000029>
 34. Sharratt ND, Jenkinson E, Moss T, Clarke A, Rumsey N. Understandings and experiences of visible difference and romantic relationships: A qualitative exploration. *Body Image*. 2018 Dec;27:32–42. <http://dx.doi.org/10.1016/j.bodyim.2018.08.002>
 35. Kranz D, Nadarevic L, Erdfelder E. Bald and bad? *Exp Psychol*. 2019;66(5):331–45. <http://dx.doi.org/10.1027/1618-3169/a000457>
 36. Welsh N, Guy A. The lived experience of alopecia areata: A qualitative study. *Body Image*. 2009 Jun;6(3):194–200. <http://dx.doi.org/10.1016/j.bodyim.2009.03.004>
 37. CALM. Hair loss. Campaign against Living Miserably [Internet]. [cited 2020 Apr 6]. Available from: <https://www.thecalmzone.net/help/get-help/hair-loss/>
 38. Draper L. Male pattern hair loss – Superdrug™ Online Doctor [Internet]. [cited 2020 Apr 6]. Available from: <https://onlinedoctor.superdrug.com/male-pattern-baldness.html>
 39. Gonul M, Cemil BC, Ayvaz HH, Cankurtaran E, Ergin C, Gurel MS. Comparison of quality of life in patients with androgenetic alopecia and alopecia areata. *An Bras Dermatol*. 2018 Sep;93(5):651–8. <http://dx.doi.org/10.1590/abd1806-4841.20186131>
 40. Tang PH, Chia HP, Cheong LL, Koh D. A community study of male androgenetic alopecia in Bishan, Singapore. *Singapore Med J*. 2000 May;41(5):202–5.
 41. Gupta AK, Ivanova IA. Analysis of YouTube hair loss treatment information: What makes for engaging content? *Dermatol Ther* [Internet]. [cited 2021 Feb 23]. Available from: <https://onlinelibrary.wiley.com/doi/10.1111/dth.14244>
 42. Gupta AK, Ivanova IA. Hair loss treatment information on Facebook: Content analysis and comparison with other online sources. *J Cosmet Dermatol*. 2021;20(2):577–83. <http://dx.doi.org/10.1111/jocd.13830>
 43. Rant about Bald Truth Talk Forum [Internet]. [cited 2021 Feb 12]. Available from: www.reddit.com/r/malepatternbaldness/comments/1wy6nt/rant_about_bald_truth_talk_forum/
 44. Cosmeticium. Are hair transplantation reviews and comments reliable? [Internet]. [cited 2020

DOI: <http://dx.doi.org/10.22374/ijmsch.v4i1.55>

Int J Mens Com Soc Health Vol 4(1):e54–e67; June 6, 2021.

