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The Gendered Desirability And Acceptance Of Body Enhancement In Ahodwo, Kumasi, Ghana

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Abstract

Body enhancement is increasingly visible in urban Ghana, yet little qualitative research has asked how it is judged differently for men and women. This study examines the desirability and social acceptance of body enhancement among men and women in Ahodwo, Kumasi. Semi-structured interviews were conducted with 25 participants, including residents and key informants such as a fitness trainer, cosmetic vendors and a health professional, and the data were analysed using reflexive thematic analysis within an interpretivist phenomenological design. Media reports on Ghanaian public figures were used to contextualise the interview findings. Acceptance depended on both gender and the type of enhancement. Participants described women who pursue cosmetic and body-shaping practices, including skin lightening, contouring and augmentation, as meeting with approval, while men who did the same risked ridicule and stigma. Gym-based muscularity was readily accepted in men, but women who became visibly muscular were seen as masculine. Participants also described stigma, concealment, social exclusion and perceived career penalties for visible enhancement, alongside growing tolerance of male grooming. Interpreted through Social Constructionism, Feminist Theory and Hegemonic Masculinity, the findings show that acceptance depends on how an enhancement practice fits prevailing expectations of masculinity and femininity. The study points to the need for gender-sensitive public health messaging and beauty-industry practice in Ghana.

Introduction

Body enhancement, understood here as the deliberate modification of the body's appearance, form or presentation to achieve physical, psychological or social ends, has become a familiar part of contemporary social life (Alsop and Lennon 2017). Cosmetic procedures, aesthetic treatments, skin modification, grooming and fitness practices all reflect a wider cultural emphasis on appearance and on the social value attached to particular bodies. The scale is considerable. The International Society of Aesthetic Plastic Surgery (ISAPS 2025) recorded more than 17.4 million surgical and 20.5 million non-surgical aesthetic procedures performed by plastic surgeons worldwide in 2024, a substantial rise over the previous four years. Women accounted for most of these procedures, but men made up about 16% of the total, so enhancement is not an exclusively female practice.

Formal procedures are only part of the picture. Skin lightening, body shaping, grooming, dieting, exercise and muscle building rarely appear in procedural statistics, yet they matter just as much for understanding how people manage their appearance. Changing media environments, commercial beauty cultures, celebrity imagery and wider expectations about attractiveness all shape these practices (Kwon et al. 2021; Alotaibi 2021). The meaning of enhancement is also not neutral: the same practice can be read differently depending on who undertakes it and on the kind of body it is thought to produce. Studies of gender and appearance show that women and men face different expectations about how they should present and modify their bodies (Alotaibi 2021; He et al. 2023). Body enhancement is therefore more than a matter of personal appearance. It involves the production of bodily ideals, gendered expectations, social approval and limits on acceptable self-presentation.

These processes matter in Ghana, where long-standing ideas about the desirable body now meet globalised media, commercial beauty practices and changing urban lifestyles. Ghanaian research shows that bodily ideals are neither fixed nor reducible to a single Western standard. In a qualitative study of women in Accra and Tamale, Tuoyire et al. (2018) found a preference for a fuller, curvier body, commonly described as “not too skinny, but not too fat”, and participants reported pressure from peers and family about body size. Research among Ghanaian adolescents likewise links body-size ideals and dissatisfaction to perceptions of attractiveness and to media influence (Michels and Amenyah 2017). The same pressures appear in specific enhancement practices. Among shoppers in Kumasi, Owusu-Agyei et al. (2020) found that 40.4% reported current or previous use of skin-lightening products, with use considerably higher among women (56.5%) than men (26.6%), and users were more likely to associate lighter skin with beauty, attractiveness, self-esteem and wealth.

Aesthetic enhancement has also become part of formal medical practice. A retrospective case series from Komfo Anokye Teaching Hospital in Kumasi identified 154 patients who underwent aesthetic surgery in 2021, 95% of them women, with liposuction, Brazilian butt lift, abdominoplasty and mastopexy among the most common procedures (Hoyte-Williams et al. 2026). Research among young Ghanaian adults, meanwhile, links body-self appearance and social-media use to psychological distress, which suggests that appearance-related practices are bound up with social comparison and self-presentation (Oppong et al. 2022). Taken together, these studies show that bodily appearance in Ghana is shaped by cultural, social, commercial and media influences, and that gender remains an important organising principle. They do not, however, tell us how enhancement practices are judged by other people. Evidence about who takes part, and why, does not explain how particular modifications come to be seen as desirable, acceptable, questionable or stigmatised in Ghanaian social life.

