

"Do I have a big enough penis? Does it look weird? Should I have my pubes shaved?": Genital Self-Image and its Implications for Sexual Well-Being Among University Men

By

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Dalhousie University is located in Mi'kma'ki, the
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Abstract

Genital self-image (GSI), encompassing individuals' thoughts and feelings regarding their genital appearance and functionality, remains underexplored among men, particularly during the formative university period. While initial research suggests moderately positive GSI among men, existing studies predominantly focus on penis size and overlook other aspects of men's GSI (e.g., pubic hair, genital functionality, and overall genital aesthetics). Recent quantitative studies have explored the link between GSI and sexual well-being; however, there is a lack of qualitative research exploring these dynamics to capture the lived experiences of men. This study, rooted in the theoretical framework of hegemonic masculinity, used interpretative phenomenological analysis on interviews with five Dalhousie University men. Six themes were identified and developed into interpretations of the meanings of the phenomenon (GSI) and its impact on three dimensions of sexual well-being: sexual activity, sexual functioning, and sexual satisfaction. The findings contribute to the ongoing discourse surrounding men's GSI and offer insights, emphasizing the importance of addressing negative genital perceptions and promoting genital acceptance for fostering positive GSI and improving sexual well-being among men. Understanding and addressing men's GSI can facilitate health promotion efforts aimed at promoting positive GSI and, consequently, enhancing sexual well-being among men.

List of Abbreviations Used

GSI	Genital Self-Image
IPA	Interpretative Phenomenological Analysis

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Chapter 1: Introduction

Genital self-image (GSI), an important component of body image and a core element of sexual health, is an individual's subjective perception and evaluation of their own genitals (Herbenick et al., 2013; Smith et al., 2017). Research demonstrates the impact of GSI on sexual well-being, psychological well-being, and quality of life (Amos et al., 2016; Davis et al., 2013; Gaither et al., 2017; Saffari et al., 2016; Wilcox et al., 2015). For example, individuals with positive GSI tend to experience increased self-esteem, self-perceived sexual attractiveness, and overall confidence in intimate relationships (Amos et al., 2016; Gaither et al., 2017; Wilcox et al., 2015). They may also experience lower levels of sexual anxiety and greater sexual satisfaction, leading to an improved quality of life (Davis et al., 2013). Conversely, those with negative GSI may experience feelings of shame, embarrassment, and anxiety regarding their genitals (Hustad et al., 2022; Saffari et al., 2016; Wilcox et al., 2015), leading to sexual avoidance, reduced sexual satisfaction, and a diminished quality of life (Gaither et al., 2017). While extensive research has focused on GSI among women (e.g., Benabe et al., 2022; Fudge & Byers et al., 2017; Vigil et al., 2022), a notable gap persists in understanding GSI among men. Most studies have centered on penis size and excluded other aspects of GSI such as genital aesthetics and genital functionality. This study aimed at bridging these gaps by exploring the lived experiences of GSI among university men at university, a critical phase in the development of self-perception and sexual identity (Alexander et al., 2015).

The purpose of this study was to explore university men's subjective thoughts and feelings about their genitals and to uncover which genital aspects hold significance for

their GSI. By employing a qualitative approach, this study sought to explore the experiences of university men by allowing for an in-depth examination of the factors influencing their GSI beyond the predominant emphasis on penis size. This study also aimed to investigate the implications of GSI on three dimensions of sexual well-being within the context of university men's lived experiences: sexual activity, sexual functioning, and sexual satisfaction. By examining the relationship between GSI and sexual well-being, this research sought to understand how men's GSI may influence their sexual behaviours, experiences, and overall satisfaction with their intimate relationships. Understanding these dynamics will be useful for contributing to the ongoing discourse around men's GSI and developing targeted interventions and support strategies aimed at enhancing men's GSI and promoting sexual well-being.

This chapter provides an overview of the research study, its context, research objectives and questions, and significance in offering insights into men's GSI and its implications for sexual well-being.

Terminology

This research employs specific gender-related terminology, which are discussed and defined in the following sections.

Sex and Gender

Historically, the terms "sex" and "gender" were often used interchangeably; however, researchers are beginning to adopt more precise definitions of these terms. Sex refers to the biological attributes assigned at birth, including chromosomes and physical anatomy, that are typically categorized as male, female, or intersex (World Health Organization [WHO], 2022). Gender refers to the socially constructed roles, behaviours,

and identities deemed appropriate for men, women, and gender diverse individuals (WHO, 2022). How an individual expresses their gender varies depending on the roles they adopt, their interactions with others, and the ways that gender is established in society (Canadian Institutes of Health Research, 2019).

Men

This study encompasses individuals who identify as men or align with a masculine gender identity, including men who identify as cisgender, transgender, Two-Spirit, and queer. Cisgender (cis) refers to individuals whose gender identity aligns with their sex assigned at birth (Moseson et al., 2020). Transgender (trans) is a broad term used for individuals whose gender identity or gender expression differs from their assigned sex at birth (American Psychological Association [APA], 2015; Moseson et al., 2020). Trans men (female-to-male; FtM) are individuals who were assigned female at birth but have transitioned, are transitioning, or wish to transition to a more masculine gender identity (APA, 2015). Two-Spirit is a term embraced by some Indigenous people that acknowledges diverse sexualities, gender identities, and spiritual connections (Harlan & Salway, 2020). Lastly, queer is an inclusive umbrella term that encompasses all non-heterosexual and non-cisgender sexual and gender minorities (APA, 2015; Morandini et al., 2017; Worthen, 2023). It acknowledges the diverse spectrum of sexual orientations, gender identities, and expressions within the 2SLGBTQ+ community, including genders such as trans, non-binary, and genderfluid, as well as sexual orientations such as gay, bisexual, and pansexual (Morandini et al., 2017). Queer provides a space for individuals who may not fit neatly into conventional categories of sexuality and gender (Morandini et al., 2017). Throughout this thesis, the term “men” is used inclusively to represent the

diverse identities within this category. These terms will be used consistently throughout the research.

Men's GSI

Men's GSI encompasses their genital perceptions, meaning their subjective thoughts and feelings about their own genitals (Herbenick et al., 2013; Smith et al., 2017). GSI is an umbrella term that encompasses various genital perceptions, covering aspects of genital appearance (e.g., penis size, circumcision status), genital functionality (e.g., sensation, erection function), and overall genital satisfaction (Davis et al., 2013; Gaither et al., 2017; Herbenick et al., 2013; Smith et al., 2017). Various factors contribute to men's GSI, including exposure to sexualized media, past sexual encounters, peer interactions, and societal expectations (Hustad et al., 2022; Lundin Kvaalem et al., 2014; Veale et al., 2014).

Previous research has predominantly focused on quantitative approaches, with a primary focus on men's satisfaction with penis size (Gaither et al., 2017; Gulseth et al., 2021; Herbenick et al., 2013). While important, this genital aspect represents only one facet of men's GSI and overshadows other potentially important dimensions such as perceptions of genital aesthetics and functionality. This singular emphasis on size has hindered a comprehensive understanding of the diverse perspectives and experiences men hold regarding their genitals.

By extending the focus beyond size perceptions and incorporating a more comprehensive exploration of various genital aspects, this qualitative study aimed to broaden our understanding of men's GSI. This study sought to address the current gaps in

the GSI literature by adopting a more inclusive methodology that captures the richness and depth of diverse experiences surrounding men's GSI.

Sexual Well-Being

Sexual well-being is a multifaceted construct that refers to a person's subjective evaluations of their sexuality, sexual life, and sexual relationships (Byers & Rehman, 2014; Štulhofer et al., 2018). It includes assessments of various aspects such as satisfaction with sexual relationships, levels of sexual desire and distress, the frequency of sexual activity, and sexual function (Byers & Rehman, 2014; Mitchell et al., 2021). Sexual well-being extends beyond the absence of sexual dysfunction or distress and incorporates positive factors like sex-positive practice, resilience in sexual experiences, and comfort with one's sexuality (Mitchell et al., 2021; WHO, 2010). Individuals reporting greater sexual well-being tend to endorse higher levels of life satisfaction, overall subjective well-being, and happiness (Espinosa-Hernández et al., 2016).

Recognizing its holistic nature, it is important to consider multiple dimensions when exploring sexual well-being (Mitchell et al., 2021). In this study, sexual well-being was examined through three dimensions: sexual activity, sexual functioning, and sexual satisfaction. Together, these dimensions provide insights into men's experiences with their genitals and facilitate a deeper understanding of the implications of GSI for sexual well-being.

Sexual Activity

Sexual activity involves consensual and fulfilling sexual behaviours that allow individuals to explore and express their sexuality (Rodriguez-Nieto et al., 2019). It includes a variety of activities, ranging from solo acts like masturbation to partnered

experiences like intimate touching and sexual intercourse. Modern digital technologies have introduced new forms of sexual activity, including the consumption of pornography (Groves et al., 2014), sharing sexualized text messages or images (Chalfen, 2009), and recording sexual encounters (Kotigua et al., 2021). This study sought to understand how men's GSI influences their sexual activity.

Sexual Functioning

Sexual functioning refers to an individual's capacity to engage in and derive enjoyment from their sexual experiences (McCabe et al., 2016). Sexual functioning is traditionally viewed through the framework of the sexual response cycle, which includes desire, arousal, orgasm, and resolution (Stephenson, 2018). While physiological markers are one component of sexual functioning, the complexity of sexual experiences transcends these boundaries. Men's motivations for sexual activity may go beyond seeking pleasure; they may also involve forming connections and emotional bonds, thus emphasizing the subjective aspect of sexual functioning (Goldey et al., 2016). Furthermore, focusing on genital response as the sole indicator of sexual functioning may limit our understanding of the diverse ways individuals explore and express their sexuality. This study adopted a comprehensive approach to sexual functioning, considering both the presence or absence of physiological difficulties in the sexual response cycle (Kalmbach et al., 2015) and subjective satisfaction with the frequency of sexual desire and behaviours (Fielder, 2013).

Sexual Satisfaction

Sexual satisfaction encompasses an individual's subjective evaluation of their sexuality, sexual experiences, and relationships, considering both positive and negative

aspects (Lawrance & Byers, 1995; Monteiro, 2014). Rather than the mere absence of disease or dysfunction, sexual satisfaction can arise from positive sexual experiences. For example, one can experience satisfaction with physical and emotional aspects, such as experiencing pleasure, arousal, and orgasm during sexual encounters, as well as relational aspects like mutuality, romance, and emotional expression (Monteiro, 2014).

Collectively, these three dimensions form the framework of sexual well-being explored in this study.

Men's GSI and Sexual Well-Being

The role of GSI in men's sexual well-being is an emerging field that has the potential to uncover its importance for sexual activity, functioning, and satisfaction. Some quantitative studies indicate that men with positive GSI experience greater sexual well-being (Amos et al., 2016; Wilcox et al., 2015), and that satisfaction with one's genitals influences sexual activity, sexual functioning, and sexual satisfaction (Gaither et al., 2015; Komarnicky et al., 2019; Wilcox et al., 2015). Men with negative GSI may avoid specific sexual activities, such as self-examination and receiving oral sex, or abstain from sexual activity altogether (Gaither et al., 2017). Negative GSI has been linked to sexual functioning difficulties related to erectile function, achieving orgasm, and sexual desire (Ålgars et al., 2011; de Silva et al., 2023; Wilcox et al., 2015). Beyond physical impacts, men with negative GSI tend to experience lower levels of sexual satisfaction with the physical sensations and emotional aspects of their sexual relationships (Goldberg et al., 2023; Saffari et al., 2016; van den Brink et al., 2018). This study aimed to contribute to the existing body of knowledge by offering a qualitative exploration of the implications of men's GSI for sexual well-being. Through a qualitative

approach, this research aimed to provide a deeper understanding of how men's GSI influences their sexual activity, sexual functioning, and sexual satisfaction.

Overview of the Literature

The existing literature on GSI predominantly focuses on women (e.g., Benabe et al., 2022; Fudge & Byers et al., 2017; Herbenick et al., 2011), which leaves a notable gap in our understanding of men's perceptions and experiences regarding their genitals. Furthermore, many of these studies are dated, and the literature tends to fixate on penis size satisfaction and overlook other aspects of men's GSI. This narrow focus fails to capture the nuances of men's experiences and perspectives regarding their genitals. Additionally, the predominance of quantitative methodologies in studying GSI and sexual well-being often prioritizes correlations over exploring men's lived experiences, emotions, and perceptions. Moreover, the lack of diversity in samples, with most studies centered around cisgender heterosexual men, limits the representation of diverse perspectives and perpetuates a narrow understanding of men's GSI. Finally, there is limited research focusing on the university age group, thus missing an opportunity to understand how GSI and sexual well-being evolve during this formative stage of life.

This study aimed to address these gaps by adopting a qualitative approach to delve into the subjective experiences and perspectives of university men regarding their GSI and sexual well-being. Qualitative research offers an opportunity to explore complex phenomena such as individual perceptions and experiences. By employing qualitative methods, this study aimed to capture the nuances of participants' narratives and allow for a more comprehensive understanding of GSI and its implications for sexual well-being. This approach holds the potential to challenge existing narratives, broaden our

understanding, and ultimately contribute to promoting healthier GSI and positive sexual well-being among men.

University Students as a Unique Demographic

University men represent a unique demographic for studying GSI and sexual well-being due to the distinctive experiences they undergo during this phase of societal transition, sexual exploration, and experimentation (Alexander et al., 2015; Herbenick et al., 2021). Despite university students' diverse and distinct sexual health needs, they are often excluded from research due to prevalent risk-focused frameworks and societal stigma (Casola et al., 2022; Manning et al., 2014). Societal pressures, peer dynamics, and stigma, influenced by factors like hookup culture and prevailing gender norms, shape university students' sexual experiences (Kettrey, 2016; Wentland & Reissing, 2014). This study aimed to uncover the relationship between university men's GSI and sexual well-being. Understanding these connections may foster positive outcomes within the receptive milieu of university culture.

It is important to acknowledge that the findings derived from this study may be particularly relevant to individuals who have the privilege to explore, reflect upon, and engage with their genital and sexual experiences within the accommodating environment of a university. Consequently, the applicability of these findings may be confined to comparable contexts and may not extend to cultures lacking similar privileges.

Contextualizing the COVID-19 Pandemic

Conducted in March 2023, data collection was completed during the COVID-19 pandemic, a period that significantly affected university students' overall and sexual well-being (Mollaioli et al., 2021). Lockdowns and social distancing measures disrupted

opportunities for partnered sexual activities that led to shifts in solo sexual behaviours, such as increased engagement in online pornography (Pornhub Insights, 2020), sex toy sales (Smothers, 2020), dating app downloads (Stunson, 2020), and sexting behaviours (Herbenick et al., 2022). Canadian studies have reported reductions in sexual frequency, pleasure, and satisfaction among university students during the pandemic (Gauvin et al., 2022; Wood et al., 2022). Wood et al. (2022) indicated that 56% of university students reported decreased sexual frequency with casual partners, and 39% reported a similar decrease with primary partners. Similarly, Gauvin et al. (2022) found declines in students' sexual functioning, including decreases in sexual pleasure, frequency of partner-based orgasms, and the occurrence of solitary orgasm. Acknowledging the research on the impact of the COVID-19 pandemic on university students' overall and sexual well-being, this study contextualizes participants' responses within the period of the pandemic and recognizes that participants' experiences may have been influenced by the unique circumstances of this time.

Changing Gender Norms for University Men

Men's sexual experiences are influenced by evolving social gender norms, which dictate sexual beliefs, prescribe gender-based roles, and inform scripts governing sexual interactions (Courtenay, 2000; Khera et al., 2022). Traditional masculinity ideals, once characterized by rigid adherence to traditional gender roles and limited expressions of masculinity, are undergoing a shift driven by changing cultural attitudes towards gender, increased awareness of gender diversity, and advocacy efforts promoting gender equality and inclusivity (Kettrey, 2016; Zuo et al., 2018). Consequently, contemporary masculinity is beginning to embrace a more diverse range of expressions and identities,

challenging traditional notions of what it means to be a man. This transformation entails greater acceptance of diverse sexual orientations and gender identities, the expansion of gender roles, and an increased openness to casual sexual encounters (García-Vega et al., 2017; Harding & Jencks, 2003; Twenge et al., 2016). Understanding these evolving gender norms may be useful for understanding men's lived experiences, as participants' perceptions of GSI may be evolving in alignment with these shifting norms.

Study Purpose and Research Questions

Despite the significance of sexual well-being for men's life satisfaction, overall subjective well-being, and happiness, few studies have qualitatively explored its specific dimensions, particularly in the context of GSI. Most research has predominately focused on penis size satisfaction as the sole component of men's GSI, overlooking other potentially important aspects of this phenomenon. Furthermore, previous research has often neglected to consider the normative experiences of university students when examining sexual well-being, instead viewing it solely through risk perspectives (Casola et al., 2022; Manning et al., 2014).

To address these gaps, this qualitative study aimed to enhance our understanding of the implications of GSI for three dimensions of university men's sexual well-being: sexual activity, sexual functioning, and sexual satisfaction. Rooted in Connell's (1995) hegemonic masculinity framework and adopting the principles of interpretative phenomenological analysis, this study sought to unveil the underlying meanings of GSI expressed in the experiences of university men and cast light on previously unexplored facets of GSI and sexual well-being.

The overarching objectives of this study were twofold: to explore university men's thoughts and feelings regarding the appearance and functionality of their genitals and to identify the implications of GSI on their sexual well-being. To achieve these objectives, this study addressed the following research questions:

- 1) What thoughts and feelings do men have regarding their GSI, which includes their genital appearance and functionality?
- 2) How does men's perception of their GSI influence or impact three dimensions of their sexual well-being: sexual activity, sexual functioning, and sexual satisfaction?

Research Significance

Understanding men's GSI and its implications for sexual well-being holds significance for addressing gaps in existing literature and informing theoretical and practical applications. This study targets several gaps, including the underemphasis on GSI among men, the narrow focus on penis size satisfaction, the limited research focusing on university-aged men, and the predominance of quantitative measures in previous studies. By adopting a qualitative approach, this research aimed to comprehensively capture diverse experiences and perspectives on GSI among university men and enrich the discourse on this phenomenon.

The findings of this study may have theoretical implications for deepening our understanding of hegemonic masculinity. By examining how men's beliefs and attitudes towards their genitals are influenced by societal norms and expectations, this research may contribute to understanding of how hegemonic masculine ideals shape individual behaviour and attitudes. Investigating how men adhere to or resist hegemonic

expectations can provide insights into the complexities of masculinities and its impact on experiences of GSI and sexual well-being.

Moreover, the findings drawn from this study may hold practical implications for interventions aimed at promoting positive GSI and sexual well-being among men. Tailored interventions, such as comprehensive sexual health education, counselling and mental health support, and university-led campaigns can be informed by identifying specific genital concerns and associated psychological distress. By cultivating self-confidence, acceptance, and coping strategies, these interventions can enhance men's GSI and sexual well-being. Advocating for the inclusion of discussions on GSI in sexual health education programs and promoting inclusive environments that celebrate genital diversity can contribute to reducing stigma and promoting body positivity. By challenging traditional gender norms, advocacy efforts can create spaces that encourage positive GSI and promote sexual well-being among men. Overall, this study aspired not only to address gaps in the literature but also to inform theoretical and practical applications aiming to promote positive GSI and sexual well-being.

Summary

In this chapter, I offered the rationale for conducting this study, stating its purpose, questions, and significance. In the next chapter, I synthesize the relevant literature to understanding men's experiences with GSI and sexual well-being, highlight gaps in the existing knowledge, and explain how my study aimed to address these gaps.

Chapter 2: Literature Review

In this chapter, I summarize the literature dedicated to men's GSI and sexual well-being. The chapter begins by exploring the literature on men's GSI, followed by a presentation of literature exploring the connection between GSI and sexual well-being. The chapter culminates by identifying gaps in current knowledge and outlining how my study addresses these gaps.

