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Media, Eating Disorders, and Turkish Londoners: A Cross-Cultural Analysis

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1. ABSTRACT

Eating disorder is a worldwide phenomenon most significantly affecting women. This research studies three body image-related types of eating disorders: Anorexia Nervosa, Bulimia Nervosa, and Binge Eating. Although they have distinctive symptoms, they may be experienced in combination. This study investigates the socio-cultural aspects of eating disorders, namely body image, media impact, cultural pressure, and social pressure on women. The target cohort of the research is Turkish Londoner women between the ages of 18 and 24. It aims to explore how cross-cultural living affects eating disorders and body image cognition and behaviours. The methodology of this dissertation essay is grounded on critical realism epistemology, since it allows the study of eating disorders as a reality independent of the human mind, but also as an attribution of the human mind in the form of meanings and values in the experiences. This research employs interpretative phenomenological analysis (IPA), which mainly concerns the redefinition and interpretation of ED by individuals, rather than the reality of eating disorders existing independent of the individuals. In the process of data collection, IPA allows the researcher to get insights into the 'lived experience' of participants through interviewing. The research findings reveal unique aspects of the eating disorder experiences of six Turkish female Londoners. In the context of body image building and media impact on the self-perception of the body, the participants are in line with the popular discourse. When it comes to comparing the environment in London to that in Istanbul, the participants find the Istanbul culture as more of a hardliner of socio-cultural pressure. The controversy found is that they still suffer eating disorders and negative body image in London, where the pressure is found to be much lower. The research argues that the persistence is due to the participants' dependence on their home culture, leaving out the relax environment in London. Whether the perception of the relax environment in London typically relates to the reality of the socio-cultural environment in the city or to the feeling of being free from the external pressures in the home culture merits further inquiry.

2. INTRODUCTION

2.1 Eating Disorders

Eating Disorders (ED) can be described as serious illnesses that occur with anxiety and irregular eating habits to control one's body image. Among the most common types of EDs are Anorexia Nervosa (AN) and Bulimia Nervosa (BN), which are mostly accompanied by a third ED, the Binge Eating Disorder (BED). Today, it is acknowledged that EDs are psychological problems that occur frequently and threaten a wide portion of the world population, mostly women (Fairburn, Cooper, Doll, Norman, & O'Connor, 2000; Herzog & Eddy, 2007). The global estimations for people having Anorexia Nervosa are 10 million for women and 1 million for men, whereas BN patients reach up to 25 million (Shisslak, Crago, & Estes, 1995).

These numbers comply with the findings of the American Psychiatric Association (APA) (1994), asserting that EDs affect women ten times more than men. The estimations suggest that 4% to 22% of females between the ages of 18 and 24 are affected by EDs (Collins, Kreisberg, Pertschuk, & Fager, 1982; Pyle, Neuman, Halvorson, & Mitchell, 1991), and the occurrence rate is rising persistently. The ratio of DSM-IV level BN among women is 1.7% to 2.3% (Keski-Rahkonen, et al., 2009), and with the addition of non-clinical cases the prevalence ratio becomes much higher. The findings by Wilfley, Agras and Taylor (2013) suggest that among college women, the clinical cases amount to 1-2%, whereas the subclinical cases are around 2-5%. ED is also referred to as a "lifestyle disease" because it is caused by unhealthy nutrition and consumption habits (Narayana, Pati, & Vrat, 2012, p.2).

2.1.1. Anorexia Nervosa

AN was defined as a psychiatric disorder by the APA (2000) to define patients' anxiety over their body image, which leads them to refuse eating in order to avoid weight gain in an

extreme manner. Patients with AN do not lose their appetite; but they choose to avoid nutrition because they are afraid of gaining weight (Bruch, 1982). AN first occurred in the 1960s among the middle and upper classes of the Western societies (Polivy & Herman, 2002). AN is a very dangerous disease in comparison to the other psychiatric disorders since it has the highest mortality rate. To put it in simple terms, AN patients are obsessed with becoming thinner even though they are already below their ideal weight (Heaner & Walsh, 2013). According to DSM-IV-TR, people with “significantly low body weight” suffer AN.