This question raises a wider sociological problem about enhancement and gendered social acceptance. The literature has established important patterns in women’s cosmetic enhancement, men’s muscularity and fitness practices, body-image pressures and gendered evaluations of appearance, but these strands have mostly been studied separately (Alotaibi 2021; Lennon and Johnson 2021; Piatkowski et al. 2024; Thornborrow et al. 2020). It therefore remains unclear whether apparent gender differences in acceptance reflect a general preference for certain gendered bodies, or whether acceptance shifts with the type of enhancement. A woman who undergoes cosmetic or body-shaping enhancement may be judged against expectations of femininity, and a man who builds muscle against expectations of masculine strength, while men who adopt practices associated with beautification may face different judgments (He et al. 2023). Desirability and acceptance are specific to the type of enhancement rather than uniform across practices. This matters in urban Ghana, where traditional expectations about gender and appearance exist alongside visible practices linked to global beauty cultures, social media, the fitness industry and aesthetic services. Yet few qualitative studies have examined how people themselves make sense of these boundaries and negotiate the acceptability of enhancement across gender and enhancement type in a single local setting.

This study examines the desirability and social acceptance of body enhancement among men and women in Ahodwo, Kumasi, drawing on the accounts of people who experience, observe or provide enhancement-related services. It does not assume that enhancement is either generally accepted or generally stigmatised. Instead, it asks how participants construct acceptance in relation to gender, the type of enhancement and the meanings attached to particular bodily practices. In doing so, it moves beyond measuring participation in enhancement towards explaining the social processes by which some forms of bodily modification are normalised and rewarded while others attract criticism, stigma or social penalties.

Theoretical framework

Body enhancement is not simply an individual decision to change one's appearance. It is a socially situated practice whose meanings are produced through interaction, cultural expectation and prevailing standards of desirability. Social Constructionism offers a starting point, because it holds that social reality is produced and sustained through shared meanings and patterns of interaction (Berger and Luckmann 2016). On this view, bodies have no inherently fixed meanings; social interpretation makes certain physical characteristics and appearance practices desirable, acceptable, inappropriate or stigmatised. This matters for body enhancement because cosmetic modification, skin lightening, body contouring, grooming and muscle building are all evaluated against broader understandings of attractiveness and respectability. Those understandings differ across settings. Alotaibi (2021) found that women make up the large majority of cosmetic surgery patients worldwide and generally show greater familiarity with, and acceptance of, cosmetic procedures, while Thornborrow et al. (2020) identified substantial cross-national differences in men's desire for muscularity. Such differences suggest that aspirations towards particular body forms are shaped by social and cultural environments rather than being experienced or judged in the same way everywhere. In Ghana, changing urban lifestyles, digital media and celebrity culture have increased the visibility of skin lightening, body shaping and fitness-oriented practices (Anani et al. 2024; Dennis 2018). Social Constructionism therefore allows this study to ask not only which forms of enhancement participants consider desirable, but also how meanings of desirability and acceptance are collectively produced in a particular urban setting.

The social construction of bodily desirability is closely tied to gender, which makes Feminist Theory central to interpreting enhancement practices. Feminist scholars have long argued that women's bodies are subject to intensive social observation and regulation, with appearance often serving as a basis for judgments of femininity, respectability and social worth (Bordo 2020). Women's heavy participation in cosmetic enhancement can therefore be understood as more than individual preference; it also reflects an environment in which certain kinds of appearance work are normalised and rewarded. Alotaibi (2021) found that women's participation in cosmetic enhancement far exceeds men's internationally, and noted the growing influence of social media and shifting cultural expectations. Gendered expectations do not operate only through women's bodies, however. He et al. (2023) found that men who engage in beautification may be judged more harshly than women who do the same, which indicates that

appearance practices are evaluated against gender-specific norms. Acceptance, then, depends not simply on whether a practice improves appearance but on whether it is seen as consistent with the gender identity of the person undertaking it. Feminist Theory draws attention to the unequal regulation of men's and women's bodies, and it also leaves room to ask how these expectations change as appearance practices become more visible. In this study it is used to examine how participants describe approval, criticism, stigma and other social responses to enhancement, and how those responses reflect wider expectations of femininity and masculinity.