It is important to acknowledge the literature composition in this study. Despite efforts to include recent literature, certain areas within this field lack recent activity. Therefore, the inclusion of older studies is justified due to the limited availability of recent literature in this domain. Foundational works from earlier periods continue to offer relevant insights and serve as the basis for contemporary research. By incorporating both old and new research, this literature review aimed to offer a comprehensive understanding of the research while addressing the existing gaps.

Men's GSI

GSI, alternatively termed genital satisfaction or genital perception, is an important part of body image that refers to the thoughts and feelings men have regarding various aspects of their genital appearance and functionality (Herbenick et al., 2013; Komarnicky et al., 2019; Smith et al., 2017). Positive GSI is characterized by feelings of comfort, satisfaction, and/or acceptance of one's genitals, while negative GSI may lead to discomfort, dissatisfaction, and/or distress (Herbenick et al., 2013; Hustad et al., 2022). Negative GSI is associated with diminished overall mental health, heightened levels of anxiety and depression, and lower self-confidence and self-esteem (Amos et al., 2016; de Silva et al., 2023). Moreover, negative GSI can influence health-related behaviours,

potentially leading to avoidance of sexual health practices and reluctance to seek medical advice (Amos et al., 2016; Saffari et al., 2016).

Various factors contribute to the formation of men's GSI. Body image and overall self-esteem are also closely linked to GSI, as men's perceptions of their genitals often intersect with their broader perceptions of themselves (Herbenick et al, 2013; Komarnicky et al., 2019). Social and cultural norms regarding genital appearance and function play a role in influencing men's GSI (Jones & Smith, 2018). For example, hegemonic ideals of masculinity, characterized by traits like virility and strength, often extend to expectations regarding genital appearance and functionality (Connell & Messerschmidt, 2005). Men who internalize these ideals may experience feelings of inadequacy or insecurity if their genitals deviate from these standards. Exposure to sexualized media and peer comparisons can also impact GSI (Sharp & Oates, 2019). Research suggests that exposure to pornography is associated with lower satisfaction with penis size and general aspects of GSI (de Silva et al., 2023; Loehle et al., 2017). Additionally, cultural attitudes and taboos surrounding men's sexual health, such as reluctance to openly discuss topics related to genital appearance or function or genital hygiene, can contribute to feelings of shame or embarrassment and inhibit dialogue about GSI (Ezhova et al., 2020).

In response to negative GSI or genital concerns, men may adopt avoidance and safety-seeking behaviours as coping mechanisms to alleviate their distress (Veale et al., 2015). Common avoidance behaviours include wearing loose-fitting clothing to conceal perceived genital flaws, avoiding sexual intercourse or physical intimacy, and avoiding looking at pictures of naked men in magazines or on the internet (Veale et al., 2015).

Additionally, men with negative GSI may engage in safety-seeking behaviours such as seeking reassurance about penis size, grooming pubic hair, taking genital measurements, or researching methods to modify genital appearance (Veale et al., 2015).

Despite the potential implications of negative GSI, research in this area remains limited, with a predominant focus on penis size satisfaction. Few studies have considered the myriad of other genital aspects that contribute to GSI, indicating a gap in understanding that warrants further exploration.

Aspects of Men's GSI

Although most men express moderately positive GSI (Herbenick et al., 2013), a considerable portion of existing studies disproportionately fixate on penis size as the singular determinant or component of GSI. While satisfaction with penis length and/or girth is only one aspect of men's GSI, the penis is a physical attribute that is often a source of men's self-confidence and feelings of masculinity (Komarnicky et al., 2019). Research on penis size satisfaction has identified size concerns across various sexual orientations and gender identities (Davis et al., 2013; Loehle et al., 2017; Tiggemann et al., 2008). Dissatisfaction with penis size is prevalent, with approximately 15% to 39% of men expressing discontent (Gaither et al., 2017; Hustad et al., 2022), and a notable 45% to 60% expressing a desire for a larger penis (Hustad et al., 2022; King, 2021; Lever et al., 2006; Tiggemann et al., 2008). Penis size concerns extend to various aspects of the penis, including flaccid size, erect length, and girth (Gaither et al., 2017; Gulseth et al., 2021). Importantly, GSI is not solely determined by actual penis size. Men with average-sized penises also report dissatisfaction (Davis et al., 2013; Gulseth et al., 2021; Johnston

et al., 2014; Veale et al., 2015), indicating that the perception of penis size, rather than its actual dimensions, is an important element in men's GSI.

Men's GSI extends beyond the traditionally studied aspects of penis size to include other attributes of their genitals, including aesthetic and functional aspects (de Silva et al., 2023). Loehle et al. (2017) argued that men's GSI and its specific aspects beyond penis size are poorly understood because few instruments have been developed to assess men's GSI. Recognizing the need for further exploration on men's GSI, researchers have employed the Index of Male Genital Image (IMGI). This scale measures various dimensions of men's genitals, including superficial appearance, penis size and shape, circumcision, ejaculatory concerns, and pubic hair (Davis et al., 2013). Findings from studies employing the IMGI have shown that many men experience dissatisfaction with urethral opening position, ejaculatory strength, and amount of pubic hair, whereas many experience satisfaction with the shape of their glans, circumcision status, and girth of their erect penis (Davis et al., 2013; Gaither et al., 2017). This literature reveals the multifaceted nature of men's GSI that extends beyond mere size perceptions.

Men's GSI and Sexual Well-Being

Men's GSI is influential for various dimensions of sexual well-being, including sexual activity, sexual functioning, and sexual satisfaction. While GSI is multifaceted, existing studies predominantly focus on penis size satisfaction and its impact on sexual well-being (Ålgars et al., 2011; Gulseth et al., 2023; Komarnicky et al., 2019; Veale et al., 2015). Positive associations between penis size satisfaction and heightened frequency and enjoyment of sexual encounters have been established (de Silva et al., 2023; Gaither et al., 2017; Gulseth et al., 2023; Reinholtz & Muehlenhard, 1995). In contrast, penis size

dissatisfaction correlates with reduced sexual activity, increased likelihood of sexual functioning difficulties, and lower sexual satisfaction (Gaither et al., 2017; van den Brink et al., 2018; Wilcox et al., 2015). Collectively, these findings underscore the adverse effects of penis size dissatisfaction on men's sexual well-being.

Recognizing the complexity of GSI, studies have started to expand their focus beyond penis size prompting a more holistic exploration of GSI's influence on sexual well-being. However, due to the limited research in this area, this literature review occasionally draws insights from the extensive body of research on penis size satisfaction to illuminate GSI's broader implications for men's sexual well-being.

Men's GSI and Sexual Activity

Sexual activity, universally recognized as an important aspect of human life and a component of overall well-being (Muise et al., 2016) exhibits correlations with GSI across various dimensions. Studies have shown that men with a more favourable GSI tend to engage in a higher frequency and diversity of sexual encounters (de Silva et al., 2023; Gaither et al., 2017). Conversely, negative GSI manifests in avoidance and safety-seeking behaviours such as avoiding situations where others might see one's genitals, avoiding specific sexual activities such as giving or receiving oral sex, and experiencing embarrassment or anxiety during sexual encounters (Ålgars et al., 2011; Hustad et al., 2022; Saffari et al., 2016; Wilcox et al., 2015). Moreover, negative GSI has been linked to reduced engagement in various sexual activities like penile-vaginal intercourse and both giving and receiving oral sex (Gaither et al., 2017; Smith et al., 2017). Gaither et al. (2017) found that dissatisfied men reported less daily and weekly sexual activity compared to satisfied men. Interestingly, Ålgars et al. (2011) found that a positive GSI is

linked to increased partnered sexual activity but does not significantly affect masturbation frequency or the occurrence of sexual fantasies.

The impact of GSI on sexual activity extends beyond behavioural patterns and influences the overall quality of sexual encounters. Whereas men with positive GSI report higher levels of sexual enjoyment, men with negative GSI may struggle with feelings of inadequacy, shame, and embarrassment during sexual activity (Gaither et al., 2017). Avoidance of sexual activity due to negative GSI can contribute to feelings of isolation, loneliness, and diminished self-esteem (Reinholtz & Muehlenhard, 1995). Further, negative GSI and its negative impact on sexual activity can lead to various negative mental health implications, including heightened levels of anxiety, depression, and overall psychological distress (Smith et al., 2017). These mental health consequences of negative GSI can significantly affect one's sexual and overall well-being. These findings underscore the influence of men's GSI on their sexual activity, with positive GSI associated with increased frequency, diversity, and enjoyment of sexual encounters.

Men's GSI and Sexual Functioning

Healthy sexual functioning is crucial for overall sexual health and quality of life (Fielder, 2013). Research has shown that men's GSI plays a role in their sexual functioning. Men with positive GSI tend to experience fewer difficulties with sexual functioning, while those with negative GSI often report heightened sexual anxiety and additional challenges (Ålgars et al., 2011; de Silva et al., 2023; Wilcox et al., 2015). Positive GSI correlates with various aspects of healthy sexual functioning. Men who are satisfied with their genital appearance often experience fewer difficulties in sexual performance and report higher levels of sexual desire and pleasure (Ålgars et al., 2011;

Gulseth et al., 2021; Reinholtz & Muehlenhard, 1995; Stephenson, 2014). Additionally, men with positive attitudes towards their circumcision status experience higher sexual functioning (Bossio et al., 2018). Other studies have shown that penis size satisfaction relates to better sexual functioning, including reduced premature ejaculation, higher levels of delayed ejaculation, and improved erectile function (Ålgars et al., 2011; Gulseth et al., 2021; Stephenson, 2018). Conversely, negative GSI is associated with increased sexual anxiety and a higher likelihood of experiencing sexual functioning difficulties such as erectile dysfunction and difficulty attaining and maintaining erections (Davis et al., 2013; Komarnicky et al., 2019; Tiggemann et al., 2008; Wilcox et al., 2015). Negative GSI can trigger erectile function difficulties through heightened sexual anxiety (Wilcox et al., 2015), highlighting the psychological dimension of sexual functioning (Pascoal et al., 2018).

Studies indicate a bidirectional relationship between GSI and sexual functioning. Positive GSI can contribute to enhanced sexual function, while concurrently, better sexual function can positively influence men's perceptions of their GSI (Alavi-Arjas et al. (2023). These findings collectively suggest that positive GSI can enhance sexual well-being by reducing the experience of sexual functioning difficulties.

Men's GSI and Sexual Satisfaction

Sexual satisfaction is considered a sexual right and an outcome of sexual well-being and global health (Byers & Rehman, 2014; WHO, 2010). Studies on men's GSI and sexual satisfaction reveal that men with positive GSI experience higher levels of both physical and emotional sexual satisfaction, and negative GSI has been identified as a potential risk factor for diminished sexual satisfaction (Fischer & Træen, 2022; Goldberg

et al., 2023; Saffari et al., 2016; van den Brink et al., 2018). While Komarnicky et al. (2019) found that GSI does not predict men's sexual satisfaction, van den Brink et al.'s (2018) correlation analyses demonstrate a significant relationship between negative genital attitudes, self-consciousness during sexual activity, and sexual dissatisfaction. Their analysis revealed that negative genital attitudes exert indirect effects on sexual dissatisfaction through increased body self-consciousness during sexual activity. Additionally, negative genital attitudes have a direct effect on sexual dissatisfaction, suggesting a multifaceted connection between negative attitudes and overall sexual satisfaction (van den Brink et al., 2018). Deeper investigations into this relationship suggest that men with negative GSI report lower self-perceived sexual attractiveness, encounter more problems in their sex lives, and experience more negative emotions when contemplating sex (Saffari et al., 2016). Together, these studies offer empirical evidence showing a relationship between GSI and sexual satisfaction, such that positive GSI fosters higher levels of physical and emotional satisfaction.

Inclusivity in GSI Research

While not a research objective of the current study, it is important to acknowledge the diverse experiences shaped by identities such as sexual orientation, gender identity, and race in the context of GSI research. Including the perspectives of men with diverse backgrounds is important for broadening viewpoints and deepening understanding.

Men's GSI and Sexual Orientation

Research on men's GSI across sexual orientations has produced mixed findings. Drummond and Filiault (2007) suggested that penis size and overall genital satisfaction might hold increased significance for gay men because of the "double presence" (p. 122)

of the penis in gay relationships. Gay men may have increased opportunities for genital comparison due to greater exposure to other men's genitals. While some studies suggest differences in genital concerns among heterosexual, gay, and bisexual men (Herbenick et al., 2013; Smith et al., 2017), others find no significant distinctions (Loehle et al., 2017). Despite discrepancies, men, regardless of sexual orientation, share common genital concerns, including those related to penis size and shape (Davis et al., 2013; Lever et al., 2006; Martins et al., 2008; Tiggemann et al., 2008). Existing research on the impact of GSI on sexual well-being has either included men with diverse sexual orientations without analyzing potential variations (e.g., Reinholtz & Muehlenhard, 1995; Wilcox et al., 2015), or excluded sexual minority men altogether (e.g., de Silva et al., 2023; Hustad et al., 2022; Lever et al., 2006). However, one study found that heterosexual, bi, and gay men with positive GSI were more likely to experience lower sexual performance anxiety and higher sexual functioning regardless of sexual orientation (Amos & McCabe, 2016). While some of these studies may have been conducted during periods when discourse on inclusivity was not as prevalent, the continued exclusion of sexual minority men in recent research indicates an ongoing gap in understanding their experiences. Acknowledging the experiences of men of diverse sexual orientations can provide a more comprehensive understanding of the relationship between GSI and sexual well-being.

Men's GSI and Gender Identity

Although the experiences of men across diverse gender identities have been underexplored in GSI research, some studies have highlighted the impact of gender identity on GSI. Traditionally, societal norms have tied gender to genital configuration, resulting in a limited understanding of diverse identities and experiences (Edelman &

Zimman, 2014). Particularly noteworthy are trans men who, whether they have not undergone or choose not to undergo gender-affirming surgery, may hold thoughts and feelings regarding their vulva and vagina (Fudge & Byers, 2017). Studies have shown that body dissatisfaction is higher among trans men than cis men, particularly related to genital characteristics (Becker et al., 2016). The limited research on GSI and sexual well-being across gender identities suggest that trans men are more likely than cis men to express genital discomfort, prefer to have sex in the dark, and dislike discussing their genitals and other body parts (Bauer et al., 2013; Iantaffi & Bockting, 2011).

Men's GSI and Race and Ethnicity

Additionally, GSI has often overlooked the experiences of men from diverse racial and ethnic backgrounds, thus maintaining a limited understanding of the phenomenon. Research frequently excludes racial minority men or fails to collect demographic data on race and ethnicity (e.g., Davis et al., 2013; Hustad et al., 2022; Loehle et al., 2017; Morrison et al., 2005). However, research by Gaither et al. (2017) and Grov et al. (2014) found no differences in penis size satisfaction across race or ethnicity. Further, Herbenick et al. (2013) found that Black men have the highest GSI scores compared to men from other races. Prioritizing inclusivity in GSI research acknowledges the need to amplify the voices of individuals from all backgrounds to enrich our understanding of GSI and its implications for sexual well-being.

Critique of the Literature

This literature review revealed several gaps in the existing research. First, there is a lack of focus on GSI among men, with much of the literature centered around women (e.g., Benabe et al., 2022; Fudge & Byers, 2017; Herbenick et al., 2011). This leaves a

gap in our understanding of how men perceive and experience their own genitals. Second, the prevalence of quantitative methodologies and standardized measures of GSI and sexual well-being (e.g., Gaither et al., 2017; Herbenick et al., 2013; Saffari et al., 2016) limits our understanding of men's subjective perspectives and lived experiences. The qualitative approach chosen for this study allowed for a more nuanced exploration of participants' experiences, capturing intricacies that quantitative studies might overlook. Third, the dated nature of many existing studies (e.g., Morrison et al., 2005; Reinholtz & Muehlenhard, 1995; Winter, 1989) highlights the need for more contemporary research in this field considering evolving gender norms, changing societal attitudes, and increasing recognition of diverse gender identities and sexual orientations. Fourth, the overwhelming focus on penis size as the primary or sole determinant of men's GSI (e.g., Martin et al., 2008) neglects other potentially significant aspects of this phenomenon. This study aimed to comprehensively explore various aspects of men's GSI, including their thoughts, feelings, and experiences beyond size concerns. This study sought to include participants representing a range of sexual orientations and gender identities to provide a more inclusive and representative exploration of men's GSI and its implications for sexual well-being. Lastly, there is a notable scarcity of research focusing on university-age men, which is a critical developmental stage marked by self-perception and sexual identity development. This study included a sample of university-age men to understand how GSI and sexual well-being intersect during this formative period.

Summary

In this chapter, I synthesized the existing research relevant to men's GSI and its connection with sexual well-being and provided a rationale for this study. The following

chapter outlines the theoretical framework and research methodology, participant recruitment strategies, procedures for data collection and analysis, and concludes by summarizing the steps that I took to ensure the study's rigor.

Chapter 3: Methodology and Methods

This study embarked on an exploration of university men's experiences with GSI and its implications for sexual well-being. Guided by the theoretical framework of hegemonic masculinity (Connell, 1995), this research sought to capture the ways in which hegemonic ideals about masculinity influenced men's experiences. To maintain methodological congruence, interpretative phenomenological analysis (IPA) was employed both as the methodology and the data analysis method. Specifically, the study adopted Smith et al.'s (2009) IPA approach, aiming to uncover the meanings men attributed to their experiences while recognizing the dual interpretative process that involved both the participants and the researcher.

In this chapter, I present my theoretical framework and methodological approach that guided my study, followed by a description of participant selection and recruitment strategies, as well as data collection and data analysis procedures. I then discuss my positionality in the research and interest in the topic, followed by an overview of the measures taken to ensure the study's trustworthiness and rigor.

Theoretical Framework

This section establishes hegemonic masculinity as the theoretical framework adopted in this study, which served as a guiding lens to examine the influence of hegemonic masculine norms on men's experiences of GSI and sexual well-being.

Conceptualizing Masculinities

Drawing from a social constructivist framework, rather than being innate or biological, gender is understood to be constructed through cultural, contextual, and social factors (West & Zimmerman, 1987). This perspective underscores the fluidity and

diversity of gender expressions and emphasizes the role of societal norms in shaping masculine ideals.

Within this framework, masculinities are viewed as socially constructed phenomena that fluctuate based on societal norms, context, and social interactions (Lindegger & Maxwell, 2007). Men's identities, actions, and expectations placed upon them are influenced by socially constructed notions of masculinity and femininity (Pleck et al., 1994). However, research has begun to recognize that the traditional binary framework, juxtaposing masculinity and femininity, may not fully capture the complexity of gender (Hyde et al., 2019). Connell (1994) suggested that there is no universal pattern of masculinity applicable to all social and historical contexts and instead advocates for the exploration of multiple masculinities. Instead of seeking a one-size-fits-all definition of masculinity, this study acknowledged the existence of multiple masculinities and men's varying relationships with their masculine identity (Connell 1995).

Hegemonic Masculinity

Hegemonic masculinity offers a framework for understanding the dominant societal norms and expectations surrounding masculinity. Connell's (1987) seminal work reveals a hierarchy of masculinities, with hegemonic masculinity representing the idealized form. Rooted in the social dominance of men over women and non-hegemonic men, such as sexual minority men, hegemonic masculinity elucidates the dominant cultural ideals and practices that shape men's identities and behaviours within a given social context. At its core, it represents the culturally endorsed model of masculinity that prescribes certain attributes, behaviours, and roles as central to the idealized masculine identity (Grave et al., 2020). Conforming to hegemonic masculinity often necessitates

adopting specific roles while distancing oneself from behaviours deemed unmanly or feminine (Bosson et al., 2005).