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- Mar 30]. Available from: <https://cosmeticium.com/are-hair-transplantation-reviews-reliable/>
45. HairLossTalk. Forum update: Aug 19, 2019 – Upgrade coming [Internet]. 2019 [cited 2020 Mar 30]. Available from: <https://www.hairlosstalk.com/interact/threads/forum-update-aug-19-2019-upgrade-coming.124449/page-5>
46. HairLossTalk. About us [Internet]. [cited 2021 Feb 12]. Available from: <https://www.hairlosstalk.com/about/>
47. Guarrera M, Cardo P, Arrigo P, Rebora A. Reliability of Hamilton-Norwood classification. *Int J Trichol*. 2009 Jul 1;1(2):120. <http://dx.doi.org/10.4103/0974-7753.58554>
48. NHS. Hair transplant [Internet]. [cited 2020 Mar 17]. Available from: <https://www.nhs.uk/conditions/cosmetic-procedures/hair-transplant/>
49. Diviccaro S, Melcangi RC, Giatti S. Post-finasteride syndrome: An emerging clinical problem. *Neurobiol Stress* [Internet]. [Cited 2020 May 12]. Available from: <https://search.ebscohost.com/login.aspx?direct=true&AuthType=ip,shib&db=psyh&AN=2020-36523-001&site=ehost-live&custid=s4121186>
50. Ganzer CA, Jacobs AR. Emotional consequences of Finasteride: Fool's Gold. *Am J Mens Health*. 2018 Jan;12(1):90–5. <http://dx.doi.org/10.1177/1557988316631624>
51. Alfonso M, Richter-Appelt H, Tosti A, Viera MS, García M. The psychosocial impact of hair loss among men: A multinational European study. *Curr Med Res Opin*. 2005 Nov;21(11):1829–36. <http://dx.doi.org/10.1185/030079905X61820>
52. DeMuro-Mercon C, Rhodes T, Girman CJ, Vatten L. Male-pattern hair loss in Norwegian Men: A community-based study. *Dermatology*. 2000;200(3):219–22. <http://dx.doi.org/10.1159/000018386>
53. Wiggins S, Moore-Millar K, Thomson A. Can you pull it off? Appearance modifying behaviours adopted by wig users with alopecia in social interactions. *Body Image*. 2014 Mar;11(2):156–66. <http://dx.doi.org/10.1016/j.bodyim.2014.01.004>
54. Kilbourne J. Killing us softly 4: Advertising's image of women [Internet]. [cited 2012 Mar 23]. Available from: http://www.youtube.com/watch?v=1ujySz-_NFQ&feature=related
55. Jankowski GS. The sexism of men's body dissatisfaction accounts. *Psychol Women Equal Rev*. 2019;2(1):38–54. Available from: https://www.researchgate.net/publication/340418150_The_sexism_of_men's_body_dissatisfaction_accounts
56. Seekis V, Bradley GL, Duffy AL. Social networking sites and men's drive for muscularity: Testing a revised objectification model. *Psychol Men Masculinities* [Internet]. [cited 2020 Oct 26]. Available from: <http://doi.apa.org/getdoi.cfm?doi=10.1037/men0000265>
57. Dignam PA, Rohlinger DA. Misogynistic men online: How the red pill helped elect trump. *Signs J Women Cult Soc*. 2019 Mar;44(3):589–612. <http://dx.doi.org/10.1086/701155>
58. Jaki S, De Smedt T, Gwózdź M, Panchal R, Rossa A, De Pauw G. Online hatred of women in the Incels.me forum: Linguistic analysis and automatic detection. *J Lang Aggress Confl*. 2019 Nov 25;7(2):240–68. <http://dx.doi.org/10.1075/jlac.00026.jak>
59. Davis K. 'A dubious equality': Men, women and cosmetic surgery. *Body Soc*. 2002 Jan 3;8(1):49–65. <http://dx.doi.org/10.1177/1357034X02008001003>
60. APA, Boys and Men Guidelines Group. APA guidelines for psychological practice with boys and men [Internet]. [cited 2020 Feb 26]. Available from: <https://www.apa.org/monitor/2019/02/male-guidelines>
61. Levine MP, Smolak L. Recent developments and promising directions in the prevention of negative body image and disordered eating in children and adolescents. In: Smolak L, Thompson JK, editors. *Body image, eating disorders, and obesity in youth: Assessment, prevention, and treatment*. 2nd ed. . Washington, DC: American Psychological Association; 2009 p. 215–39.
62. Piran N, Teall T. The Developmental Theory of Embodiment. In: McVey GL, Levine M, Piran N, Ferguson HB, editors. *Preventing eating-related and weight-related disorders: Collaborative research, advocacy, and policy change: Collaborative research, advocacy, and policy change*. Ontario, Canada: Wilfrid Laurier University Press; 2012. p. 169–98.
63. Bordo S. *Twilight zones: The hidden life of cultural images from Plato to O.J.* 1 ed. Berkeley, CA: University of California Press; 1999. 252 p.
64. Lincoln YS, Guba E. *Naturalistic inquiry*. Newbury Park, CA: SAGE; 1985.
65. Nowell LS, Norris JM, White DE, Moules NJ. Thematic analysis: Striving to meet the trustworthiness criteria. *Int J Qual Methods*. 2017 Dec;16(1):1–13. <http://dx.doi.org/10.1177/1609406917733847>

DOI: <http://dx.doi.org/10.22374/ijmsch.v4i1.55>

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