These gendered expectations become especially clear in the contrast between cosmetic and fitness-oriented enhancement. Hegemonic Masculinity Theory helps explain why some forms of male enhancement are encouraged while others are treated as inappropriate. Connell (1995) and Connell and Messerschmidt (2005) conceptualise hegemonic masculinity as the culturally dominant pattern of masculine practice, which sets expectations around strength, physical competence and bodily control. Research on men's muscularity is consistent with this account, identifying traditional masculine norms, media influence and interpersonal pressure as important drivers of men's pursuit of muscular bodies (Thornborrow et al. 2020). Piatkowski et al. (2024), however, suggest that muscular ideals are increasingly relevant to both men and women, which implies that the boundaries around gendered body ideals are not entirely fixed.

This points to an analytical tension. Muscular enhancement may reinforce conventional masculinity when men pursue it, yet challenge conventional femininity when women do, and cosmetic or beautification practices may be read differently depending on who undertakes them. Taken together, Social Constructionism, Feminist Theory and Hegemonic Masculinity suggest that the social acceptance of body enhancement should not be treated as a single, uniform attitude towards bodily modification. Acceptance may instead vary with the interaction between gender, the type of enhancement and prevailing cultural expectations of appropriate masculine and feminine appearance. Existing work has examined women's cosmetic enhancement, men's muscularity and gendered judgments of beautification largely as related but separate topics, leaving unclear how these patterns operate together within one sociocultural setting. This study addresses that gap by examining how men and women in Ahodwo, Kumasi, construct the desirability and social acceptance of different forms of body enhancement, with particular attention to the gendered boundaries, social judgments and consequences attached to these practices.

Methods

Design and philosophical approach

The study used a qualitative phenomenological design within an interpretivist paradigm, which suited its aim of understanding participants' lived experiences and the socially constructed meanings they attach to body enhancement (Bush et al. 2019; Pervin and Mokhtar 2022). Interpretivism was appropriate

because desirability and acceptance are not objectively measurable properties but socially negotiated judgments that vary across individuals and groups (Merino et al. 2024).

Study setting and participants

The study was conducted in Ahodwo, a mixed-use residential and commercial neighbourhood in the Kumasi Metropolitan Assembly, Ashanti Region, Ghana. Ahodwo was chosen for its concentration of beauty salons, cosmetic outlets, skincare centres and fitness facilities, and for its socio-economically and ethnically diverse population. Together these features make it a naturalistic setting in which body enhancement is prominent and socially embedded. Participants were adults aged 18 years or older with direct or indirect experience of non-surgical body enhancement. They were recruited through a combination of purposive, convenience and snowball sampling (Creswell 2011). The analytic sample comprised 25 participants, including key informants (a fitness trainer, cosmetic-product vendors and a health professional). The sample therefore included consumers, providers and observers of body enhancement.

Data collection

Data were collected through semi-structured, in-depth interviews at beauty and fitness service points. Interviews followed a flexible guide covering participants' experiences on how enhancement is viewed differently for men and women. With participants' consent, interviews were audio-recorded and transcribed verbatim.

Data analysis

Transcripts were analysed using Braun and Clarke's (2006) six-phase reflexive thematic analysis. Coding combined a deductive framework built around the study's objectives with inductive codes that emerged from repeated reading of the transcripts. Related codes were merged into broader themes and sub-themes. Divergent or contradictory accounts were retained and reported rather than resolved into a single dominant narrative. To strengthen the credibility and context of the findings, media reporting from the Ghanaian entertainment and health sectors on public figures' documented experiences of body enhancement was also used. This material is not peer reviewed; it served as a corroborating source, cross-referenced against the interview themes and not substituted for them.

Ethical considerations and trustworthiness

Informed consent

was obtained from all participants before data collection, with assurances of confidentiality, anonymity and voluntary participation, in line with the American Psychological Association (2020) ethical guidelines. Participants are identified in this paper by non-identifying codes (P1–P25). Trustworthiness

was supported by methodological triangulation (interviews, informal provider accounts and media corroboration), pretesting of the interview guide, and reflexive attention to the researcher's own positioning throughout the analysis.