In Western culture, like here in Canada, hegemonic masculinity integrates various conceptions, including being white and heterosexual and possessing stereotypical masculine traits like assertiveness, dominance, emotional restraint, and sexual prowess (Connell, 1995). This framework also encompasses historical and cultural ideals like physicality, heteronormativity, homophobia, and misogyny (Kimmel & Mahler, 2003). In the realm of sexuality, hegemonic ideals include having a large penis, strong and constant sexual desire, and optimal sexual performance (Connell & Messerschmidt, 2005; Kimmel, 2005).

Research has established an association between men's conformity to hegemonic masculine norms and their sexual well-being (Barker & Ricardo, 2005; Macia et al., 2011; Robertson, 2007), with sexual experiences closely connected to hegemonic ideals governing what behaviours men are "allowed" to engage in (Kimmel, 2005; Potts, 2000; Schrock & Schwalbe, 2009). Men adhering to hegemonic masculine norms are more likely to associate masculinity with sexual performance (Thompson & Barnes, 2013), suggesting that adhering to traditional ideals may impact sexual experiences and contribute to sexual functioning challenges (Sanders et al., 2006).

However, Connell (1993) recognizes that only a small proportion of men can fully embody hegemonic masculinity, which can result in feelings of inadequacy for those who perceive themselves as unable to meet these standards. For example, hegemonic masculinity emphasizes the importance of having a large penis as a symbol of virility (Connell & Messerschmidt, 2005). This emphasis can exert pressure on men to conform

to a specific physical standard to validate their masculine identity (Tiefer, 2004), potentially resulting in feelings of non-masculinity or inadequacy for those who do not meet this ideal (Connell, 1987).

Application to the Current Study

This study, grounded in Connell's hegemonic masculinity framework, aimed to explore the influence of hegemonic norms on men's perceptions and experiences of GSI and sexual well-being. Specifically, the analysis focused on how participants navigate their GSI and sexual well-being by either adhering to or resisting hegemonic masculine ideals. Conformity will be explored as adherence to traditional masculine standards concerning GSI and sexual behaviour, while resistance will involve challenging or rejecting these norms in favour of alternative expressions of masculinity. Through the lens of hegemonic masculinity, this study sought to shed light on the impact of hegemonic norms on GSI and sexual well-being and the ways men navigate their masculinity within the context of these norms.

Interpretative Phenomenological Analysis

I adopted a qualitative research approach to explore men's lived experiences of GSI and its implications for sexual well-being. Interpretative phenomenological analysis (IPA) was employed to uncover participants' unique sense-making processes regarding the phenomenon under study (GSI; Smith & Osborn, 2008). This approach is rooted in three theoretical underpinnings: phenomenology, hermeneutics, and idiography.

Phenomenology

Phenomenology, rooted in philosophical works of thinkers like Husserl and Heidegger, delves into human experiences and the personal meanings individuals

attribute to them (Teherani et al., 2015). Phenomenology enables the researcher to uncover the essence of the phenomenon, which, in this context, can be defined as a lived-through experience (van Manen et al., 2016), by directly engaging with the lived perspectives of individuals who have experienced it. In this study, phenomenology allowed me to capture and engage with participants' lived experiences of GSI and sexual well-being (van Manen et al., 2016). Following the insights of Creswell and Poth (2016), my aim was to unveil the "universal essence" (p.58) of experiences of GSI and its implications for sexual well-being as perceived by the group of individuals participating in this study.

Hermeneutics

In IPA, hermeneutics serves as a framework for understanding participants' experiences and interpreting the meanings they attribute to a phenomenon (Langdridge, 2007). Hermeneutics involves delving into participants' narratives to uncover deeper layers of understanding beyond surface-level accounts (Lopez & Willis, 2004). In this study, hermeneutics was employed to explore the interconnectedness between participants' lived experiences and the researcher's understanding (Budd, 2005). A double hermeneutic approach was employed, highlighting the interpretative process of sense-making between the participants and the researcher (Smith et al., 2009). This involved two steps: first, participants shared their understanding through interviews, providing rich narratives of their experiences. Second, as the researcher, I engaged in interpreting these narratives to grasp the participants' meaning-making process (Smith et al., 2009). This approach facilitated a deeper understanding of how participants construct meanings from their experiences of GSI and its implications for sexual well-being.

Idiography

IPA is idiographic, meaning that the focus is on individuals rather than large groups of people (Biggerstaff & Thompson, 2008). Idiography is concerned with the experiences of particular people and the contexts in which those experiences occur (Pietkiewicz & Smith, 2012). It suggests that everyone is unique and therefore everyone should be studied individually. The goal of idiographic research is not to achieve broad generalizability but rather to gain insights into the experiences, meanings, and perspectives of individuals within specific contexts. The contextual understanding gained from idiographic research can be transferred to inform context-specific interventions, practices, or policies. Following insights from Smith et al. (2009), who highlighted the distinct and valuable perspectives individuals can offer in their engagement with a phenomenon, this research prioritized the analysis of each participant's account. The idiographic process began with an examination of each case separately to identify themes (Pietkiewicz & Smith, 2012). Once the analysis of all cases was complete, I engaged in a cross-case analysis to search for themes across participants (Smith, 2009).

Participant Selection

In adopting IPA, the emphasis was placed on exploring participants' lived experiences to unveil their deep-seated meanings (Smith et al., 2009). This study prioritized the depth of the data over breadth, aligning with the tradition of IPA research (Armour et al., 2009). Participants were recruited and interviewed based on specific criteria to ensure relevance to the research topic: 1) self-identified as men (i.e., cisgender, transgender, non-binary, gender diverse, Two-Spirit, queer), 2) were at least 18 years old,

3) were currently enrolled as students at Dalhousie University, and 4) demonstrated proficiency in the English language.

Regarding sample size, IPA does not inherently rely on data saturation as a defining criterion (Smith et al., 2009). Instead, the focus is on thoroughly exploring the experiences and meanings attributed by participants to the phenomenon. The goal was to uncover detailed, contextually rich insights from the selected participants, prioritizing a nuanced understanding of the role of GSI in their sexual well-being. In line with IPA recommendations (Pietkiewicz & Smith, 2012), this study aimed for a sample size of six to eight participants. Consensus between myself and my thesis supervisors, as well as repetition and stability of themes, were used to determine when saturation was reached. This ensured that the depth and richness of understanding were sufficient for the research objectives.

Ethics Approval

An ethics application was prepared and submitted to Dalhousie University's Research Ethics Board in December 2022, with guidance from my two thesis supervisors, Dr. Christopher Dietzel and Dr. Matthew Numer. Ethical approval was received in February 2023.

Participant Recruitment

Recruitment began in March 2023. Flyer distribution and snowball sampling were the primary recruitment strategies employed. Flyers were strategically placed throughout the university campus in high-traffic areas. Snowball sampling leveraged participants' networks for additional recruitment. The recruitment process involved an eligibility screening via email, which assessed gender identity, Dalhousie student status, English

fluency, and ensuring potential participants were comfortable discussing sexually sensitive topics. Flyers were placed near 2SLGBTQ+ student organizations' spaces and community centers in the Student Union Building to attract men from diverse sexual and gender identities. After deliberation and consultation with my thesis supervisors, it was decided that a sample size of five participants would be appropriate for this study. This decision balanced the need for sufficient data with the desire to conduct an in-depth analysis of each individual case, a key principle of IPA (Pietkiewicz & Smith, 2012).

Informed Consent and Data Collection

Eligible participants received an email containing project background information and inclusion criteria to confirm eligibility. Following Creswell's (2013) guidelines, a consent form was provided via email that outlined the study's purpose, data collection procedures, participant rights, confidentiality measures, and potential risks/benefits of participation (see Appendix A). Once participants agreed to participate, interviews were scheduled. Interviews were conducted in person to facilitate a comfortable and open environment and enrich the content (Krouwel et al., 2019). All interviews took place on the Dalhousie University campus in the office of my thesis supervisor, Dr. Matthew Numer, which provided a private and convenient setting.

Prior to the questionnaire and interview, I reviewed the consent form with participants to ensure comprehension and emphasized voluntary participation and the option to withdraw at any time. Verbal consent was recorded before the questionnaire and interview commenced, and ongoing consent was ensured throughout by paying attention to both verbal and nonverbal cues. The oral consent form is included in Appendix B.

Questionnaire

Participants completed a questionnaire designed to capture a comprehensive profile of the sample, which included inquiries about age, race, gender, relationship status, and brief sexual health information. The questionnaire served as a supplementary tool in my analysis by facilitating the collection of standardized participant data to gain an understanding of the participants' characteristics. This information helped to contextualize the qualitative data collected during interviews, aiding in the identification of patterns or trends within the sample. The questionnaire also acted as a safeguard to ensure comprehensive coverage of relevant topics. While interviews were the primary method of data collection, the questionnaire ensured that I captured information that might have been missed or not fully explored during the interviews. Essentially, the questionnaire complemented the qualitative interviews by providing contextual information, ensuring comprehensive coverage of relevant topics, and facilitating a characterization of the participants. The questionnaire is included in Appendix C.

Semi-Structured Interviews

Consistent with IPA, one-on-one semi-structured interviews were the primary data source. The interview questions were designed in a way that would foster open dialogue and encourage participants to reflect on their experiences. Specifically, the questions explored sensory perceptions, mental phenomena, and individual interpretations (Pietkiewicz & Smith, 2012). Participants were questioned about their thoughts and feelings regarding their GSI and specific genital aspects and their experiences of sexual activity, sexual functioning, and sexual satisfaction. Considering the theoretical framework of hegemonic masculinity, participants were questioned about

their masculine identity, what factors influenced their perceptions of masculinity, and how these perceptions impacted their experiences of GSI and sexual well-being.

I guided the interviews by directing questions to explore new areas and posed follow-up questions to seek elaboration or clarification (Pietkiewicz & Smith, 2012). Importantly, participants were under no obligation to respond to any questions, thus ensuring a respectful and voluntary participation process. To enhance the depth of participants' responses, prompts were used sparingly, particularly when participants struggled to articulate their thoughts or required clarification on a question. The interview guide is included in Appendix D.

Transcription

After conducting the interviews, I transcribed them to ensure the accurate preservation of interview content to allow for analysis. To protect participants' privacy, all identifiable information was redacted from both the questionnaires and interview transcripts. Each participant was assigned a pseudonym to maintain anonymity, and all questionnaires and transcripts were coded in accordance with the assigned pseudonyms.

Data Storage

Audio recordings and transcripts were stored securely on my password-protected computer. Only myself and my thesis supervisor, Dr. Christopher Dietzel, had access to original transcripts. Audio recordings were deleted once transcriptions were complete. Transcripts will be permanently deleted following the completion of this project.

Data Analysis

Data analysis was conducted using NVivo, a qualitative data analysis software that enabled systematic coding, provided a structured framework for managing the

interview transcripts, and facilitated the organization and analysis of themes. Following the IPA framework outlined by Smith et al. (2009), the analysis began by immersing and familiarizing myself in the data, focusing on one transcript at a time to ensure an idiographic approach. Each participant's transcript was reviewed multiple times to gain a thorough understanding of their narrative. I also opted to listen to the audio recordings of the interviews to capture nuances in tone or emotion not apparent in the text alone, enhancing the depth of immersion in and understanding of the data.

Following familiarization with the interviews, coding of the data commenced using NVivo. This aided in categorizing significant statements, phrases, or text sections that encapsulated key aspects of participants' experiences. Annotations, comments, and preliminary interpretations were made in the margins to enhance data interpretation and comprehension.

Based on the initial coding, I organized the data into descriptive themes. NVivo provided a platform for structuring and visualizing themes, ensuring that essential qualities of participants' experiences were captured and represented cohesively. Themes were refined iteratively, and debrief sessions were conducted with my thesis supervisors to validate and refine the themes and ensure they were interpreted in a meaningful way.

Connections and similarities among themes were explored using NVivo's organizational features, which facilitated the identification of both themes and sub-themes. This process allowed for a hierarchical representation of the data, with themes organized based on their conceptual relationships and significance to the research questions.

Subsequently, the analysis transitioned to the next participant's transcript while maintaining an open-minded stance and preserving the uniqueness of each participant's experiences. This approach ensured that each participant's narrative was analyzed comprehensively before moving on to the next case.

Upon completing the analysis of all transcripts, the interpretative process commenced. Overarching patterns and connections across participants' narratives were synthesized, resulting in a final thematic table. This table, comprising of themes and sub-themes, guided the interpretative understanding of participants' experiences.

Positionality in the Research

Acknowledging my positionality as the researcher is crucial in qualitative research, as it influences various aspects of the process (Rowe, 2014). As a white, cisgender, bisexual woman pursuing higher education, I recognize that my social identities inherently carry both advantages and limitations that require consideration.

As a woman researcher, I remained aware of the potential biases or preconceived notions I might have held regarding masculinity, men's bodies, and men's sexuality that could have inadvertently influenced the research process. I took actions during data collection and analysis to mitigate this, ensuring I remained vigilant in framing questions and actively listening to participants' perspectives without imposing my assumptions. Being a woman researcher may have also presented challenges in establishing rapport with men participants, especially if they felt uncomfortable sharing sensitive experiences with a woman. However, these challenges were approached with sensitivity and respect for participants' boundaries to create a safe and inclusive environment for open dialogue.

Despite these challenges, my positionality as a woman also brought unique insights and perspectives to the research process. Drawing upon my own experiences related to sexuality and identity enriched my understanding of the diverse perspectives that were identified during the research process. By positioning myself within the research and acknowledging how my experiences may have impacted the data, insights gained from reflexivity were used to strengthen the analysis and ensure validity (Joseph et al., 2021). Reflexivity, involving the ongoing critical examination and awareness of my own background, assumptions, biases, and perspectives throughout the research process (Joseph et al., 2021), was integral to this study. These reflections contributed to a deeper understanding of the participants' experiences, as evidenced by the interpretation of findings grounded in participants' perspectives (Creswell & Poth, 2016).

Researcher's Interest in the Topic

My academic and research pursuits in the field of health promotion and sexual health have been driven by academic curiosity and personal passion. From earning a Bachelor of Arts in Psychology at the University of New Brunswick to pursuing a Master of Arts in Health Promotion at Dalhousie University, my educational journey has been shaped by a desire to make a meaningful impact in individuals' health and well-being.

During my undergraduate studies, I actively engaged in health research and initiatives, which showed me the potential of research in driving positive change. During my undergraduate honours thesis, under the mentorship of Dr. Sandra Byers, my interest in exploring men's GSI was ignited. Dr. Byers was supervising a PhD student conducting research on female GSI (FGSI), which prompted me to conduct a search on male GSI (MGSI). I was surprised by the contrast in the literature: while there was a wealth of

research examining FGSI, the research on MGSI was noticeably sparse, often limited to discussions centered on penis size. This realization sparked a sense of injustice within me and fueled a desire to address the gaps in research. Under Dr. Byers' guidance, I undertook an honours thesis project that explored adult MGSI and its predictors. Employing a quantitative approach, my thesis uncovered various MGSI predictors, including age, exposure to school sexual education, and perceptions of women's genitals.

Building upon this foundation, I was motivated to continue my research in graduate school. Motivated by a desire to delve beyond quantitative assessments, I embarked on a qualitative exploration of men's lived experiences of GSI. My aim was to uncover the complexities of their perceptions and attitudes towards their genitals, with the goal of facilitating a positive shift in their GSI and enhancing their sexual well-being.

My determination to advocate for greater attention to be paid to men's experiences with their GSI served as the guiding force throughout my graduate thesis. By embracing a qualitative approach, I aimed to provide a deeper understanding of the multifaceted nature of men's GSI, thereby paving the way for more targeted and inclusive interventions aimed at promoting positive GSI and sexual well-being.

Quality Principles

In this study, authenticity and transferability were prioritized to ensure quality and rigor in the qualitative research methodology. Authenticity was emphasized to accurately reflect the richness of participants' experiences without oversimplification or distortion (Beck, 2019). To achieve this, multiple strategies were implemented. Participant engagement was prioritized to foster authentic interactions, including obtaining fully informed consent, building rapport, and employing active listening skills to establish trust

and openness with participants (Lincoln & Guba, 1985; Pietkiewicz & Smith, 2012). This emphasis facilitated open and honest communication, contributing to the authenticity of the data collected. Reflexivity was maintained throughout the analytical process to critically examine biases and perspectives, further enhancing the authenticity of the findings (Braun & Clarke, 2021; Smith & Osborn, 2003). The iterative nature of IPA ensured that identified themes were grounded in the data and authentically represented participants' perspectives (Braun & Clarke, 2021). Verbatim quotes were used to further enhance authenticity by allowing readers to directly engage with the participants' voices, providing concrete examples of their experiences. Finally, the peer debriefing process with my thesis supervisors ensured rigor and reliability in the analysis process by providing critical feedback and validation of interpretations, ultimately enriching the authenticity of research findings (Lincoln & Guba, 1985; Smith et al., 2009). Engaging with my supervisors also encouraged reflexivity and prompted reconsideration of biases, further contributing to the authenticity of the interpretations (Smith et al., 2009).

Transferability ensured that insights could be applied across similar contexts while respecting the uniqueness of participant experiences. Drawing inspiration from the successful application of transferability in qualitative studies on GSI, such as Malarý et al.'s (2023) research on women's GSI experiences, this study integrated transferability as a methodological consideration. This study provided detailed descriptions of the research process, encompassing various aspects such as the university institution, recruitment methods, inclusion criteria, participant characteristics, research setting, and data collection methods. By providing comprehensive descriptions, this study aimed to enable readers to assess the relevance and applicability of the findings to similar contexts

(Lincoln & Guba, 1985). The impact of contextual factors such as the COVID-19 pandemic, the unique demographic of university men, and shifting gender norms were also considered to enhance transferability (Lincoln & Guba, 1985). Additionally, the inclusion of direct quotes from participants facilitated a deeper understanding of their perspectives and further enhanced the transferability of the findings.

Overall, by prioritizing authenticity and transferability and implementing appropriate strategies to ensure these principles were upheld throughout the research process, this study aimed to establish reliability and trustworthiness in its methodologies, data, and analysis.

Chapter 4: Results

In this study, I conducted an exploration of the experiences of five men from Dalhousie University, centering on their GSI and its implications for three aspects of their sexual well-being: sexual activity, sexual functioning, and sexual satisfaction. This chapter begins with an overview of the characteristics of the participants, followed by an unfolding of participants' narratives organized into six themes.

Participant Characteristics

Five participants, all Dalhousie University students and identifying as men, participated in the study. Among them, two identified their sexual orientation as heterosexual, two as bisexual, and one as gay. Four of the participants identified as cisgender, while one identified as a queer man. Participants were between 21 and 23 years old. All participants identified as white, with one specifying their identity as white/Acadian. To maintain confidentiality and privacy, pseudonyms are employed to refer to the participants. A breakdown of participant information can be found in Table 1.

Table 1

Participant Characteristics

Pseudonym	Age	Gender	Sexual orientation	Circumcision status	Sexually active*	Relationship status
David	21	Cis man	Heterosexual	Circumcised	No	Single
Dakota	21	Cis man	Bisexual	Circumcised	Yes	Dating, not exclusively
Lucas	21	Queer man	Gay	Uncircumcised	Yes	Single
Oliver	22	Cis man	Heterosexual	Circumcised	Yes	Single
Cade	23	Cis man	Bisexual	Uncircumcised	Yes	Dating one partner

**Participants who reported engaging in any form of sexual activity, including but not limited to intercourse, oral sex, masturbation, or intimate kissing over the past 12 months.*

Themes

Six themes were identified using IPA. “Genital Perceptions” explores participants' thoughts and feelings regarding their GSI, encompassing perceptions of both genital appearance and functionality. “Shaping GSI” examines the factors contributing to GSI development, including penis prioritization, societal expectations, and partner perceptions. “Responding to Genital Concerns” explores participants' strategies and responses to negative GSI and genital concerns. “GSI Impacting Sexual Activity” explores the impact of GSI on participants' sexual activity. “GSI Impacting Sexual Functioning” explores the adverse impact of GSI on sexual functioning. “GSI Impacting Sexual Satisfaction” explores the positive and negative impacts of GSI on sexual satisfaction. It is important to note that one participant, David, did not have relevant experiences for themes 4-6 due to the themes' focus on experiences with sexual activities. The themes and their respective sub-themes are presented in Table 2.

Table 2

Findings by Themes and Sub-Themes

Themes	Sub-themes
1. Genital Perceptions	1a. Appearance Perceptions 1b. Functionality Perceptions
2. Shaping GSI	2a. Penis Priority 2b. Societal Expectations and Pornography 2c. Partner Perceptions
3. Responding to Genital Concerns	3a. Improvement Efforts 3b. Rationalization
4. GSI Impacting Sexual Activity	4a. Emotional Barriers to Engagement 4b. Transformative Power of GSI
5. GSI Impacting Sexual Functioning	
6. GSI Impacting Sexual Satisfaction	6a. Negative Perceptions and Dissatisfaction 6b. Genital Acceptance as Catalyst

Theme 1: Genital Perceptions

The theme “Genital Perceptions” explores participants’ thoughts and lived experiences regarding their genitals and how these perceptions contribute to their GSI. This theme synthesizes participants’ perceptions on both the appearance and functionality of their genitals as components of their GSI.

Appearance Perceptions

Participants expressed diverse perceptions of genital appearance, with factors such as penis size, circumcision status, and grooming practices playing key roles in their GSI. Genital appearance perceptions were diverse, ranging from “self-consciousness” (Oliver, 22, cis, heterosexual) to “prideful” (Lucas, 21, queer, gay).

All participants discussed their perceptions of penis size. Concerns about penis size were pervasive, irrespective of whether participants perceived their penis as too big, too small, or average. For instance, Oliver, occasionally wished for a larger penis despite considering his size “average.” He expressed, “It's a good enough size... It'd be fun to say I have a bigger dick... If you threw another inch on there, I wouldn't be mad.” In contrast, Cade (23, cis, bisexual), with a larger penis, expressed discomfort and occasionally wished for a smaller one. He shared:

I'm reasonably well endowed to the point that it does frequently cause me problems... either in discussions about my sexual activity with other men, which I don't have as a consequence, and is part of the reason that I find myself shifting sexual partners quite a lot when I'm single. I do occasionally wish I had smaller junk.

These diverse experiences, ranging from Oliver's occasional wish for a larger penis to Cade's discomfort and occasional desire for a smaller one, reveal the varied perspectives on penis size perceptions for GSI.

Participants' perceptions on their circumcision status emerged as another aspect of GSI, regardless of whether participants were circumcised or not. David (21, cis, heterosexual) and Oliver, both circumcised at birth, expressed dissatisfaction with their circumcision. David shared his desire to be uncircumcised because he did not have the opportunity to make that choice himself: "I... probably would have not chosen that if I got to choose... I just like to have all my body parts... tonsils, appendix, foreskin." Similarly, Oliver voiced his discontent, stating, "Apparently it removes a lot of nerve endings, and I've been curious what that feels like." David and Oliver's discontent and curiosity highlight the relationship between circumcision perceptions and GSI. Conversely, Lucas, who is uncircumcised, expressed dissatisfaction with the appearance and function of his foreskin. Describing it as "a little fucked up" and asserting that it "does not open at all... in the anticipated sense where it kinda rolls back over the glands of the penis," Lucas conveyed that his foreskin was his "main concern" due to its deviation from societal norms. He shared that his foreskin "doesn't look like any other guy's" and expressed concern because of the incongruence between "how genitals are supposed to be perceived" and how his are "just a bit different from that." Lucas's dissatisfaction with his foreskin and its incongruence with societal norms led to negative feelings about his genital appearance. These varied experiences illustrate the complexity of perceptions surrounding circumcision status and its influence on GSI.

Nonetheless, the diversity of GSI experiences was apparent. Some participants maintained an indifferent or even positive outlook on their genital appearance. Cade, for example, demonstrated a lack of preoccupation with aesthetics: “I don't really think much about how they look, it's a dick, it doesn't look fantastic. Um, yeah... it's a dick.” Similarly, David shared his nonchalant perspective: “I feel fine about [my genitals]. I don't really think about them a whole lot.” Other participants expressed positive feelings about their genital appearance, using descriptors like “confident” (Dakota, 21, cis, bisexual), “prideful” (Lucas), and “appreciated” (Cade), revealing the spectrum of genital appearance perceptions.

The significance of grooming practices also emerged as an aspect of genital appearance perceptions. Grooming practices were a way for participants to feel confident with their genital appearance, as Lucas shared, “It’s a ritual that I’ll save for myself. It's not really for anyone else. It's so I can like the way that I look.” Oliver also expressed his preference for keeping his genital area well-groomed, explaining, “Whenever you don't feel like you're groomed and clean you just feel... less like yourself.” These preferences reveal the importance of grooming practices for GSI by allowing participants to feel good about their genital appearance.

In summary, this sub-theme reveals the diverse ways in which participants perceive their genital appearance, influenced by perceptions of penis size, circumcision status, and grooming practices. While some participants express concerns or dissatisfaction, others demonstrate indifference or even pride in their genital appearance, reflecting the multifaceted nature of GSI.

Functionality Perceptions

Perceptions related to genital functionality, specifically their ability to achieve and maintain erections, were influential for GSI. Oliver considered his penis an essential “tool” for sexual activity but expressed a “love-hate relationship” with it, particularly when it did not perform as desired. He shared, “Yeah [I] just couldn't get an erection, if [I'm] too drunk or when I would get anxiety... you know it's you but it's hard to not think about your genitals in that way. It's like come on.” Oliver’s struggles in achieving erections sometimes led to mixed feelings about the functionality of his genitals, instilling anxiety that impacted his GSI. Lucas echoed these concerns, even suggesting that “those concerns about maintaining an erection are probably at times almost bigger than concerns about genital [appearance].” Their experiences highlight the impact of genital functionality perceptions for GSI. In contrast, Dakota’s perceptions of his genital functionality were more positive. He reflected on experiences where he was able to maintain satisfactory genital functionality during solo sexual activities like masturbation, noting, “Everything works as much as I’d like it to. I can’t really think of anything not proper.”

In summary, the theme “Genital Perceptions” reveals that appearance and functionality perceptions collectively influence how participants perceive their GSI.

Theme 2: Shaping GSI

The theme “Shaping GSI” delves into the ongoing evolution of participants’ GSI, where their personal experiences and external influences continuously mold and redefine it. The exploration reveals how GSI is shaped by three factors: the prioritization of the penis, societal expectations, including the portrayal of genitals in pornography, and partner perceptions.

Penis Priority

Participants frequently mentioned their penis during discussions, employing singular pronouns like “it” to refer to their genitals. Participants shared statements such as “I feel fine about it” (David), “I don’t really think about it too much” (Dakota), and “I’ve got what I got and I’m happy with it” (Oliver). Lucas highlighted the perceived centrality of the penis in GSI, stating, “When... feeling and thinking about your genitals, you’re just thinking about your penis. Your testes and your pubic hair are just kind of there to support, they’re the support acts.” Lucas felt that his penis occupies a central role in GSI, while other genital aspects assume more peripheral roles. Even when David was asked about which aspects of his genitals he thought about most, his response reinforced this trend: “Probably more of the penis... But other than that, I really don’t spend a lot of time pondering the matter.” These perspectives highlight the role of their penis in shaping GSI.

Societal Expectations and Pornography

All five participants discussed the impact of societal expectations, including the portrayal of genitals in pornography, on their GSI. David and Oliver expressed dissatisfaction with their penis size during adolescence, attributing these concerns to societal norms promoting the belief that “bigger is better” (Oliver, David). David noted that these expectations were pervasive, leading to anxieties about size: “Every guy goes through it just due to like our culture and stuff here... they want ‘bigger is better’ and all that.”

While some experiences were marked by dissatisfaction, Lucas and Cade showed that societal expectations about penis size can generate positive feelings. Cade expressed,

“I’m not particularly dissatisfied with [my penis] I guess due to the male propensity to view larger genitals as being good or like empowering.” Similarly, Lucas shared, “I’d say kinda that almost like equilibrium that plays out in my mind. Yeah my penis is different, but it’s also a kind of penis that’s socially maybe accepted, favoured. Just because it’s a bit larger.” Their experiences reveal the far-reaching effects of societal expectations on GSI. Cade’s experience showed how societal expectations can shape GSI beyond size concerns. He stated, “I definitely grappled with my circumcision status while I was a virgin ‘cause I thought that it would prevent me from losing my virginity.” Cade’s concern with being uncircumcised was influenced by societal norms and his misconceptions about foreskin.

Furthermore, the influence of societal expectations, manifested through pornography, on participants’ GSI was apparent. Dakota and Oliver discussed how pornography once negatively influenced their perceptions of their genitals, as Dakota explained, “Porn used to make me feel kinda negative... not so much about size but more so about cleanliness, like mild aesthetic things that I would compare myself to.” Comparing himself to the performers he saw in pornography occasionally resulted in unfavourable self-evaluations and negative feelings. Similarly, Oliver compared his genitals to those he saw in pornography, stating “I think I did [compare my genitals] when I was younger, but not anymore... you gotta realize that that’s a theatrical thing... They’ve got unusually large penises. You don’t need that big of a penis.” These findings show that societal expectations and the portrayal of genitals in pornography contribute to shaping GSI.

Partner Perceptions

Three participants' GSI were shaped by the feedback, compliments, or satisfaction they received from their sexual partners. Lucas revealed how the compliments he received from his partners made him feel more positively about his genitals. He shared:

I've been told by almost all my sexual partners that I have a fairly large penis... You know, pulling it out... and their initial shock. They're pleased and impressed... usually offering a comment or something being like 'holy, that's huge!' or whatever.

The compliments not only boosted Lucas's confidence, but also made him feel "less concerned about the anxiety surrounding my foreskin" and "more masculine!"

Oliver also emphasized the impact of receiving compliments in shaping his GSI. He stated, "I dated somebody for three years, I got compliments about my dick... Just like yeah, you get compliments. That's a time where I feel positive." This revelation added complexity to Oliver's earlier concerns about his penis size. Similarly, Cade highlighted the role that his partners' perceptions played in his GSI, often taking precedence over his own self-perception. He explained, "It has much more to do with if the other person is satisfied with them than if I'm satisfied with them." Cade further elaborated, "Someone's satisfaction with my genitals makes me feel better about them, probably the main thing." For Oliver and Cade, the significance of partner perceptions in shaping GSI becomes evident.

In summary, the theme "Shaping GSI" illuminates how personal experiences and external factors shaped participants' GSI, with their penis, societal expectations and pornography, and partner perceptions playing key roles.

Theme 3: Responding to Genital Concerns

This theme explores how participants respond to concerns or negative feelings regarding their genitals. It delves into the improvement efforts and rationalization strategies participants employed to respond to these concerns.

Improvement Efforts

Two participants sought to address their genital concerns with the aim of improving their GSI. Lucas's dissatisfaction with his foreskin led him to consider surgical intervention, as he expressed, "I... would like to see a urologist maybe just to get the 411." While contemplating this decision, he considered the potential benefits and drawbacks of the procedure, stating:

I know that [keeping my foreskin] can bring a heightened risk of infection, or a heightened risk for being exposed for certain STDs, so I'd like to know my risk factor for that. But at the same time... I've heard... that it's a terrible, painful healing process that takes probably 6 or more months.

Lucas's willingness to consult a medical professional and consider the associated risks and potential discomfort reflects his willingness to address his genital concerns.

Cade sought to improve his genital functionality through lifestyle changes with the aim of boosting testosterone levels and addressing erection issues. He shared, "I do have some issues with maintaining an erection when I'm not incredibly aroused... So I've certainly been looking into my food and exercise, as I've heard it can make it better." Together, participants are willing to pursue strategies to address their genital concerns to improve their GSI.

Rationalization

A common thread across participants' narratives was their use of rationalization as a strategy to alleviate negative feelings about their genitals. Participants demonstrated the power of rationalization in reframing their perceptions, evoking affirmations like, "It's not the worst thing in the world, I could have a fucking ear growing out of my forehead or something" (Lucas), "I could be a lot worse off" (Dakota), and "You got what you got, so like there's no point being upset about it" (David). Participants employed rationalization to transition from negative to a more accepting view of their genitals.

Beyond affirmations, some participants appreciated other aspects of their genitals as part of their rationalization strategy. For example, Lucas overemphasized positive attributes of his genitals to compensate for perceived flaws in appearance. He expressed, "I definitely wish for... the foreskin condition to be different, but... there's other factors like the fact that my penis is large, that kinda almost seem to negate it... God gave me one thing but he took another." This exemplifies Lucas's use of rationalization to negotiate his genital concerns. Similarly, Oliver rationalized his circumcision by emphasizing the practicality of a circumcised penis and downplaying the potential loss of sensitivity, stating, "Apparently it removes a lot of nerve endings... But at the same time, I feel like it's just a little bit easier to deal with, I got a cleaner penis." These rationalization strategies reflect their efforts to cope with and mitigate negative feelings by focusing on positive and constructive perspectives.

In summary, the theme "Responding to Genital Concerns" unveils how participants actively shape their GSI by seeking improvement efforts and adopting rationalization strategies to manage their negative genital perceptions.

Theme 4: GSI Impacting Sexual Activity

This theme explores the influence of participants' GSI on their sexual activity, which is one of the three dimensions of sexual well-being studied in this research. Negative genital perceptions create emotional barriers that hinder participants' exploration and engagement in sexual activities. Conversely, their narratives reveal the transformative power of GSI in fostering increased willingness to engage in sexual activities.

Emotional Barriers to Sexual Engagement

Four participants disclosed how their negative feelings about their genitals acted as barriers and hindered the range and pace of their sexual activities. Dakota's hesitations and self-consciousness about his genitals restricted him to non-penetrative sexual activities like kissing. His emotional challenges, reflected in statements like "[Me and my partner] are moving kind of slower, perhaps more than he would like" and "Self-consciousness might make me less likely to do things than I otherwise would... self-consciousness about what I'm supposed to do, like how I should groom myself," highlight how his self-doubt about his genital appearance hindered his sexual exploration.

Lucas and Oliver grappled with anxiety and self-doubt during partnered sexual activities, driven by concerns about their genital appearance and potential rejection. Lucas shared his ongoing inner turmoil, particularly in in-person sexual interactions, where he anticipated rejection due to his foreskin. He articulated, "I always wonder, is that the reason?... I get a bit of anxiety, like... have they noticed I'm different? Are they thinking what's wrong with me?" This vulnerability and anxiety added complexity to Lucas's sexual activities. He described the "expectation anxiety" he felt, where he

anticipated a partner “saying something or rejecting me on the account of my genital appearance.” Concerns about potential judgment or rejection from partners due to his perceived genital differences contributed to his anxiety during sexual activity. Similarly, Oliver grappled with concerns about his genitals, leading to feelings of anxiety and self-doubt during his sexual encounters, reflected in questions such as, “Do I have a big enough penis? Does it look weird? Should I have my pubes shaved?” Their experiences reveal how their apprehensions regarding genital appearance and fear of rejection created emotional barriers that affected their sexual activity experiences.

Cade's concern about his large penis size generated frustration because it affected the duration of sexual encounters and the frequency of transitioning between partners. He shared a “recurring theme where I have to abruptly stop intercourse period, full stop, no return to it with a sexual partner because they simply are in too much pain,” which left him feeling “negative” about his genitals. Cade’s disclosure that concerns about penis size led to a pattern of “shifting sexual partners quite a lot” emphasizes the barriers created by his penis size concerns within the context of sexual activity.

In summary, participants’ negative perceptions and concerns about their genital appearance create emotional barriers that influence their sexual activity experiences.

Transformative Power of GSI

Participants’ narratives revealed the transformative power of GSI, particularly in boosting self-confidence and encouraging engagement in sexual activities. For Lucas, positive GSI facilitated his engagement in virtual sexual activities during the COVID-19 pandemic. He described using online platforms like Reddit and Snapchat to connect with sexual partners, stating, “For the last six or seven months... I pursued sexual stimulation

from online partners, which definitely made it easier to meet people during the pandemic.” Lucas found comfort in virtual interactions due to his ability to disengage if necessary, stating, “Even if... they’re gonna say something or reject me, I can just click off and never talk to them again.” Lucas felt increasingly empowered during his virtual encounters, which enabled him to engage in sexual activities more freely. He elaborated, “I’ve struck up an e-connection... you kind of find someone who appreciates your body and appreciates your genitalia... It feels really, really good.” This boost in self-confidence with his genitals allowed Lucas to embrace virtual sexual activities, demonstrating the transformative power of GSI for sexual activity.

Oliver experienced a journey from initial anxiety and self-doubt, as discussed in the previous sub-theme, to a more positive perception of his genitals that enhanced the depth of his sexual experiences. Oliver’s statement, “Feeling good about my genitals definitely makes me more comfortable with partners now... When I feel good about how I look, it makes me feel good during sex,” exemplifies the transformative power of GSI for his sexual interactions. Oliver shared a poignant memory from a past relationship that showed how positive GSI tangibly enhanced the depth of his sexual experiences. He shared:

In my old relationship, I felt comfortable with my body, and it was like a whole new level of connection... Kinda just learned each other’s bodies... It becomes more emotional, it's not just purely physical. You get to enjoy it more. Really like having a connection with someone.

Oliver's experience shows how fostering positive genital perceptions can enhance the depth of sexual experiences.

In summary, the theme “GSI Impacting Sexual Activity” offered an exploration of the connection between GSI and sexual activity. This theme shows that a negative GSI can act as an emotional barrier that negatively impacts sexual activity, while positive GSI can enrich the depth and enjoyment of sexual experiences.

Theme 5: GSI Impacting Sexual Functioning

This theme delves into how participants' GSI influences their sexual functioning, which constitutes another dimension of sexual well-being investigated in this research. The narratives of three participants reveal the tangible effects of negative genital perceptions on their ability to engage in sexual activities effectively.

Oliver’s concerns about penis size transcended beyond psychological distress to have a direct impact on his sexual functioning. He confessed, “I sometimes think maybe my penis is too small or just get nervous, get in my head wondering if they're enjoying themselves... Sometimes it distracts me, and I couldn’t get an erection.” His worries about penis size hindered his capacity to experience sexual pleasure and maintain satisfactory sexual functioning. Similarly, Lucas’s anxiety regarding his foreskin sometimes translated into difficulties achieving erections. He explained:

Just kind of that anxiety that they’re gonna find out I’m different and they’re not gonna like it... And from there the anxiety on top of it makes it even harder to get an erection, and then that person is... working their way down to your genital area and you're like ugh, stop, stop, stop!

Their experiences underscore how GSI can impact physiological sexual functioning.

In addition to erection capabilities, Cade revealed how GSI affects orgasm attainment. His anxiety about his large penis size occasionally interfered with reaching

orgasm during sexual encounters. He shared that his worry about potentially hurting his partner "prevents me from reaching orgasm."

In summary, the theme "GSI Impacting Sexual Functioning" reveals how negative genital perceptions can directly affect participants' ability to engage in sexual activities, including achieving and maintaining erections and reaching orgasm.

Theme 6: GSI Impacting Sexual Satisfaction

This theme delves into how participants' GSI influences their sexual satisfaction, marking the final dimension of sexual well-being explored in this study. Four participants shared how negative genital perceptions adversely affected their sexual satisfaction, while genital acceptance enhanced it.

Negative Perceptions and Dissatisfaction

Cade and Oliver explained how negative genital perceptions, particularly regarding penis size, led to sexual dissatisfaction. Cade described his sexual experiences as characterized by "moderate dissatisfaction," largely driven by anxieties about penis size. He expressed frustration, stating, "Most of my sex life... has been mired by dissatisfaction from partners who were not comfortable having intercourse... And that can get a little bit annoying and prevent me from feeling satisfaction." His persistent need to check in with his partners, repeatedly asking questions like "Are you good? Are you good? Is this ok? Do you need to stop?" became "distracting" and hindered his satisfaction. In a reflective statement, Cade described feeling "cursed," expressing his long-standing hope of "finding a partner I connect with both emotionally and physically." This deep-seated desire, driven by concerns about penis size, highlights the challenges for sexual satisfaction imposed by GSI.