Findings

The analysis produced four interrelated themes concerning the desirability and acceptance of body enhancement: (1) gendered patterns of social acceptance, (2) masculinity and the limits of acceptable male enhancement, (3) a moral hierarchy of enhancement practices, and (4) changing norms, visibility and the consequences of enhancement. Across all four, participants described acceptance as conditional rather than uniform. The social meaning of an enhancement depended not only on whether a person altered their body but also on the type of enhancement, the gender of the person undertaking it, and whether the result was seen to meet prevailing expectations.

Gendered patterns of social acceptance

Participants described body enhancement as more acceptable for women than for men, provided it matched conventional ideals of feminine attractiveness. Women's enhancement was said to attract praise, encouragement and positive attention, whereas comparable practices among men were more likely to meet with questioning or ridicule.

P4 contrasted the responses that women and men receive:

If a woman engages in body enhancement in a society, I would say 10 out of 10 times, they get the praise… And if a man engages in such a thing… 5 out of 10 times, they get the praises from their own male side. But on the side of a female, it's going to be really less.

P9 made a similar point: "Women, they would get it and they are all like, oh, you look good, you look this. But men, they are like, ah, but you are okay, why are you doing this?… So, women get it easier."

The health professional agreed: "It is quite acceptable for a woman or a lady to engage in such activities than for a man… when a male goes in for that, societal culture is not really encouraging."

Others echoed these views. P14 thought women's enhancement was more widely accepted and noted that men may themselves encourage women to improve their appearance. P17 described enhancement meant to make women more beautiful as generally accepted, and P18 put the difference in acceptance at "60–40" in favour of women. P18 added that some male grooming practices, including hair braiding and piercing, drew more criticism than the same practices among women.

Participants did not, then, see acceptance as evenly distributed between the genders. Women's enhancement was seen as compatible with established expectations of how women should look, while men faced narrower expectations of what an acceptable masculine appearance allows.

Masculinity and the limits of acceptable male enhancement

Whether male enhancement was accepted depended on whether a practice was seen to conform to or depart from conventional masculinity. Practices associated with femininity, or with perceived gender non-conformity, were described as provoking strong negative reactions.

P10 stated: “Males normally undergo these procedures to become like the opposite sex… a male doesn’t do BBL. A male doesn’t do boobs enhancement… it is not easy trying to be a transgender. You are totally not really accepted.”

P4 described the reaction to men who wear makeup in ways conventionally associated with femininity:

Any man that you see, a man who is wearing makeup with red lips… and eyelashes… the person looks weird in the society. He looks weird. But if a lady does the same thing… they get a lot of praises.

P19 described the labelling that can follow male gender non-conformity:

If a man wears a skirt or… puts on feminine stuff on their body, society terms that particular man as maybe a gay or something… if a woman does what men do, there wouldn’t be much tag on the woman. But when a guy does that, the tag is going to be noticeable.

P20 likewise described some forms of male enhancement as still regarded as “a no, no, no”, even though participants saw male grooming becoming more visible.

Participants also distinguished between male enhancement that challenged conventional masculinity and enhancement that reinforced it. Muscularity and gym-based body building were generally viewed positively in men.

P8 observed: “Society likes six-packs. They would hail you, oh, you’ve done your best… For a man, I don’t think they really have so much reaction from society.”

P17 said: “If a male goes to the gym and becomes bulky, in our local dialect, we call him a macho man… being bulky and muscular, that one is normal to the males.”

This acceptance did not extend equally to women. The gym trainer described how gym-based muscularity had historically been associated with men, and how reactions changed as more women entered gym spaces:

It was mostly the guys going to the gym to look muscular… when it started that the ladies are also tripping in going to the gym… it sparked a whole lot of conversation… they think you want to be a macho woman.

P8 recalled women being questioned in similar terms: “Ah, why are you going to the gym? You become like a man. You become so tough.”

Participants thus separated enhancement as a general practice from enhancement as a gendered bodily outcome. Muscularity was treated as legitimate in men but could draw negative reactions when women were seen to become too muscular. Male enhancement, conversely, became contentious when it was thought to produce a feminine appearance or to challenge conventional masculine presentation.

A moral hierarchy of enhancement practices

Beyond gender, participants ranked enhancement practices by their perceived legitimacy, healthfulness and moral acceptability. Gym-based exercise and muscle building were generally seen as legitimate because they were linked to effort, discipline, health and natural bodily development. Tattoos, piercings, bleaching, injectable or chemical enhancement and surgery were more likely to attract moral or social criticism.

P2 contrasted gym-based enhancement with tattooing: “If someone goes to the gym, people appreciate the person because the person is one healthier… but then if it’s something like getting a tattoo… people tend to frown.”

P8’s remark about six-packs, quoted above, expresses the same approval of muscular development. Tattoos and piercings, in contrast, were described as prompting negative assumptions about a person’s character.

P8 stated: “For tattoos, if you’re in society now. They think that you are devil’s acolyte or something… once you have a tattoo, once you have a piercing, you are a bad person.”

P10 described similar reactions to certain forms of male appearance modification: “Especially a male guy having a tattoo, braiding, rasta. You are being termed as a street person… not to really hold honourable positions and rules.”

P14 added: “So it doesn’t give positive remarks about you. For example, it doesn’t make you like a role model.”

Participants also described visible enhancement as a basis for assumptions about danger, sexuality or respectability. P14 illustrated this with an example from public transport:

So for instance, if you are in a trotro with only males who are just like that, I don’t think we’d want to enter inside because you might think that probably they might be dangerous people or something. And then for the women to also feel they also have a particular way of stereotype or they just give them a feeling that this person is, let me say, a baddie or a prostitute or something. Just because of how you dress, the things you’ve done to your body and all of that.

These accounts describe a hierarchy in which some practices were tied to valued qualities such as health, discipline and effort, while others were tied to artificiality, immorality, danger or deviance. Acceptance therefore depended not only on gender but also on the perceived method and meaning of the enhancement.

Changing norms, visibility and the consequences of enhancement

Although participants described persistent restrictions on male enhancement, they also saw signs of change in attitudes towards grooming and appearance practices that had become more visible through celebrities, social media and everyday exposure.

The health professional observed:

Now we find men also wanting to be known… one person doing his hairline, trying to look fine… this is something that actually influences people to also go in, especially the news, for such things. But previously, it wasn't so.

P14 also noted the growing visibility of male grooming: "You find the males braiding their hair, they are in dreadlocks, they have tattoos on their skin, they've pierced their nose."

Participants linked these changes to the visibility of public figures, including footballers, musicians and other celebrities. P20's own experience with beard enhancement showed how appearance modification is being absorbed into men's everyday grooming. P20 also suggested that acceptance may be cyclical rather than linear: a practice could become popular, later draw moral criticism, and then regain acceptance. The boundaries of acceptable enhancement therefore appear not to be fixed. Greater visibility may widen the range of accepted practices, although participants still described social judgment of practices seen to cross gender or moral boundaries.

Participants also described consequences when enhancement was seen as excessive, inappropriate, unsuccessful or unacceptable. These included social distancing, exclusion from religious communities, stigma and perceived limits on employment.

P6 described social and religious exclusion: "Sometimes even the church, they lose, like, you cannot even go to the church again… people will start withdrawing from you because, really, people don't want to be associated with people that do not have good records."

P11A described the experience of a woman whose bleaching had left visible changes to her skin: "She has been over-accepted. And she can't even get close to people to the extent that she has to wear the same kind of dress every day."

Participants also perceived occupational consequences. P13 stated: "Economically too, you cannot go to some professional spaces… If you have gone to pierce or tattoo or something, there are some places

that you cannot work; it is totally unacceptable. So it affects your economic flow."

P19 made a similar observation: "If you're looking for certain opportunities, there are certain organisations that wouldn't accept you because you've done multiple piercings… it can affect you maybe career-wise or something."

Besides these externally imposed consequences, participants described strategies of concealment, selective disclosure and personal reconsideration. Media accounts of Ghanaian public figures indicated that some had concealed enhancement procedures because they expected criticism, including criticism framed in religious or moral terms. These accounts were consistent with the interpersonal patterns participants described, but they do not establish those patterns independently.