Oliver similarly acknowledged how negative genital perceptions induced feelings of anxiety and self-imposed pressure that hindered his ability to experience sexual satisfaction. He admitted, “I didn’t think how I felt about my dick really messed with how much I enjoy sex. But when I look back, I guess it did.” He elaborated further, stating, “My genitals sometimes lowered my satisfaction, ‘cause I’d be worried, or it would cause anxiety. And then you kinda have to think about your penis in that sense... with sex being [so] important.” Cade and Oliver’s experiences reveal how negative genital perceptions, predominantly driven by concerns about penis size, can preoccupy one’s thoughts and negatively impact sexual satisfaction.

Genital Acceptance as Catalyst

In contrast, Lucas and Dakota emphasized the power of genital acceptance for heightened sexual satisfaction. Lucas exhibited resilience and a positive outlook, stating, “You gotta roll with the punches... It definitely has the potential to affect me, but I try my best not to let it... just because I’m a little different, doesn’t mean I don’t deserve any less sexual satisfaction.” Lucas’s narrative highlighted the importance of acceptance in achieving sexual satisfaction and countering the impact of negative genital perceptions.

Dakota's journey toward genital acceptance reveals the importance of being comfortable with one's genitals during solo sexual activities for heightened satisfaction. His experiences during the COVID-19 pandemic offer insights into the impact of external challenges on genital acceptance. Despite facing difficulties such as reduced opportunities for forming romantic connections and increased isolation, Dakota’s reflection on his post-pandemic well-being is telling: “I’m doing better for myself post-pandemic for sure, physically, mentally, socially, romantically, like in every sense.” This

positive shift extended to his feelings about his genitals and his sexual satisfaction. He shared, “When I wasn’t confident with my appearance, I think masturbating was less enjoyable. Didn’t feel as satisfied. But as it stands, I am... so it's important, self-image is important.” Whereas a lack of confidence in genital appearance affected his satisfaction during masturbation, genital acceptance was able to enhance it.

In summary, the theme “GSI Impacting Sexual Satisfaction” delves into how GSI affects participants’ sexual satisfaction by revealing the repercussions of negative genital perceptions and highlighting the value of accepting one's genitals.

Summary

This chapter presented the main themes and sub-themes that emerged during the analysis. The next chapter will provide an interpretation of these experiences within the chosen theoretical framework and the broader literature to offer a deeper understanding of the underlying meanings.

Chapter 5: Discussion

The purpose of this study was to describe the experiences of five university men concerning GSI and its impact on three dimensions of their sexual well-being: sexual activity, sexual functioning, and sexual satisfaction. Employing interpretative phenomenological analysis (IPA), six themes and 11 sub-themes were identified from their accounts. This chapter will situate the findings within the theoretical framework of hegemonic masculinity, examine their alignment with existing literature, consider how the findings address the research questions, and present novel insights from the research. The exploration within this chapter is guided by two research questions:

- 1) What thoughts and feelings do men have regarding their GSI, which includes their genital appearance and functionality?
- 2) How does men's perception of their GSI influence or impact three dimensions of their sexual well-being: sexual activity, sexual functioning, and sexual satisfaction?

By addressing these questions, this chapter seeks to unravel the meanings embedded in their experiences. The subsequent sections delve into the interpretation of the study's findings to provide a nuanced understanding of the connection between GSI and sexual well-being.

Theme 1: Genital Perceptions

“Genital Perceptions” captures participants' experiences with GSI, covering perceptions of both appearance and functionality. Addressing the first research question – What thoughts and feelings do men have regarding their GSI, which includes their genital

appearance and functionality? – the findings of this theme reveal the multifaceted nature of GSI and offer a deeper understanding of the phenomenon.

During initial discussions, some participants conveyed a dismissive attitude toward discussions about their GSI. This initial dismissal may be a manifestation of hegemonic masculinity, where men are socialized to minimize vulnerability and emotional expression (Connell 1995; Courtenay, 2000). In this context, participants may have initially viewed discussions about their genitals as unimportant or irrelevant due to societal expectations regarding masculinity. However, these initial dismissive statements did not reflect the depth of participants' experiences. As the interviews progressed, participants' willingness to engage in detailed discussions about their GSI evolved. The probing nature of follow-up questions encouraged participants to reflect on their experiences and better articulate their thoughts. Thus, capturing unfolding narratives was necessary to comprehensively understand their genital perceptions. As participants felt more comfortable, they revealed the nuances of their experiences, thereby contributing to a more comprehensive understanding of GSI.

Appearance Perceptions

The importance of genital appearance perceptions for GSI becomes evident as participants express a range of emotions and concerns regarding various aspects of their genital aesthetics. Across interviews, a notable emphasis is placed on perceptions of penis size, which emerges as a central aspect of participants' GSI. Factors such as perceived inadequacy and fear of judgment from sexual partners influence participants' concerns about penis size. Echoing existing literature, where men commonly express dissatisfaction with penis length (Gaither et al., 2017; Hustad et al., 2022; Lever et al.,

2006), penis size concerns create both anxiety and a pressure to conform to hegemonic masculine ideals. Hegemonic masculinity perpetuates the idea that certain physical attributes, such as a large penis, are essential for fulfilling the ideal masculine identity, symbolizing virility, dominance, and sexual prowess (Connell & Messerschmidt, 2005). This idealization creates an environment where participants of all sizes harbour insecurities about their size, as indicated by Oliver's occasional desire for a larger penis and Cade's dissatisfaction with his larger size. This challenges the simplistic assumption that penis size dissatisfaction is solely limited to men with smaller penises (Lever et al., 2006). Consequently, participants' anxieties may stem from a sense of threat concerning their self-worth, masculinity, and sexual confidence (Komarnicky et al., 2019), leading to feelings of discontent and falling short of these expectations. Ultimately, participants navigate hegemonic pressures in pursuit of the elusive "perfect" penis size. This study, in line with research emphasizing the importance of perceptions of penis size for GSI (Veale et al., 2015), challenges the binary distinction of satisfaction or dissatisfaction based solely on physical measurements and emphasizes the significance of perceptions in understanding GSI.

Perceptions of circumcision status are identified as an important aspect of participants' genital appearance. Contrary to prior research suggesting overall satisfaction with circumcision status (Gaither et al., 2017), both circumcised and uncircumcised participants experience dissatisfaction, and perceptions of circumcision status played a role in shaping attitudes toward GSI. Personal autonomy and choice are important factors influencing participants' satisfaction with circumcision status. The dissatisfaction expressed by two circumcised participants, David and Oliver, echoes Earp's (2015)

findings on the significance of personal decision-making in satisfaction with circumcision status. Their discontent may arise from a perceived lack of agency over their genitals, as they express a desire for the opportunity to have chosen for themselves. Empowering men to make decisions about their genitals may foster greater satisfaction and confidence in their genital appearance.

Conversely, the dissatisfaction expressed by two uncircumcised participants, Lucas and Cade, is influenced by societal pressure to conform to hegemonic masculine ideals. Cade's concern about the potential hindrance his foreskin might pose in sexual encounters arises from the perceived association of circumcision with heightened feelings of masculinity and sexual capability, revealing the entanglement of circumcision with hegemonic masculinity constructs (Fleming et al., 2019). Cade and Lucas's concerns originate from their perception that possessing foreskin deviates from the norm, reflecting their negative sentiments about their genitals not aligning with hegemonic standards. Collectively, this study indicates that circumcision status alone does not dictate satisfaction or dissatisfaction; instead, it is the perceptions associated with circumcision status, impacted by hegemonic masculinity, that influence their GSI. This is supported by Bossio et al. (2018), who found that men's attitudes toward their circumcision status hold more significance for their body image than actual status.

Grooming practices represent an interesting finding that has been largely overlooked in existing literature. Historically, pubic hair grooming has been more commonly associated with women, while men were often portrayed as indifferent or compliant with societal norms (Davis et al., 2013; Gaither et al., 2017). However, there is now a growing trend towards pubic hair removal among men that challenges hegemonic

masculinity's emphasis on body hair as a symbol of virility and strength (Fahs, 2012; Ramsey et al., 2009). This study contributes to this evolving discourse, as participants actively embrace grooming practices, thus disrupting conventional associations between body hair and masculinity. Their willingness to deviate from traditional gender norms not only broadens the spectrum of acceptable behaviours and appearances for men but also fosters a more inclusive and diverse representation of masculinity.

What is particularly interesting is the motivation behind participants' grooming practices. While prior research suggests that men's motivations for pubic hair removal often revolve around sexual activity or hygiene (Gaither et al., 2017; Martins et al., 2008; Ramsey et al., 2009), this study indicates a deeper layer: personal agency and empowerment. Participants' grooming practices reflect their desire for self-care and individual preferences, rejecting hegemonic masculine norms to assert their autonomy. This allows them to gain a sense of ownership over their GSI and foster feelings of confidence and satisfaction with their genital appearance. In essence, grooming practices transcend mere aesthetic choices; they symbolize participants' empowerment and self-expression. Positive grooming experiences enhance GSI by instilling a sense of ownership in sculpting an aspect of their genitals within their control. This not only challenges simplistic perspectives focused solely on attributes like penis size but also indicates the importance of considering grooming practices for GSI.

In conclusion, "Appearance Perceptions" reveals the role of genital appearance in shaping GSI, particularly through perceptions of penis size, circumcision status, and grooming practices. Contrary to simplistic assumptions, satisfaction with genital appearance is not solely determined by physical measurements. Instead, it is influenced

by individuals' personal perceptions of genital appearance and the expectations embedded within hegemonic masculinity.

Functionality Perceptions

Alongside perceptions of genital appearance, functionality perceptions, particularly regarding erection function, are important for GSI. Similar to research by Wilcox et al. (2015) that found an association between negative GSI and increased erection difficulties, participants' concerns about maintaining erections transcend isolated incidents and leave a lasting impact on their GSI. Interestingly, perceptions of functionality often overshadow concerns about genital appearance. The dissatisfaction expressed by Lucas and Oliver regarding their erection capabilities, along with their prioritization of functionality over appearance, demonstrate that the ability of their genitals to perform as expected plays an important role in their GSI. Their enduring anxiety about their ability to maintain erections during sexual activity influences their overall confidence and satisfaction with their genitals, emphasizing the significance of functionality perceptions for GSI.

Participants' perceptions of genital functionality reveal their adherence to hegemonic norms. Within hegemonic masculinity, men are expected to exhibit high sexual prowess and performance, which necessitates the ability to maintain erections (Fileborn et al., 2017). The internalization of these expectations influences participants' functionality perceptions, as these standards shape their perceptions of satisfactory genital functionality. Their anxiety about maintaining erections during sexual activity reflects their adherence to these norms and their influence on GSI.

Contrasting this narrative, Dakota's positive perceptions about his erection function during masturbation may indicate a liberation from hegemonic pressures. Solo sexual encounters inherently involve fewer expectations than partnered sexual encounters (Herbenick et al., 2010), creating a space where men like Dakota feel more confident in their genital functionality. Thus, the juxtaposition of anxieties expressed by Lucas and Oliver with satisfaction expressed by Dakota shows how the absence of partnered pressures during solo sexual activities can foster positive feelings about genital functionality. This liberation from hegemonic masculine expectations during solo experiences contributes to Dakota's positive perceptions and satisfaction with his genital functionality, highlighting the role of context in shaping participants' experiences of GSI.

The theme "Genital Perceptions" reveals the multifaceted nature of GSI, encompassing diverse attitudes and concerns regarding genital appearance and functionality. Considering both physical attributes and perceptions of these attributes is important for understanding GSI. Importantly, participants' attitudes and concerns regarding GSI are linked to hegemonic masculine expectations but contrasting narratives within the theme reveal the potential for liberation from the pressures of hegemonic masculinity. Framing the findings of this theme within the field of health promotion, this theme indicates the importance of empowering men to embrace positive and accepting perceptions of their genitals, free from societal constraints, to promote positive GSI. By addressing the first research question, "Genital Perceptions" lays a foundation for deepening our understanding of GSI and participants' lived experiences.

Theme 2: Shaping GSI

“Shaping GSI” captures how personal experiences and external factors dynamically shape participants’ GSI. GSI is not static but rather evolves over time and is shaped by various factors including the prioritization of the penis, societal expectations and pornography portrayals, and partner perceptions.

Penis Priority

Participants’ narratives accentuate the central role of their penis in their shaping GSI. Notably, participants frequently reference and direct discussions toward their penis and predominantly use singular pronouns like “it” to describe their thoughts on their genitals. Conversations naturally gravitating toward discussions about their penis and their linguistic patterns are a manifestation of its dominant role in participants’ conceptualization of their GSI. This linguistic pattern echoes the symbolic weight assigned to the penis within hegemonic masculinity, where the penis transcends mere physicality to embody notions of virility and sexual prowess (Connell & Messerschmidt, 2005; Veale et al., 2015). Consequently, anxieties and negative perceptions expressed by some participants about their penis size can be understood within this framework, which not only reinforces the penis's centrality within GSI but also fosters feelings of inadequacy when they perceive their genitals as deviating from these norms.

Within this context, a hierarchical structure emerges within GSI, with the penis positioned at the top. This penis-centric narrative is consistent with prior research indicating men's tendency to prioritize their penis over other genital aspects (Davis et al., 2013; Gaither et al., 2017). Lucas’s characterization of other genital aspects as “support acts” underscores the subordinate role attributed to them in comparison to the penis. While other genital aspects play roles in overall GSI, they are overshadowed by

participants' perceived importance of their penis. This relegation reveals the hegemonic narrative that elevates the penis as the ultimate symbol of sexual prowess and virility. As subsequent sub-themes unfold, the persistent focus on the penis reaffirms its enduring role in shaping GSI.

Societal Expectations and Pornography

Societal expectations concerning penis size, reinforced by genital portrayals in pornography, play a role in shaping participants' GSI. Societal norms contribute to feelings of either acceptance or inadequacy based on how well participants feel they conform to these standards. Kilmartin (2007) underscores how societal portrayals of "real" men as those with large penises reinforce masculine ideals and negatively affect GSI. Building on this insight, participants' acknowledgement of the belief that "bigger is better" reflects the internalization of hegemonic masculine ideals, resulting in varied emotional responses. While some, like David and Dakota, struggle with feelings of inadequacy or potential emasculation when they perceive their genitals as falling short, others, like Lucas and Cade, find a sense of acceptance and validation within societal norms that boost their confidence. Komarnicky et al. (2019) found that penis size contributes to men's feelings of masculinity, which can explain why conforming to this societal expectation elicits positive feelings for some participants. However, it is important to challenge the pervasive notion that "bigger is better," due to its potential for lasting negative psychological and sexual health effects (Groves et al., 2010). Echoing Kilmartin (2007), societal expectations, particularly regarding penis size, can trigger negative feelings and adversely impact GSI. This finding is supported by existing

research that identifies a connection between non-adherence to societal expectations and negative GSI (Sharp & Oates, 2019).

The representation of genitals in pornography offers additional insight into the impact of societal expectations on GSI. Pornography often reinforces societal ideals about genital appearance by depicting actors with larger-than-average penises (Sharp & Oates, 2019). This portrayal creates a standard of what is considered ideal in terms of genital size and appearance. Exposure to such depictions during youth may have led participants to internalize these ideals, contributing to feelings of insecurity and dissatisfaction about their own genital appearance and influencing their perceptions of desirable genital aesthetics. Oliver and Dakota's experiences mirror Sharp & Oates' (2019) findings, suggesting that their initial negative perceptions of their genitals may have been influenced by societal norms about penis size. Their perceptions of what constitutes a normal and aesthetic penis were likely shaped by the limited variability in penis size and genital appearance depicted in pornography, consistent with research on skewed perceptions influenced by exposure to pornography (Loehle et al, 2017; Sharp & Oates, 2019).

However, as participants matured, their perceptions transitioned from unfavourable self-evaluations during youth to a critical evaluation of the "theatrical" nature of pornography in later years. They began to question the authenticity of pornographic depictions and recognized them as exaggerated and unrealistic. This evolution in attitudes reflects a process of challenging and ultimately rejecting hegemonic masculine norms, leading to greater acceptance and satisfaction with one's own genitals. As participants become more critical of societal expectations, they develop a more

positive sense of GSI that is not solely dictated by hegemonic masculine ideals perpetuated by pornography. This evolution indicates a developmental aspect of GSI. Research suggests that adolescence is the most intense period of changes in GSI (Fernando & Sharp, 2020), rendering youth more susceptible to societal pressures and media influences that uphold hegemonic norms (Ricciardelli & Yager, 2015). Thus, Oliver and Dakota's realization of the unrealistic nature of these portrayals reflects a conscious resistance against the influence of hegemonic masculinity on their perception of GSI. Their ability to develop a more confident sense of GSI once they were able to critically analyze and resist these norms demonstrates the dynamic nature of GSI development, as highlighted by Fudge and Byers (2017).

Partner Perceptions

Partner perceptions shape participants' GSI through affirmations that boost self-confidence and foster positive genital perceptions. A study by Cash et al. (2004) validates the positive impact of such affirmations on men's self-esteem and body image. Oliver's journey indicates that consistent positive affirmations from a partner over time can contribute to a more stable and positive GSI, aligning with research suggesting that men with positive GSI are more likely to have a long-term partner (de Silva et al., 2023). Partner affirmations act as catalysts for triggering positive genital perceptions and mitigating negative ones. Compliments from Oliver's long-term partner become transformative and counterbalance his past worries about penis size.

However, it is important to acknowledge the potential unintentional reinforcement of hegemonic masculine norms within partner affirmations. While well-intentioned, these affirmations may contribute to the normalization of hegemonic ideals and influence

participants' perceptions of their own genital adequacy. For example, affirmations that align with hegemonic norms, such as Lucas and Oliver being complimented on their penis size, may exert a more positive influence on participants' GSI because they reinforce ideals of masculinity. By receiving praise for their penis size, participants may perceive themselves as meeting societal standards of masculinity, thereby enhancing their confidence in their GSI and countering previous feelings of insecurity.

Cade's emphasis on his partners' satisfaction with his genitals underscores the role of partner perceptions in shaping GSI. Cade may internalize his partners' perceptions as indicators of his own sexual adequacy, which aligns with hegemonic ideals that prioritize virility and validation. While Cade experiences concerns about his penis size, positive feedback from partners likely provides him with reassurance and validation, especially considering the challenges he faces with partners expressing discomfort due to his size. Thus, partner perceptions and affirmations, even if unintentionally aligning with hegemonic expectations, emerge as influential factors in shaping participants' GSI. Participants were able to overcome past anxieties and insecurities about genital appearance through the support and encouragement of their partners, indicating that partner perceptions can positively reshape GSI.

"Shaping GSI" serves as a testament to the dynamic nature of GSI (Fudge & Byers, 2017), influenced by the prioritization of the penis, societal expectations and genital portrayals in pornography, and partner perceptions. As these influences ebb and flow over time, this study indicates the ongoing development and fluidity inherent in participants' GSI. The interplay between personal perceptions and external influences is important for understanding the extent to which participants can develop a more positive

GSI. While participants did exert some control over their own perceptions and attitudes towards their genitals, they were also influenced by external forces beyond their immediate control. Acknowledging this interplay can contribute to our understanding of the development and the challenges men face in cultivating a positive GSI.

Theme 3: Responding to Genital Concerns

As participants navigate their GSI, they exhibit resilience in response to concerns or negative feelings about their genitals. Aligned with the first research question – What thoughts and feelings do men have regarding their GSI, which includes their genital appearance and functionality? – participants employ diverse strategies to address and cope with genital concerns, capturing the fluid and adaptable nature of GSI.