P20 also reconsidered his own enhancement experience: "Now I want to look younger again, honestly… I'm not sure I'll do it again."

Overall, participants described acceptance as something negotiated over time, with changing levels of visibility and approval alongside continuing risks of stigma, concealment, social exclusion and occupational penalty. Enhancement could be desirable to the individual and socially contested by others at the same time.

Discussion

The findings show that the desirability and acceptance of body enhancement among men and women in Ahodwo are neither uniform nor determined by gender alone. Participants described greater social approval for women's cosmetic and body-shaping enhancement, while men's enhancement drew more scrutiny when it was associated with femininity or gender non-conformity. Gym-based muscularity, by contrast, was generally accepted in men, whereas women who developed pronounced muscularity could be seen as becoming masculine. Acceptance was thus organised around the interaction between gender and type of enhancement, not around enhancement as a single category. Participants did not reject male enhancement outright: grooming practices such as hairline restoration and beard enhancement were described as increasingly acceptable. The pattern is conditional. Enhancement is rewarded when the resulting body is seen to fit established expectations of femininity or masculinity, which supports treating acceptance as a negotiated social judgment rather than a fixed attitude to body enhancement.

Participants' accounts also help explain why they interpreted enhancement in such differentiated ways. Residents and participants connected to fitness and cosmetic-service settings described enhancement through everyday experiences of appearance, social interaction and observation of other people. Their judgments were rarely about the physical modification alone. They tied particular practices to health, discipline, attractiveness, respectability, morality and character. Gym-based enhancement was viewed favourably because it signalled effort and health, whereas tattoos, piercings, bleaching and some surgical or chemical practices could attract assumptions of danger, immorality, artificiality or deviance. Stronger sanctions fell on men who adopted practices seen as feminine, while women were given more

latitude to pursue conventional attractiveness. Participants seemed to be applying socially learned standards of appropriate appearance and not a common standard for all modification. The reaction to women entering gym spaces is telling here, because it shows that even a generally legitimate practice becomes contested when its bodily outcome challenges gender expectations. The growing acceptance of male grooming points the other way: practices become normalised when they improve masculine presentation without seriously unsettling gender boundaries. Everyday judgments of this kind both reproduce the boundaries of acceptable appearance and, in some cases, gradually renegotiate them.

The Ghanaian and Ahodwo setting is central to reading these responses. Body enhancement here is negotiated in an environment where changing beauty practices, social media, celebrity culture, fitness, religious values and established expectations of respectability coexist. That helps explain why greater visibility has not produced uniform acceptance. Participants' accounts of tattoos, piercings, bleaching and some cosmetic procedures show that bodily modification can be judged morally and religiously as well as aesthetically. The reported consequences, including social distancing, exclusion from religious spaces, concealment and perceived employment restrictions, show that judgments about appearance can reach into wider questions of social inclusion and opportunity. These findings agree with Ghanaian research showing that body ideals are shaped by family, peers, media and changing appearance norms (Michels and Amenyah 2017; Tuoyire et al. 2018). Evidence from Kumasi on the widespread use of skin-lightening products and on gender differences in their use and associated perceptions of beauty (Owusu-Agyei et al. 2020) points the same way, and the hospital evidence on aesthetic surgery shows that formal enhancement is present in the local setting, although it concerns participation in procedures and not their social acceptance (Hoyte-Williams et al. 2026). The present study adds to this work by showing how enhancement practices are evaluated in everyday Ghanaian interaction. Participants did not simply adopt global beauty practices; they negotiated them through locally meaningful expectations about gender, morality, religion, respectability and social opportunity.

The three theoretical perspectives help explain these patterns. Social Constructionism accounts for how the meanings of enhanced bodies arise through social interaction and collective interpretation rather than from the modification itself (Berger and Luckmann 2016). The contrasting evaluations of gym-based enhancement, cosmetic practices, tattoos and piercings show that the same general act of modifying the body takes on different meanings depending on how it is socially classified. Feminist Theory explains the gendered organisation of those meanings by pointing to the regulation of women's appearance and the expectations attached to femininity (Bordo 2020). The findings extend this perspective by showing that men's bodies are regulated too, although the strongest sanctions appeared when male enhancement was seen to depart from conventional masculinity. Hegemonic Masculinity Theory explains why muscularity and strength are more readily accepted in men, while practices associated with femininity can attract stronger sanctions (Connell 1995; Connell and Messerschmidt 2005). It is also consistent with the criticism women faced when muscularity was seen to make them masculine. The perspectives work together: Social Constructionism explains how meanings are produced, Feminist Theory how they are regulated by gender, and Hegemonic Masculinity why particular forms of male enhancement are permitted or restricted. Acceptance of body enhancement, on this

reading, is produced through gendered processes of classification in which bodies are judged against culturally recognisable standards of masculine and feminine presentation.