Improvement Efforts

Participants' efforts to address their genitals concerns and improve their GSI reflect their desire to control and shape their genital attitudes, aligning with health promotion's principles of empowerment and self-efficacy (Tengland, 2007). Whether considering surgical interventions or exploring lifestyle changes, participants strive to address perceived inadequacies or discomfort with their GSI. These efforts align with established research on safety-seeking behaviour (Veale et al., 2015), where men actively seek strategies, such as medical examinations or online information searches, to alleviate distress and find solutions for their genital concerns. Participants demonstrate resilience and a commitment to enhancing their GSI (Veale et al., 2015). By addressing their concerns decisively, participants actively shape their own GSI, challenging the notion that men passively conform to societal expectations (Carter et al., 2019). Moreover, participants may feel compelled to conform to hegemonic masculine standards regarding

genital appearance and functionality. Cade's focus on improving his erection function reflects a desire for increased sexual performance, which aligns with the hegemonic expectation of virility. Similarly, Lucas's consideration of foreskin removal is driven by his worry about his foreskin not looking like that of other men, indicating a discrepancy between his genital appearance and what he perceives as the hegemonic norm. This discrepancy contributes to his contemplation of surgical interventions, as he seeks to align his genitals with standards of acceptability. Ultimately, these improvement efforts culminate in a sense of empowerment and self-efficacy within participants' experiences of GSI. Through their proactive steps to address and cope with their genital concerns, participants not only assert control over their GSI but also enhance their acceptance and confidence.

Rationalization

Rationalization, a coping mechanism employed by participants to manage negative emotions and distress related to their GSI, aligns with health promotion principles by fostering emotional resilience and self-acceptance (Martinez & Opalinski, 2019). Participants employ rationalization to downplay perceived flaws, thereby mitigating anxiety and preserving their GSI amidst these negative emotions. This aligns with findings by Spendelov et al. (2018) that men may minimize their perceived inadequacies as a coping mechanism to body image concerns. By adopting perspectives of acceptance or comparing their situation to potentially worse scenarios, participants attempt to minimize and reframe their perceptions in a more positive light. This adaptative response indicates a degree of resilience and adaptability as participants choose to focus on aspects of their genitals that they perceive as acceptable or adequate,

aligning with literature on the mitigating effects of affirmations on body image (Cash et al., 2004).

Moreover, rationalization reflects participants' ability to navigate and negotiate hegemonic expectations. By accentuating positive attributes and aligning themselves with ideals that associate masculinity with emotional strength, participants assert control over their genital perceptions. They strategically navigate societal expectations by adjusting their own perceptions of genital appearance and functionality to align with what is considered normal or desirable, while also challenging these norms when they feel necessary.

Rationalization demonstrates a deliberate commitment to managing and reshaping their GSI (Langelier, 2018; Oorthuys et al., 2022). Dhurup and Nolan (2014) found that men often engage in positive rational acceptance as a coping strategy. Similarly, through rationalization strategies such as positive affirmations and comparative reasoning, participants actively engage in reshaping their GSI by fostering emotional resilience and self-acceptance. This study indicates that participants utilize rationalization to manage and reframe their genital concerns in a manner that enriches our understanding of how genital perceptions are formed and maintained. Ultimately, rationalization serves as a tool for participants to assert control over their genital perceptions, contributing to a proactive approach in promoting their GSI.

Theme 4: GSI Impacting Sexual Activity

“GSI Impacting Sexual Activity” captures the impact of GSI on participants' sexual exploration and engagement. Addressing the second research question – How does men's perception of their GSI influence or impact their sexual activity, sexual

functioning, and sexual satisfaction? – negative genital perceptions create emotional barriers that hinder sexual activity, while positive perceptions boost self-confidence and enhance sexual encounters.

Emotional Barriers to Sexual Engagement

Sexually active participants share a common narrative where negative genital perceptions, particularly concerns about penis size and grooming practices, manifest as emotional barriers that impact both ongoing and prospective sexual activities. Their preoccupation with perceived genital flaws leads to a persistent focus on these flaws during sexual encounters or when contemplating sexual activity. Importantly, these negative genital perceptions are intertwined with hegemonic masculine ideals regarding penis size and virility, which set unrealistic standards that perpetuate feelings of anxiety and inadequacy among participants when contemplating or during a sexual encounter.

Dakota's reluctance to progress beyond kissing with his boyfriend directly stems from his persistent worries over his genital appearance not aligning with hegemonic masculine expectations. The fear of not meeting standards regarding penis size and pubic hair creates an emotional barrier that hinders both sexual exploration and emotional intimacy within his relationship. Dakota attempts to shield himself from experiencing further emotional distress or rejection related to his genital concerns by abstaining from sexual activities that require his genitals to be visible. This aligns with research indicating that men with negative GSI often engage in avoidance behaviours such as abstaining from sexual activity to cope with feelings of inadequacy and anxiety about their genitals (Ålgars et al., 2011; Veale et al., 2015).

Similarly, the negative genital perceptions held by Lucas, Cade, and Oliver limit their ability to immerse themselves in sexual experiences due to anxieties about not conforming to hegemonic standards of genital appearance. Research consistently shows a direct association between negative GSI and emotional distress during sexual encounters (Ålgars et al., 2011; Gaither et al., 2017; Lever et al., 2006; Wilcox et al., 2015). Feelings of anxiety, embarrassment, and diminished willingness to engage in certain activities are common outcomes of negative GSI that directly impact men's sexual activity (Gaither et al., 2017). Corroborating these findings, participants' genital concerns lead to feelings of anxiety and self-consciousness that infiltrate their thoughts and inhibit their ability to engage fully in sexual encounters. Lucas's anticipation of rejection due to his foreskin, Cade's frustration over the implications of his large penis size, and Oliver's worries about penis size and grooming practices all illustrate how negative genital perceptions inhibit their full immersion in the sexual experience.

Participants may be experiencing cognitive distraction, where negative genital attitudes and cognitive distraction due to these concerns disrupt sexual encounters (Pascoal et al., 2018). Grappling with concerns about their genital appearance may lead participants to become consumed by worries regarding their perceived inadequacies, hindering their ability to fully engage in the present moment. Heightened self-consciousness and insecurity about genital appearance contribute to a sense of vulnerability during sexual encounters, leading to emotional distancing and a diminished capacity to experience pleasure and intimacy (Pascoal et al., 2018).

This study indicates that negative genital perceptions can overshadow participants' sexual encounters and lead to diminished enjoyment and fulfillment. By

adhering to hegemonic expectations about genital appearance, participants' constant preoccupation with their perceived inadequacies becomes a palpable force that detracts from the intimacy and pleasure that should characterize sexual engagement, instead fostering feelings of inadequacy and insecurity. This indicates a link between perceptions and experiences (Gillen & Markey, 2019), where negative perceptions of one's genitals directly impact experiences during sexual activity.

Transformative Power of GSI

Conversely, positive genital perceptions have a transformative effect on participants' sexual activity by reshaping their attitudes towards GSI and their approach to sexual encounters. Quantitative research consistently shows a correlation between positive GSI and increased sexual activity (de Silva et al., 2023; Gaither et al., 2017). Building upon this, the findings suggest that when participants harbour more positive genital perceptions, they have more positive sexual encounters, evidenced by increased confidence, emotional richness, and deeper connections.

Through fostering positive GSI, Lucas experienced a transformative shift in confidence that allowed him to overcome emotional barriers and engage more fully in sexual encounters. Despite initial concerns about his foreskin, Lucas was able to cultivate a positive GSI during virtual sexual encounters, rejecting hegemonic norms and shedding anxieties that once hindered his confidence. His adaptability and resourcefulness in finding alternative means of sexual activity during the COVID-19 pandemic aligns with findings of shifts in sexual behaviours among university students, including increased use of online platforms for sexual interactions (Herbenick et al., 2022). By leveraging online platforms, Lucas not only finds comfort in his GSI but also demonstrates a proactive

approach to maintaining sexual connections during times of physical distancing. His newfound confidence enables him to explore and enjoy his sexuality more freely, without the fear of judgment or rejection. By rejecting hegemonic norms surrounding genital appearance and instead embracing positive GSI, Lucas overcomes barriers to sexual fulfillment and navigates his sexual encounters with resilience and confidence.

Similarly, Oliver experiences a transformative shift in GSI within a long-term partnership that allows him to break free from hegemonic pressures and overcome anxieties about genital appearance to foster a deeper sexual connection. This positive shift in GSI is more than a surface-level change; it signifies a rejection of hegemonic ideals that may have previously influenced his GSI. de Silva et al. (2023) found that men in romantic relationships were more likely to have positive GSI. Building upon this, the supportive context of a long-term relationship may have allowed Oliver to break free from genital concerns and the constraints of external expectations. As a result, he experiences greater sexual fulfillment, driven by a rejection of hegemonic norms and a newfound sense of acceptance with his GSI.

Taken together, their narratives underscore the transformative power of positive GSI in redefining sexual experiences. By rejecting hegemonic norms surrounding genital appearance and embracing positive genital perceptions, participants pave the way for more confident and emotionally fulfilling sexual encounters. Positive GSI becomes a catalyst for dismantling hegemonic constraints by empowering participants to confidently engage with their sexuality and redefine the parameters of a fulfilling sexual experience.

Theme 5: GSI Impacting Sexual Functioning

“GSI Impacting Sexual Functioning” captures how negative genital perceptions impact participants’ physiological sexual functioning, revealing the influence of hegemonic masculinity. Addressing the second research question – How does men's perception of their GSI influence or impact sexual activity, sexual functioning, and sexual satisfaction? – participants' narratives reveal tangible consequences of negative GSI, specifically affecting their erection function and orgasm attainment.

Expanding on quantitative research that established a correlation between negative GSI and sexual functioning difficulties (Ålgars et al., 2011; Morrison et al., 2005; Wilcox et al., 2015), participants’ psychological distress stemming from their negative genital perceptions initiate a cascade of physiological challenges during sexual encounters. Research indicates that psychological factors such as anxiety, stress, depression, and self-esteem can significantly impact sexual functioning (Corona et al., 2014; Wilcox et al., 2015). Supporting these findings, participants’ negative genital perceptions trigger heightened levels of anxiety and self-consciousness during sexual activity that contribute to their sexual functioning difficulties. Participants may be experiencing cognitive distraction during sexual encounters due to these concerns, which aligns with research indicating that psychological elements contribute to long-term maintenance of sexual functioning problems (Pascoal et al., 2018). Moreover, while Wilcox et al. (2015) found no correlation between GSI and orgasm, Cade's experience adds depth to this relationship. His anxiety regarding his penis size introduces a disruptive element that diverts his focus away from the pleasurable aspects of the sexual encounter and hinders the mental state necessary for achieving orgasm.

Oliver's concern about being perceived as "too small" and Lucas's anxiety about his foreskin appearing "different" demonstrate how hegemonic expectations shape participants' GSI and contribute to sexual functioning difficulties. The perpetuation of anxiety and self-consciousness stemming from negative genital perceptions create a cycle where the fear of not meeting hegemonic expectations intensifies anxiety and preoccupation during sexual encounters. This fixation on perceived genital flaws reinforces their adherence to hegemonic norms. As participants strive to conform to these ideals, their negative genital perceptions solidify, exacerbating their distress and hindering sexual functioning.

Interestingly, difficulties in arousal and achieving orgasm due to negative GSI may further reinforce negative perceptions about one's genitals. Research by Alavi-Arjas et al. (2023) found a bidirectional relationship between negative GSI and sexual dysfunction, where GSI and sexual functioning influenced each other. Expanding on this insight, participants' struggles with maintaining erections and reaching orgasm stemming from heightened anxiety about their genital appearance may perpetuate a negative feedback loop, where each negative experience reinforces their existing negative perceptions (Alavi-Arjas et al., 2023). Consequently, this suggests that negative GSI may not only impact sexual functioning but may also be reinforced by negative sexual experiences, thus creating a cycle that exacerbates feelings of inadequacy and distress.

Taken together, this theme presents a multifaceted impact of GSI on physiological sexual functioning. Participants' negative genital perceptions, driven by their adherence to hegemonic masculine norms, contribute to emotional states of anxiety and self-

consciousness that, in turn, affect their capacity to achieve and sustain erections and reach orgasm during sexual encounters.

Theme 6: GSI Impacting Sexual Satisfaction

“GSI Impacting Sexual Satisfaction” captures the relationship between participants’ GSI and their experiences of sexual satisfaction. Addressing the second research question – How does men's perception of their GSI influence or impact sexual activity, sexual functioning, and sexual satisfaction? – negative genital perceptions act as a barrier to sexual satisfaction, contrasting with the influence of genital acceptance in catalyzing enhanced satisfaction.

Negative Perceptions and Dissatisfaction

Contributing to the conflicting findings on the relationship between GSI and sexual satisfaction, where some studies found correlations (Fischer & Træen, 2022; van den Brink et al., 2017) and others did not (Komarnicky et al., 2019), this study indicates that participants’ negative genital perceptions have direct implications on their sexual satisfaction. The enduring nature of anxieties surrounding penis size emerge as a central theme that translate into dissatisfaction with their sexual experiences.

Oliver and Cade epitomize this struggle, where their preoccupation with penis size obstructs their ability to fully engage in and derive pleasure from sexual encounters. Their preoccupation with penis size reflects the struggle to meet hegemonic masculinity, a pattern observed consistently throughout this research. Delving into the nuances of negative genital attitudes during sexual encounters, as explored by van den Brink et al.'s (2017), adds depth to this interpretation. For Oliver, his worries about penis size become a mental preoccupation, which presents as a hurdle and obstructs his immediate, in-the-

moment experience of sexual satisfaction. This fixation on perceived inadequacies translates into mental impediments that disrupt the flow of his sexual interactions. Similarly, Cade's concerns about his penis size not only affect his mental state during encounters but manifest in actions and behaviours that physically obstruct his sexual satisfaction. Partners abstaining from sexual activities, incomplete sexual encounters, prolonged intervals between sexual interactions, and preoccupation with potentially causing harm to his partners are tangible consequences of Cade's penis concerns on his sexual satisfaction. Cade's expression of feeling "cursed" encapsulates the emotional weight he carries because of his genital concerns. He may feel perpetually hindered in the pursuit of fulfilling sexual experiences due to the challenges presented by his large penis. This mental state and physical obstructions all contribute to a narrative of impediment and dissatisfaction in Cade's pursuit of fulfilling sexual encounters. The lasting anxieties and tangible barriers faced by Oliver and Cade reveal the link between negative genital perceptions and sexual dissatisfaction.

Genital Acceptance as Catalyst

Conversely, genital acceptance serves as a catalyst for positive changes in participants' sexual satisfaction as they reject hegemonic masculine norms and embrace self-confidence and positivity. Grounded in findings by Fischer & Træen (2022) and van den Brink et al. (2018) that highlight the correlation between positive GSI and enhanced sexual satisfaction, genital acceptance becomes a resilient source that not only shapes but elevates their satisfaction. Lucas's acknowledgment that his perceived genital flaws do not diminish his entitlement to sexual satisfaction signals a rejection of hegemonic ideals and a declaration of his right to sexual fulfillment that is undeterred by perceived

differences. This cognitive transformation is a testament to the liberating impact of rejecting hegemonic masculine norms and embracing genital acceptance on one's GSI and, consequently, sexual satisfaction. Lucas's experience not only exemplifies personal growth but also aligns with studies reporting that men with positive GSI encounter fewer problems in their sex lives and experience more positive emotions when contemplating sexual activity (Saffari et al., 2016).

Dakota's revelation of experiencing increased enjoyment in masturbation since embracing genital acceptance not only aligns with the established link between positive GSI and enhanced sexual satisfaction (van den Brink et al., 2018), but also adds depth to our understanding. His experience suggests a broader positive trajectory, as the power of rejecting the need to meet hegemonic norms and embracing genital acceptance extends beyond partnered sexual encounters to enhance satisfaction in solo sexual experiences. Dakota's experience during the pandemic indicates the importance of genital acceptance in solo sexual activities. Despite facing external challenges such as reduced opportunities for forming romantic connections and increased isolation, Dakota's positive shift in well-being post-pandemic highlights the role of genital acceptance in enhancing sexual satisfaction during solo sexual activities. His experience serves as a testament to the resilience and adaptability of individuals in finding fulfillment amidst challenging circumstances. Notably, Dakota's journey diverges from the findings of Ålgars et al. (2011), who did not find a significant link between positive GSI and masturbation. Instead, his experience reveals the tangible benefits of embracing genital acceptance for masturbation satisfaction.

Participants' journey towards genital acceptance represents a powerful rejection of hegemonic masculine norms, where they prioritize acceptance over external validation, ultimately leading to greater sexual satisfaction. By rejecting hegemonic pressures and affirming genital uniqueness, participants resist the pressures surrounding genital appearance, thereby promoting a positive approach to sexual health and well-being. This act of rejection fosters resilience and empowers them to redefine their standards of sexual satisfaction based on their own experiences and preferences, rather than conforming to hegemonic ideals. In doing so, participants not only elevate their comfort and confidence but also amplify their overall satisfaction during sexual encounters. This resilience is consistent with the broader understanding that positive GSI fosters higher levels of physical and emotional satisfaction (Saffari et al., 2016; van den Brink et al., 2018).

"GSI Impacting Sexual Satisfaction" reveals that while negative genital perceptions can impede sexual satisfaction, genital acceptance becomes a catalyst for reshaping these experiences positively. Through rejecting hegemonic masculine norms and embracing genital acceptance, participants elevate their confidence and satisfaction during sexual encounters. These narratives encourage a broader understanding of what it means to be a sexually satisfied man by emphasizing the importance of rejecting hegemonic masculinity for fostering genital acceptance and enhancing sexual satisfaction.

Chapter 6: Conclusion

In this chapter, I present my conclusions of this study. First, I summarize the study's key findings and address its strengths and limitations. I then discuss the implications of the findings and their relevance to health promotion efforts. Next, I reflect on my adherence to quality principles throughout the research process and provide recommendations for future research. Finally, I address my plans for knowledge translation, reflect on my experience as the researcher, and conclude with a final statement that draws together the threads of this exploration.

Summary of Key Findings

This qualitative exploration, grounded in interpretative phenomenological analysis and framed within hegemonic masculinity, delved into the experiences of five university men regarding their GSI and its implications for three dimensions of sexual well-being. This study revealed that GSI is multifaceted and encompasses a spectrum of emotions associated with how participants perceive the appearance and functionality of their genitals. Negative attitudes towards certain aspects, such as circumcision status and erection function, posed challenges in accepting one's genitals, whereas grooming practices contributed to cultivating more positive feelings about GSI. Participants demonstrated resilience and adaptability in navigating their genitals concerns by adopting strategies like improvement efforts and rationalization. Hegemonic masculine norms shaped participants' perceptions of their genitals and influenced their attitudes towards GSI. Participants interpreted and internalized hegemonic norms in diverse ways, leading to varied experiences and attitudes towards GSI.

The findings revealed the dynamic (Fudge & Byers, 2017) and responsive nature of GSI to various personal experiences and external pressures. Participants' feelings

toward their genitals evolved and adapted in response to different situations, contexts, and life events. While participants exerted some control over their own genital perceptions and attitudes, their perceptions were also influenced by external forces beyond their immediate control. This suggests an ongoing developmental process in GSI, where attitudes toward GSI may evolve over time. For example, as participants matured, some developed coping strategies in navigating their genital concerns, leading to positive shifts in their GSI.

Importantly, this study revealed the implications of GSI for sexual well-being across three dimensions: sexual activity, sexual functioning, and sexual satisfaction. Negative genital perceptions led to feelings of anxiety, self-doubt, and self-consciousness that created emotional barriers that hindered sexual exploration and engagement. Conversely, positive perceptions led to transformative outcomes in sexual experiences by fostering confidence and deeper connections with partners. Negative genital perceptions also influenced participants' sexual functioning, resulting in challenges with erection function and orgasm attainment. Their experiences revealed the interplay between psychological distress stemming from negative GSI and subsequent physiological difficulties during sexual encounters. Finally, negative genital perceptions served as barriers to sexual satisfaction, with preoccupation over penis size hindering participants' ability to fully engage in and derive pleasure from sexual experiences. Conversely, embracing genital acceptance led to positive changes in sexual satisfaction by fostering self-confidence and positivity, transcending hegemonic pressures.