The findings confirm some established patterns in the literature and qualify others. The greater acceptance of women's cosmetic enhancement matches Alotaibi's (2021) systematic review, and the stronger scrutiny of male beautification is consistent with He et al.'s (2023) evidence on gendered judgments of beautification. The acceptance of men's muscularity accords with Lennon and Johnson's (2021) account of the continuing influence of masculine norms on men's muscularity practices, and with Thornborrow et al.'s (2020) evidence that men's muscularity aspirations are shaped by sociocultural context. The findings qualify Piatkowski et al.'s (2024) observation that muscular ideals are becoming more gender-neutral, because participants in Ahodwo still attached distinct gender meanings to muscularity. They also show that acceptance cannot be inferred from participation alone: the same practice may be accepted, criticised or stigmatised depending on its gendered meaning and its perceived fit with local expectations. The growing visibility of male grooming that participants described is broadly compatible with evidence of rising male engagement with aesthetic practices (Walther et al. 2024), but it also shows that greater visibility does not necessarily remove underlying gender boundaries. The study thus offers an understanding of acceptance that treats cosmetic, grooming and fitness practices together in one sociocultural setting. This is important in Ghana, where existing studies have documented changing body ideals and enhancement practices but paid less attention to how people negotiate their social acceptability across gender and enhancement type (Michels and Amenyah 2017; Owusu-Agyei et al. 2020; Tuoyire et al. 2018). The central contribution is to show that body enhancement in Ahodwo is not simply becoming more or less accepted; the conditions of acceptance are themselves socially constructed, gendered and open to change.

Limitations

The study has several limitations. The sample was drawn from a single urban locality, Ahodwo in Kumasi, using non-probability sampling, so the findings should not be generalised to Ghana as a whole or to rural populations. The media material used for context and corroboration may reflect public-relations or editorial framing and was not treated as representative of the wider population. Finally, because body enhancement can be a sensitive and stigmatised topic, participants may have moderated their responses, so social desirability bias is possible. These limitations should be kept in mind when interpreting the findings and judging their applicability beyond the study setting.

Conclusion

The social meaning of body enhancement in this study was shaped less by the enhancement itself than by the gendered expectations attached to particular bodily practices. In Ahodwo, acceptance is conditional: practices that affirm culturally recognised forms of femininity or masculinity are more readily legitimised, whereas those seen to cross gender boundaries are more vulnerable to stigma. These boundaries are not fixed, as changing media, grooming and fitness practices open up new forms

of bodily presentation. For public health messaging and beauty-industry practice, the findings point to the value of gender-sensitive approaches that recognise how differently the same practice can be judged for men and women. The single-site, non-probability design and the possibility of socially desirable responses limit how far the interpretations can be generalised. The broader implication is that understanding body enhancement requires attention to the social rules by which bodies are judged, rather than treating desirability or acceptance as inherent characteristics of men or women.

Declarations

Ethics approval:

Ethical approval for this study was obtained from the Humanities and Social Sciences Research Ethics Committee (HuSSREC) under reference number HuSSREC/AP/508/VOL 5. And the study was conducted in accordance with ethical standards of the America Psychological Association(2020).

Consent to participate:

Informed consent was obtained from all participants before data collection.

Conflict of interest:

The authors have declared that there is no conflict of interest regarding this manuscript.

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Author Contribution

Lisa Yeboah wrote the main manuscript text and Prof. Jonathan Mensah Dapaah supervised the work and critically reviewed the manuscript.

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Data Availability

The data that supports the findings of this study are transcribed interviews with particpants. The datasets are not publicly available due to ethical restrictions and to protect participant confidentiality as per ethics approvals.

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