In essence, these findings indicate that GSI plays a role in sexual well-being. Addressing negative genital perceptions and promoting genital acceptance are

instrumental for fostering positive GSI and promoting sexual well-being. Challenging hegemonic pressures and embracing genital acceptance hold promise for cultivating more positive sexual well-being, aligning with principles of health promotion by empowering individuals to take control of their health and well-being.

Strengths and Limitations

This study is underpinned by two key strengths. First, the employment of IPA contributed to a more comprehensive understanding of GSI by facilitating an in-depth exploration of the research questions and uncovering context-specific insights that might have otherwise remained concealed. IPA allowed for the capturing of the complexity and diversity of participants' experiences, perceptions, and emotions related to GSI and sexual well-being. This approach adds depth to the existing literature by presenting a qualitative understanding of GSI that extends beyond the typical focus on penis size.

Second, adopting hegemonic masculinity as the theoretical framework enhanced the study's depth. This framework shed light on how traditional norms around masculinity influence men's perceptions of their GSI and sexual well-being. By analyzing participants' narratives through the lens of hegemonic masculinity, the study revealed how adherence to these norms impacted men's attitudes towards their genitals and approach to sexual encounters. This framework highlighted participants' internalization and perpetuation of specific hegemonic ideals, revealing instances where participants expressed anxiety or dissatisfaction when they perceived themselves as failing to meet hegemonic standards. Hegemonic masculinity was instrumental in highlighting the complexities of how participants navigate their GSI and sexual well-being in a world shaped by these norms.

However, this study must be considered in the context of its limitations. First, there were limitations in the effectiveness of the theoretical framework in capturing the full complexity of participants' experiences. While hegemonic masculinity offered insights into the influence of societal norms, it overlooked aspects of participants' experiences that deviated from traditional masculine norms. For example, instances where participants adopted genital acceptance challenged the framework's expectation of adherence to hegemonic ideals. Additionally, hegemonic masculinity may oversimplify the diversity of men's experiences by focusing primarily on dominant forms of masculinity, potentially marginalizing those who do not conform to these norms. Therefore, while hegemonic masculinity offered insights, it is important to supplement this framework with alternative perspectives to ensure a comprehensive understanding of men's experiences.

Second, the focus on one university setting may restrict the diversity of perspectives represented in the study, which emphasizes the need to recognize variations in cultural norms and attitudes. Recruitment from a single university may limit the transferability of the findings to broader cultural backgrounds or contexts. Despite this limitation, efforts were made to enhance the transferability of findings through other means.

Third, while efforts were made to recruit a diverse range of participants, there were challenges encountered in achieving full representation across gender and racial identities. Despite targeted recruitment efforts, the sample primarily consisted of cisgender men. While sexual diversity was observed, securing a more gender-diverse sample proved challenging, and the absence of a trans participant highlights a gap in

representation. The limited sample size inherent in IPA studies (Pietkiewicz & Smith, 2014), time constraints, and the complexities of recruiting from underrepresented populations (Wolfe et al., 2023) posed challenges in achieving a fully diverse sample. Further, all participants identified as white, indicating a lack of racial and ethnic diversity in the sample, thus potentially overlooking the experiences of men from diverse racial and ethnic backgrounds. Future research should prioritize inclusivity in recruitment strategies to ensure a more comprehensive understanding of GSI and its implications for sexual well-being across diverse populations.

Finally, my limited prior interviewing experience may have affected the depth and quality of data collected. While effective qualitative research requires strong interviewing skills to establish an environment conducive to sharing personal experiences (Dahlberg et al., 2008), I believe my listening skills helped to establish rapport with participants and create a comfortable interview environment. Future studies can address these limitations to enhance our understanding of GSI and its implications for sexual well-being across diverse populations and contexts.

Implications

The following section explores the theoretical and practical implications of the research findings. This study holds theoretical implications, particularly in revealing the ways in which hegemonic masculinity impacts men's experiences in the context of GSI and its implications for sexual well-being. While hegemonic masculinity did indeed shape participants' experiences, it is important to recognize instances where participants resisted or rejected these norms, exhibiting traits indicative of hybrid masculinities (Barry, 2018). Notably, participants' emotional vulnerability and emphasis on emotional

connection with partners defies hegemonic masculine norms discouraging such expressions, showcasing an evolving understanding of masculinity. Moreover, prioritizing genital acceptance over conformity to societal norms challenges the hegemonic ideal of a "perfect" body, instead fostering a more inclusive understanding of masculinity. This deviation from hegemonic norms underscores men's agency to navigate a spectrum of masculinities in shaping their identity (Barry, 2018). This flexibility reflects the dynamic nature of gender identity, where men's perceptions of masculinity and adherence to societal norms can evolve over time (Messerschmidt, 2018). Ultimately, this study corroborates the notion that masculinities are fluid and transform through individual experiences and social contexts. It acknowledges the existence of multiple masculinities that allow men to draw from various forms, including both hegemonic and alternative expressions (Messerschmidt & Messner, 2018).

This study holds practical implications. First, integrating discussions on GSI into sexual health education programs beginning in adolescence is important. Recognizing the developmental aspect of GSI observed in this study indicates that early education is needed to promote positive GSI among adolescents. Recent studies have already shown promise in raising awareness about the diversity of genital appearances for fostering positive genital attitudes (Laan et al., 2017). These discussions can focus on promoting positive genital perceptions, challenging societal norms, celebrating genital diversity, and cultivating genital acceptance. Considering the positive impact of grooming practices on participants' GSI, educators can further enhance sexual health education by incorporating grooming practices to empower adolescents to take control of their genital appearance and cultivate positive emotions towards GSI. Additionally, considering the influence of

hegemonic masculinity on participants' GSI, sexual health education programs should incorporate discussions on media literacy so adolescents can develop critical thinking skills to challenge unrealistic standards. In universities, sexual health centres could provide informative materials such as brochures, posters, and online resources about GSI, serving as accessible tools for students. These materials can provide information on genital diversity and normality, grooming practices, media literacy, and genital acceptance. By integrating discussions on GSI into early sexual health education programs as well as university health supports, health educators can provide adolescents and young men with continued support to navigate GSI.

Second, providing specialized counselling and mental health support services in universities and communities may be instrumental in addressing the negative emotions and psychological implications associated with GSI. Therapeutic interventions can help men process their emotions, develop coping strategies, challenge negative beliefs, and build acceptance. Building on the study's finding that genital acceptance positively impacted participants' experiences and previous research that fostering acceptance in therapy can enhance GSI (Shahriari et al., 2023), mindfulness and body positivity exercises may assist men in developing a healthier and accepting relationship with their genitals and enhancing their sexual well-being. Further, university health centres and counselling services can offer students a safe space to explore GSI concerns and can facilitate referrals to specialized mental health professionals to address students' specific issues. Leveraging health centres and counselling services both within the community and in universities can provide men with accessible and tailored support to facilitate positive outcomes in GSI, mental health, and sexual well-being.

Third, university-led workshops and campaigns that promote genital diversity and acceptance can contribute to enhancing positive GSI and improving sexual well-being. These initiatives can foster inclusivity, raise awareness, and challenge harmful stereotypes. Campaigns can include posters, social media initiatives, and campus events aimed at promoting positive GSI and sexual well-being. For instance, campaigns could showcase different genital appearances and discuss the normality of variations, thereby dismantling harmful stereotypes and encouraging open dialogue. These campaigns could highlight the positive impact that acceptance and positive GSI have on sexual experiences, thereby providing students with knowledge that may inspire them to adopt more accepting attitudes towards their genitals. Drawing upon the resilience demonstrated by participants, campaigns and workshops can empower men to develop effective coping mechanisms and cultivate a more positive GSI. It is important to ensure that these efforts consider and represent men with diverse genital configurations, including those without penises or with variations in genital anatomy.

The findings of this study offer practical implications for clinicians in supporting men navigating GSI. As primacy advocates for patient care, clinicians can use these findings to enhance the well-being of men grappling with GSI challenges. Professional development workshops and conferences can serve as platforms for clinicians to stay updated on recent research findings related to GSI. Actively participating in professional development can enrich clinicians' knowledge and equip them with the language and informed strategies for addressing GSI concerns. Given the psychological impacts of GSI, integrating these findings into psychoeducational materials and counseling sessions can empower clinicians to provide informed and supportive care. Tailored education

materials, such as clinical practice guidelines and toolkits with evidence-based strategies, can assist clinicians in daily practice to assess and manage GSI issues competently. Additionally, developing structured clinical guidelines tailored to GSI assessment and standardized care practices can ensure consistency in service delivery across clinical settings, offering a systematic framework for evaluation, intervention, and monitoring patients' progress over time. Finally, fostering interdisciplinary collaboration among clinicians, counsellors, researchers, and other healthcare professionals involved in GSI care can facilitate knowledge exchange and mutual learning.

Quality Principles

Authenticity and transferability were two quality principles emphasized throughout this study. Authenticity was prioritized to ensure that the research findings authentically reflected the lived experiences of the participants. It is authentic to the participants in the sense that the study aimed to capture their unique perspectives and experiences without distortion or bias. The authenticity of this the research process and findings was measured through adherence to methodological practices designed to uphold the integrity of participants' voices. Obtaining fully informed consent and fostering trust from the outset laid a foundation for authentic participant engagement. This emphasis on openness and transparency facilitated honest sharing during interviews and contributed to the authenticity of the collected data. Authenticity was also measured through a deep engagement with participants' perspectives. During data analysis, a reflexive approach was maintained to ensure that themes authentically represented participants' perspectives. This involved critically examining biases and assumptions and acknowledging the influence of my positionality on data interpretation. The acknowledgment of researcher

positionality further underscored my dedication to authenticity. The inclusion of verbatim quotes from participants in the findings provided readers with direct access to participants' voices, further enhancing the authenticity of the research findings. These quotes served as tangible examples of participants' perspectives that allows readers to connect directly with their lived experiences. Overall, authenticity was upheld through a thorough and transparent research process that prioritized participants' voices and experiences. Through these efforts, this study aimed to ensure that the research findings accurately reflected the richness and complexity of participants' lived experiences.

Transferability was prioritized to enhance the relevance and applicability of the findings beyond the immediate research context. While qualitative research with a small sample size and the use of IPA methodology prioritizes depth of exploration over generalizability, efforts were made to ensure that the insights could resonate with a broader audience and inform relevant initiatives. The study contextualized the findings within broader societal frameworks (Smith & Osborn, 2008), such as shifting gender norms and the impact of the COVID-19 pandemic, to enhance the relevance and transferability of the findings to similar settings or populations facing similar influences. Furthermore, the identification of common experiences among participants, such as concerns about penis size and anxiety during sexual activity, suggests potential resonance with a broader population of men. Highlighting these shared experiences enhances the transferability of the findings by suggesting that they may reflect common experiences across diverse contexts. Additionally, the alignment of certain findings with existing literature, particularly regarding concerns about penis size, strengthens their potential for transferability. These parallels with existing literature across different populations and

contexts suggests that the findings may reflect broader patterns related to GSI beyond the study sample. Finally, efforts to integrate the study findings into practical initiatives, such as educational programs or university-led campaigns, further extend their potential impact beyond the research setting. These findings can be leveraged to inform the development of more targeted interventions and support systems. Overall, through contextualization within broader frameworks, identification of common experiences, alignment with existing literature, and integration into practical initiatives, the study aimed to enrich the relevance and applicability of its insights in relevant contexts.

Future Research

There are several promising avenues for future research that can deepen our understanding of men's GSI and its implications for sexual well-being. First, addressing the lack of inclusivity in GSI research is crucial. Future studies should prioritize inclusivity by ensuring a diverse participant pool representing different gender identities, races, and cultural backgrounds. By improving recruitment strategies to engage individuals from diverse backgrounds and amplifying the voices of men from marginalized communities, researchers can enhance our understanding of how GSI manifests across various groups and contexts. Prioritizing inclusivity can enrich research outcomes and contribute to a more equitable understanding of GSI.

Second, longitudinal studies can capture how GSI evolves over different life stages. For example, the findings from this study suggest that external factors, such as exposure to pornography, can dynamically influence GSI. Longitudinal studies spanning from adolescence to young adulthood to late adulthood could assess how GSI evolves over time in response to various external influences. This longitudinal approach can offer

a comprehensive understanding of the developmental trajectory of GSI and its implications for sexual well-being throughout different stages of life.

Third, considering the impact of partner perceptions in this study, further research should explore how partner attitudes and communication influence men's GSI and sexual well-being. Understanding how partner dynamics shape GSI can offer strategies for fostering healthier and more supportive relationships. While positive impacts of partner perceptions were identified in this study, exploring potential negative impacts and how partners may exacerbate GSI concerns can provide a more comprehensive understanding of the interpersonal dynamics shaping GSI.

Fourth, assessing the effectiveness of interventions aimed at improving GSI is important. For example, evaluating the effect of exposure to sexual health education programs that discuss GSI could provide insights into their impact on men's GSI and sexual well-being. Measuring changes in GSI beliefs and attitudes before and after participating in these programs can determine the intervention's effectiveness in promoting positive GSI and enhancing sexual well-being. Exploring the mechanisms of change within these interventions can inform the development of more targeted and effective approaches to address GSI.

Fifth, future research should continue to explore how men navigate and negotiate masculinity norms, including the adoption of hybrid masculinities, in relation to GSI. Investigating how adherence to or rejection of these norms, as well as the adoption of hybrid masculinities, influences GSI across diverse demographic groups can deepen our understanding of the relationships between masculinities and GSI. Additionally, exploring potential moderating effects of factors like social support or self-esteem on the

relationship between masculinity and GSI can inform intervention strategies aimed at promoting positive GSI and sexual well-being.

Finally, including discussions on the impact of the COVID-19 pandemic provided a contextual understanding of participants' experiences during the study period. The findings suggest that the pandemic influenced approaches to sexual activity, where the disruptions led participants to re-evaluate their sexual behaviours and adopt new ways of connecting with partners. Importantly, despite facing challenges, participants' GSI appeared to remain consistent throughout the pandemic, which highlights the potential significance of resilience in maintaining GSI. Researching the role of GSI in maintaining sexual well-being while navigating the challenges of the pandemic can help identify strategies for promoting GSI and supporting men in adapting to changing circumstances. Understanding how GSI remains consistent amidst pandemic stressors and influences approaches to sexual activity can inform future research and initiatives aimed at supporting men's sexual well-being.

Knowledge Translation

To share the findings of this study, I will present this research at conferences such as Dalhousie's "Crossroads Interdisciplinary Health Research Conference" and the "Canadian Sex Research Forum." I also wish to publish these results in an academic journal. For participants of this study who indicated on the informed consent form that they were interested in receiving a summary of the results, I will write a plain language summary highlighting the study's key findings and distribute it by email. Furthermore, these findings will contribute to my ongoing research conducted at the Sexual Health and

Gender lab at Dalhousie University by providing insights and informing our work dedicated to 2SLGBTQ+ health and well-being.

Reflections on the Researcher's Experience

Reflecting on my experience throughout this research journey, each stage presented unique insights and challenges that contributed to my growth as a researcher. Recruiting participants was unexpectedly swift, with all five men enrolled within a month. Strategies like distributing flyers in high-traffic campus areas and offering an incentive likely contributed to this success. However, despite efforts for gender diversity, particularly an effort to recruit a trans participant, recruiting in this area was challenging. This raises questions about the accessibility of certain participant pools and highlights the importance of targeted recruitment methods and inclusive practices to ensure representation from diverse communities. Implementing strategies like collaborating with 2SLGBTQ+ organizations or utilizing online platforms may improve accessibility and representation.

During data collection, I experienced a mix of excitement and initial nervousness, especially as I anticipated interviewing participants. This may have been partly due to my limited previous interview experience. Similarly, I sensed initial awkwardness among participants. Anticipating this, I found that welcoming them in the hallway before entering the interview room, offering brief introductions, and emphasizing my genuine interest in the topic helped to establish a safe and comfortable environment for participants. Additionally, being of similar age to the participants may have contributed to both my and their comfort levels, as it may have fostered a sense of relatability. I also believe that conducting the interviews on campus provided a familiar and comfortable

setting for participants. I sensed initial hesitancy from participants in discussing certain topics, such as Dakota seeming guarded when discussing his genital concerns and making limited eye contact. As interviews progressed, participants became more at ease as they began to share more freely and openly about their experiences. Witnessing participants' gradual ease during the interviews revealed the importance of trust-building and rapport development in qualitative research settings.

Contemplating the potential impact of my gender identity on participant responses, I approached interviews with professional neutrality. The prevalence of prior studies on men's GSI conducted by women researchers (e.g., Herbenick et al., 2013; Komarnicky et al., 2019) gave me a sense of confidence and assurance in pursuing this research. While I felt confident in pursuing research on men's GSI as a woman researcher, I maintained a non-judgmental environment. Overall, participants appeared comfortable sharing their experiences with me. Oliver's comment about feeling comfortable discussing sensitive topics shortly after meeting me suggests a level of ease in our interactions. I believe that my status as an "outsider" contributed to fostering a non-judgmental environment. My identity as a woman might have allowed me to elicit more detailed responses from participants, as they did not assume that I had a substantial understanding of their experiences. Further, my outsider status could have made participants more willing to share personal experiences, as our encounter was a one-off event. Ultimately, I believe that embracing my identity as woman enhanced the depth and authenticity of the data collected.

Engaging in reflexivity was important for maintaining the integrity of my research. Continuously reflecting on my biases and assumptions ensured that my

presence did not solely influence data collection or analysis. For example, during interviews, I initially anticipated hearing predominantly negative attitudes about GSI, based on existing literature and societal narratives. However, I was surprised to discover that many participants shared positive aspects of their GSI. Through reflexivity, I challenged this assumption and remained open to participants' narratives, allowing their voices to shape my understanding of GSI. Reflexivity prompted me to challenge preconceived notions and remain open to participants' narratives, thereby enriching the depth and authenticity of the findings.

Based on my experience, I would recommend future researchers in this field, other master's students completing their thesis, or anyone embarking on qualitative research to prioritize listening, understanding, and leading with participants' experiences. Embracing continuous learning and adopting a growth mindset will allow you to remain open to new ideas and perspectives. Whether it is consulting with your supervisor, collaborating with peers, or seeking guidance from the Learning Centre, collaboration can enrich your research experience and lead to better outcomes. Importantly, empower your role as the researcher. As a woman interviewing men on their GSI and sexual well-being, I learned to recognize the unique perspective and empathy I bring to the research process. Your presence as the researcher can foster a safe space for participants to share openly, breaking down barriers and enriching the depth of understanding in your study. Finally, staying resilient and determined will see you through to the finish line.

Conclusion

This study marks a step forward in understanding the implications of GSI for men's sexual well-being. To the best of my knowledge, it is the first qualitative

exploration of this multifaceted relationship. Beyond the confines of previous research that focuses on penis size satisfaction, this research broadens the scope to reveal the multifaceted nature of GSI, impacted by both perceptions of genital appearance and functionality.

Delving deeper, this research establishes the implications of GSI for sexual activity, functioning, and satisfaction. It uncovers the transformative power of rejecting hegemonic masculine expectations, fostering genital acceptance, and promoting positive genital perceptions – turning negative perceptions into confidence and nurturing more fulfilling sexual experiences, healthy sexual functioning, and satisfying sexual lives.

The insights gained from this study call for a shift in how men's GSI is addressed across discourse, academia, health promotion, and societal contexts. Embracing genital diversity, liberated from societal norms, may hold the key to normalizing variation and nurturing greater acceptance, thus fostering a positive cascade effect that enriches men's sexual well-being.

In essence, this study advocates for a more inclusive and empathetic discourse surrounding GSI. By acknowledging and addressing the complexity of GSI, we lay the foundation for a more comprehensive understanding of GSI and its implications for sexual well-being. I hope that my research will be helpful in enhancing health promotion efforts by placing GSI at the forefront and making initiatives more comprehensive, inclusive, and effective in improving sexual well-being for all men.

As this exploration concludes, this study calls for a recognition of the vulnerability and complexity inherent in men's GSI, offering the empathy and support they deserve. Let this be an optimistic proclamation of a future where perceptions of

one's genitals serve as a source of empowerment, where compassionate understanding reshapes our narratives surrounding men's GSI, and where men find the confidence and liberation to fully embrace the pleasures of life.

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Appendix A – Consent Form



Thank you for your interest in our study. Below is some important information about our research, and questions to ensure your eligibility for the study and your consent to participate.

Project Title: Genital self-image: A component of men's sexual health

Lead Researcher:

Samantha McCready,
Masters Student, Faculty of Health, Dalhousie University
Sexual Health and Gender Lab, Dalhousie University
506.977.1327 – sm668554@dal.ca

Co-Researchers:

Dr. Christopher Dietzel, School of Health and Human Performance, Dalhousie University, christopher.dietzel@dal.ca
Dr. Matthew Numer, School of Health and Human Performance, Dalhousie University, matthew.numer@dal.ca

Introduction

We invite you to take part in a research study being conducted by Samantha McCready, a master's student in the Health Promotion program at the School of Health and Human Performance, Dalhousie University. Choosing to take part in this research is entirely your choice. Even if you do take part, you may leave the study at any time for any reason. The information below tells you about what is involved in the research, what you will be asked to do and about any benefit, risk, inconvenience, or discomfort that you might experience. If you have any questions, please contact Samantha McCready at sm668554@dal.ca.

Purpose and Outline of Study

The proposed study explores men's thoughts and feelings about their genitals and the impact their genital perceptions have on their sexual health. We will begin by exploring participants' views on masculinity and their masculine identity. We will then explore men's genital self-image, the various aspects that comprise genital self-image, as well as personal positive and negative experiences regarding one's genitals. We will also explore the role that men's thoughts about their genitals play in men's experiences of sexual activity, sexual functioning, and sexual satisfaction.

To this end, the following objectives are being pursued:

1. Explore men's thoughts and feelings about the appearance and functionality of their genitals

2. Identify the implications of men's genital self-image for their sexual health, specifically their sexual activity, sexual functioning, and sexual satisfaction

Eligibility

You are eligible to participate in this study if you:

1. Identify as a man (i.e., cisgender, transgender, non-binary, gender diverse, Two-Spirit)
2. You are over 18 years old
3. Are a student at Dalhousie University
4. Live in Halifax, Nova Scotia
5. Speak English
6. Are any sexual orientation

How many people are taking part in this study?

We are recruiting up to 10 men for the study.

What will you be asked to do?

You will be asked to participate in a one-on-one interview. First, you will be asked to complete a short questionnaire asking questions about your age, gender identity, sexual orientation, race, and about your sexual activity. Next, you will be asked to answer several interview questions relating to your thoughts and feelings regarding your genitals (i.e., genital self-image), your understanding of and experiences with masculinity, as well as your sexual activity, sexual functioning, and sexual satisfaction experiences. The interviews will be informal, and you are encouraged to speak openly and honestly about your experiences. As it is important to accurately capture your thoughts and experiences, all interviews will be audio recorded. The researcher will request verbal permission to audio record before beginning the interview.

Where will the study take place and how long will it last?

The in-person interview will be held either in a private room in a Dalhousie University library, the private office of Dr. Matthew Numer, or a private room in the Sexual Health and Gender lab at Dalhousie University. Alternatively, interviews may take place off campus in a private room at a Halifax public library. The questionnaire will take about 10 minutes and the interview about 60-70 minutes.

Possible Benefits, Risks, and Discomforts

The risks associated with this study are minimal. We are aware of the sensitive subject matter of this research. There is a potential risk that some interview questions about genital self-image, sexual functioning, or sexual activity may trigger emotional discomfort or distress. Although it is not possible to identify all potential risks in research procedures, the researcher will take reasonable safeguards to minimize any potential risks. We will also guide you to appropriate support services, should you need them. Lastly, it is important to note that you can withdraw from the study at any time for any reason.

Taking part in this study may not benefit you directly, but your participation may help to uncover important information about men's genital concerns and sexual experiences that can be used to inform sexual health researchers, educators, and clinicians.

Halifax Sexual Health Centre
6009 Quinpool Road, Suite 201
Halifax, NS B3K 5J7 (tel) 1.902.455.9656

Dalhousie University Student Health & Wellness Centre (Halifax)
1246 LeMarchant Street, 2nd floor, LeMarchant Place
Halifax, NS, B3H 3P7 (tel) 1.902.494.2171

Pride Health
PrideHealth@cdha.ca, (tel): 1.902.473.1433

Compensation/Reimbursement

You will be compensated \$35 to thank you for your time and for participating in this study.

How will my identity be protected?

Information that you provide in the questionnaire and interview will be kept confidential. The interviews will be audio recorded. Once transcribed, the audio files will be deleted, and the transcriptions will be kept secure on OneDrive, only accessible to the research team. All paper records will be kept secure in a locked filing cabinet located in the Sexual Health and Gender lab at Dalhousie University that is run by Dr. Matthew Numer and where Dr. Christopher Dietzel and I are employed. To minimize privacy risks, paper and electronic records will be deleted after three years. Data will be destroyed by PI McCready.

Your identity will only be known by the researchers. The researchers have an obligation to keep all research information confidential. We will describe and share our findings in academic publications. We will not identify individual participants, but we will use direct quotes from the interview. You will not be identified in our reports. All identifying information (such as your name and contact information) will be securely stored separately from your research information. Instead of your real name, we will use a participant pseudonym (a fictitious name) in our written and computer records so that the research information we have about you does not contain your name. Your participant code will consist of a pseudonym (e.g., Jamie), self-identified gender (e.g., cisgender: C, transgender: T, non-binary: N, gender diverse: D, Two-Spirit: TS), and self-identified sexuality (e.g., gay: G, bisexual: B, queer: Q). During the transcription process, all identifying information will be removed. For example, if you state your name in the interview, it will be replaced with a pseudonym assigned by the PI. Any other names (e.g., friends, family), places (e.g., schools, cities), addresses, phone numbers, and any potentially identifying information will be removed from the transcript.

Any potentially illegal activity you disclose, such as the use of certain substances or commission of sexual assault, will not be reported to authorities. However, if you disclose that a child or vulnerable adult is being neglected or abused, the research team would have a legal duty to report this.

Can I stop participating?

You are free to leave the study at any time. For the questionnaire, you can refuse to answer any question(s), you will have the ability to move back and forth through the interview to edit your answers before submitting, and you may withdraw entirely at any time by informing the researcher and your questionnaire will be destroyed. If you withdraw before completion of the questionnaire, your data will be destroyed, and you will not complete the interview portion.

For the interview, you may also refuse to answer any question(s) or leave the interview at any time. If you choose to withdraw, all data gathered until the time of withdrawal will not be used and will be destroyed. After your interview, you will have 2 weeks to contact the research team and withdraw your data. However, once your responses are de-identified and analyzed, your data cannot be removed. You will still receive the \$35 compensation if you withdraw from the interview before completion.

How can I access the results of the study?

Upon request, we will provide you with a summary of the study results when the research project is completed. No individual results will be provided.

Questions

We are happy to discuss any questions or concerns you may have about your participation in this research study. Please contact Samantha McCready (sm668554@dal.ca) at any time with questions, comments, or concerns about the research study. If you have any ethical concerns about your participation in this research, you may also contact Research Ethics, Dalhousie University at 902.494.1462, or email: ethics@dal.ca (and reference REB file # 2022-6450).

Appendix B – Oral Consent to Participate in Research

Project Title: Genital self-image: A component of men's sexual health

Lead Researcher: Samantha McCready, School of Health and Human Performance, Dalhousie University, sm668554@dal.ca

Introduction: Hello, my name is Samantha McCready. I am currently completing my master's degree at Dalhousie University in the Department of Health and Human Performance. For my master's thesis, I want to explore how university men think and feel about their genitals. I am interested in exploring how men feel about various aspects of their genitals, and the implications that these thoughts have on their sexual health.

Research procedure: If you consent to participate, you will first be asked to complete a short questionnaire that will take approximately 10 minutes to complete. The questionnaire will pose questions regarding your age, relationship status, and sexual experiences. Next, we will engage in a one-on-one interview lasting approximately 60-70 minutes, where I will ask a range of questions about your masculinity, your feelings toward your genitals, your sexual activity, and your sexual health.

Benefits/risks: Taking part in this study may help to uncover important information about men's genital concerns and sexual experiences that can be used to inform sexual health researchers, educators, and clinicians. In exchange for participating in this study, you will receive \$35. You will still receive compensation if you choose to withdraw from the interview before completion.

Data confidentiality/storage: The data you give will form the basis of my master's thesis. Information that you provide in the questionnaire and interview will be kept confidential. Your identity and private information will only be known by myself and my two master's thesis supervisors, Dr. Christopher Dietzel and Dr. Matthew Numer. The interviews will be audio recorded, and once they have been transcribed, the audio files will be deleted, and the transcriptions will be kept secure on my OneDrive. All paper records will be kept secure in a locked filing cabinet located in the Sexual Health and Gender lab at Dalhousie University that is run by Dr. Matthew Numer and where Dr. Christopher Dietzel and I are employed. To minimize privacy risks, paper and electronic records will be deleted after three years.

Your data will be used for my thesis. While your identity will not be revealed in my thesis, I may use direct quotes from the interview. All identifying information (such as your name and contact information) will be securely stored separately from your research information. Instead of your real name, we will use a participant pseudonym (a fictitious name) in our written and computer records so that the research information we have about you does not contain your name. Your participant code will consist of a pseudonym (e.g., Jamie), self-identified gender (e.g., cisgender: C, transgender: T, non-binary: N, gender diverse: D, Two-Spirit: TS), and self-identified sexuality (e.g., gay: G, bisexual: B, queer: Q).

Any potentially illegal activity you disclose, such as the use of certain substances or commission of sexual assault, will not be reported to authorities. However, if you disclose that a child or vulnerable adult is being neglected or abused, the research team would have a legal duty to report this.

Participation: The decision to participate in this study is entirely up to you. You may refuse to take part in the study at any time and your data will be discarded. You have the right not to answer any question in the questionnaire and interview, as well as to withdraw completely from the interview at any point during the process. However, you will only have 2 weeks following their interview to contact me the PI and withdraw your responses.

You have the right to ask questions about this research study and to have those questions answered by me before, during or after the research. If you have any further questions about the study, at any time you are welcome to contact me, by email at sm668554@dal.ca.

Upon request, we will provide you with a summary of the study results when the research project is completed. No individual results will be provided.

Do you have any questions?

Do you agree to participate in this study?

Do you agree to be audio recorded?

[If yes, begin the study.]

[If no, thank the participant for their time.]

Appendix C – Questionnaire

Leave blank. Assigned pseudonym: _____

Please respond to the following questions to the best of your ability. You can skip any questions that you do not feel comfortable responding to.

What year were you born? _____

Which best describes your race/ethnicity? Select all that apply.

- Aboriginal/Indigenous/First Nations
- African Canadian
- Asian
- Black
- Caribbean
- Latinx/Hispanic
- Middle Eastern
- Pacific Islander
- South Asian/Indian
- White
- Another, please specify: _____
- Prefer not to say

How do you identify your gender?

- Cis man
- Trans man
- Queer man/person
- Non-binary
- Gender diverse person
- Two-Spirit
- Other: _____
- Prefer not to say

How do you identify your sexuality?

- Heterosexual/Straight
- Homosexual/Gay
- Bisexual/Pansexual/Other Multisexual
- Queer
- Other: _____
- Prefer not to say

Who do you have sex with? Select all that apply.

- Cis men
- Cis women
- Trans men
- Trans women
- Queer men/people
- Non-binary people

- Gender diverse people
- Other: _____
- Prefer not to say

What is your current relationship status?

- Single
- Dating, but not exclusively
- Dating one primary partner, but also dating others
- Dating one partner exclusively
- Married or cohabitating (living with my partner)
- Other – Please specify: _____
- Prefer not to say

How would you rate your current health on a scale of 1-10? _____

In 1-2 sentences, please explain why you gave yourself that rating:

How would you rate your current mood/mental health on a scale of 1-10? _____

In 1-2 sentences, please explain why you gave yourself that rating:

There are many ways to be sexually active, but the next questions are focused on sexual acts commonly experienced by university students.

How many sexual partners have you had? _____

How often do you engage in partnered sexual activity?

- Daily/almost daily
- Every week
- Every month
- Every few months
- Almost never or never
- Prefer not to say

When engaging in sexual activity with others, how often is it satisfactory for you?

- Almost never or never
- A few times
- Sometimes

- Most times
- Almost always or always
- Prefer not to say

When engaging in sexual activity, either alone or with others, how often do you experience sexual difficulties (e.g., lack of arousal, lack of sex drive, lack of erection, lack of orgasm)?

- Almost never or never
- A few times
- Sometimes
- Most times
- Almost always or always
- Prefer not to say

How often have you masturbated/engaged in solo sexual pleasure weekly within the past 12 months?

- Almost never or never
- Once or twice a week
- Three to five times a week
- Every day
- Multiple times a day
- Prefer not to say

When engaging in sexual activity with yourself, how often is it satisfactory for you?

- Almost never or never
- A few times
- Sometimes
- Most times
- Almost always or always
- Prefer not to say

Appendix D – Guide for Interviews

Semi-structured interviews in qualitative research follow the premise that the interview questions asked will allow participants the flexibility to explore their experiences and to create a space for a co-constructed interview in which both the participant and researcher are actively engaged in the conversation (Patton, 2015). Thus, we have created a list of questions to ask participants if the discussion leads itself to such questions. It would not be beneficial to ask questions consecutively in a questionnaire type fashion but to explore in-depth certain themes brought up by the participants. It is therefore the participants, after the initial question, who direct the interview.

Introduction

Before beginning the interview, the interviewer will tell the participant:

- This interview is semi-structured, which means that we will have an informal conversation rather than a strict interview. The topics covered will focus on men’s masculine identity, their thoughts and feelings toward their genitals, and their sexual activity, sexual functioning, and sexual satisfaction experiences.
- If ever a question is unclear, please ask for clarification and I will rephrase the question.
- You are not required to answer a question if you do not wish to do so. If you do not want to answer a question, please say “pass” to indicate you do not want to respond. You can also end the interview at any time if you become uncomfortable. If you want to end the interview, let me know and we’ll stop immediately.
- Through the course of the interview, you may share some sensitive and/or personal information. I will respect the stories and information you disclose, and I will respect any information you choose not to disclose. If during the interview you share information that identifies yourself or someone else, that information will be discarded or anonymized in the transcript.
- During or after the interview, if you feel that you require support or services, please contact a community organization who can provide you with resources and support. The contact information of different community organizations is provided in the consent form.
- Our research examines the experiences of people who self-identify as a man, including cisgender, transgender, gender diverse, and Two-Spirit individuals. We encourage you to discuss how your gender and/or sexual identities and your other identities factor into your experiences.
- I may ask for your definition of terms or what you think about a certain topic. Please do not worry if the answer you give is the “right” or “correct” response. I want to know what *you* think, your opinions, your perspectives. This interview is all about *you* and *your* experiences. There is no right or wrong answer – we just want to know what you think and what you have experienced.
- Are there any questions before we begin?

Interview Questions

1. **Identity**
 - a. Can you tell me a bit about yourself? (*Prompts* – as a student, an adult, your identity, friend group, social life, sexual and gender identity, interests, family)
 - b. Can you tell me about your gender and sexual identity?
2. **What made you decide to participate in this study?**
3. **Masculinity**
 - a. What does masculinity mean to you? *What words come to mind when you hear “masculinity”? Where did you get your ideas of masculinity?*
 - b. How would you describe your masculinity? What behaviours and traits do you associate with your masculine identity? Why do you think these traits and behaviours signify your masculinity?
 - c. Have you ever felt pressure to conform to certain sexual expectations or behaviors because of your gender identity or perceived masculinity? If so, can you tell me more about that?
 - d. Regarding men’s physical bodies, what cultural or societal messages have you heard about men’s bodies, and how have they affected you?
 - e. Can you tell me about your experiences with sexual partners and how your gender identity or perceived masculinity has influenced these experiences?
4. **Sexual health**
 - a. What does sexual health mean to you?
 - b. How would you describe your sexual health?
 - c. How do you think your perceptions and experiences of masculinity have influenced your sexual health and well-being?
 - d. How do you think societal expectations around masculinity affect your sexual experiences and behaviours?
 - e. Have you ever felt pressure to conform to certain ideas or expectations of masculinity in your sexual relationships? Can you describe how this impacted you?
5. **Genital self-image**
 - a. What do you think the term “genital self-image” means?
 - b. What words would you use to describe your genitals? (if examples are needed – big/small, dick, average)
 - c. What thoughts and feelings do you have about your genitals (*if examples are needed* – size and shape of your penis, scrotum, pubic hair, smell, circumcision status, etc.)?
 - d. How would you describe your satisfaction with your genitals? (*Potential guiding questions* – What aspects of your genitals are you most satisfied with? What aspects of your genitals are you least satisfied with?)
 - e. Describe an experience when you felt positively about your genitals
 - i. What emotions did you feel in that moment?

- ii. *What happened immediately before and after feeling positively about your genitals?*
 - iii. How did these experiences affect your thoughts and feelings towards your genitals? *Long-term positive affect on your genital satisfaction, your sex life, sexuality?*
 - f. Describe an experience when you felt negatively about your genitals
 - i. What emotions did you feel in that moment?
 - ii. *What happened immediately before and after feeling positively about your genitals?*
 - iii. How did this experience affect your thoughts and feelings towards your genitals?
- 6. **Sexual activity**
 - a. Please describe your sex life (frequency, diversity, relationship type, dating apps)
 - b. What sexual activities do you commonly engage in (*if examples are needed* – solo masturbation, watching pornography, naked touching or caressing, oral sex, vaginal penetration, anal penetration)?
 - c. How do you think your perception of your genitals influences your sexual experiences?
 - d. Can you describe any negative or positive experiences you've had related to your genital self-image during sexual activity?
- 7. **Sexual functioning**
 - a. Describe what sexual functioning means to you.
 - b. How do you feel about your own sexual functioning? Including your ability to experience sexual desire and arousal, get and maintain an erection, or experience orgasm?
 - c. Can you describe an experience (with yourself or others) where you experienced positive sexual functioning?
 - i. What feelings did you experience in this moment?
 - ii. *What happened immediately before and after this experience?*
 - d. Can you think of a sexual experience where you experienced a problem with your sexual functioning? (*If examples are needed – regarding getting or maintaining an erection, orgasm, not mentally there, sexual desire*). Have you ever experienced any sexual difficulties, such as premature ejaculation or difficulty getting or maintaining an erection? If so, how did you deal with them?
 - i. What feelings did you experience in this moment?
 - e. Describe how your thoughts and feelings about your genitals impacts your sexual functioning. Can you describe how your level of genital satisfaction affects your sexual functioning?
- 8. **Sexual satisfaction**
 - a. How do you define sexual satisfaction, and what factors do you think contribute to it?

- b. Describe your satisfaction with your sex life
 - i. The frequency or diversity of your sexual activities
 - ii. The quality of your sexual relationships
 - iii. Quality of the physical sensations of sexual activities (e.g., arousal, pleasure, erection, orgasm)
 - c. What influences your satisfaction with a sexual encounter?
 - i. Examples: casual vs long-term partner, presence of alcohol/drugs, genital concerns, perceptions of how a sexual encounter “should” go)
 - d. Describe how your thoughts and feelings about your genitals impacts your sexual satisfaction
9. **Is there anything else that you want to say that’s related to what we discussed? Do you have any lingering thoughts or ideas that you want to share?**
10. **Do you have any questions for me?**