2.1.2 Bulimia Nervosa

While AN first emerged in the 20th century, BN can be traced back to Ancient Rome. In Ancient Rome, bulimia was considered as an indicator of wealth (Halmi, 2003). BN also aims to control weight gain by intentional discharge, mostly vomiting after binge eating (Heaner & Walsh, 2013). BN is defined by the APA (2000) as uncontrolled overeating episodes followed by their compensation via improper acts such as vomiting or the use of laxatives. However, not every cycle of overeating and vomiting is considered as BN. The DSM-IV-TR brings standards for the frequency of self-induced discharge to diagnose BN, by which it should happen at least twice a week in the last three months.

2.1.3 Binge Eating Disorder

Binge eating is usually associated with BN but it is also related to AN (Garner, 2002). This is simply because AN and BN are clearly distinctive categories, while binge eating behaviour can be seen in AN as well as in BN, for people with a strict minimum diet lasting a long time, that is, AN, start eating significant amounts when they stop their diet. According to the definition of the APA in DSM-IV-TR, a binge episode involves consuming unusually large amount of food and experiencing loss of control (Anderson, Lavender, & De Young, 2010). However, the criteria do not help identify BE clearly, since people may and actually do define the amount large even when it is objectively not. A feeling of loss of control may lead them to define the amount as such (McFarlane, et al., 2016). In relation to the feeling of loss of control, there is evidence suggesting that binge episodes are planned by the individuals themselves (Anderson, Lavender, & De Young, 2010).

Therefore, the amount of food and the loss of control interact and generate statements and self-evaluations in combination.

2.2 Body Image

People's self-perception of how they look is considered as their body image (BI). Body image is integral to the construction of one's self-esteem, as well as mental health (Harter, 1998; Altabe & Thompson, 1996). BI has two components: body image investment and body image evaluation. The former refers to the extent to which people attend to their bodies cognitively, as well as behaviourally (Cash & Pruzinsky, 2002, p.510), whereas the latter is about the satisfaction one has of his/her body image. BI evaluation can determine the extent of BI investment. Women were found to be more critical of their body image, so they invest more in how they look than men (Brown, Cash, & Mikulka, 1990; Cash, Melnyk, & Hrabosky, 2004). Although this and similar statements describe the typical gender difference in the 1980s and 90s, changing behaviours have lately been observable with men. However, the academic circles have not shown interest in studying the BI of men since the time the concept of metrosexual has gained popularity in mass media (Sohn, 2009).

The current research paradigm takes the BI phenomenon "… as an internalized view of one's appearance that drives behavior and influences information processing" (Altabe & Thompson, 1996, p.171), which finds its roots in the 'idealised images of the body', as 'thin' for women and 'muscled' for men. The idealisation commonly occurs with the enactment of social comparison and by social pressure.

2.3 Media and Its Impact on the Internalisation of BI

Media influence is hardly an autonomous form that has the power of dragging people to misconception of BI. Rather, it makes use of practices available in real life. The mass media can only have the power of repercussion and re-enhancement of the culturally constructed patterns of BI, as well as many other things. It carries what other people think about one's BI and the beauty standards to a large scale, and can have an impact on decision-making. People are influenced by other people's opinions, which has been

studied using theories such as the bandwagon effect, the third-person effect and social learning. The bandwagon effect has been studied as a method for making propaganda. It is based on the idea that seeing others positioned against or in favour of something influences people's decision-making and facilitates their persuasion (Lee & Lee, 1939).

The theory of third person effect sheds light on the interplay between media and 'other people' in the study of influence on individuals. The theory hypothesises that media messages are perceived by people to exert stronger effect on others. For example, viewing that other are more affected by violence on TV, individuals go ahead and support restrictions on the broadcast of violence on TV, which implies that the third person effect is issue bound (Salwen & Dupagne, 1999). Conducted in a setting in Nepal, Gunter and Storey's study (2003) investigated the effect of a maternal health campaign broadcasted as a series of radio drama and addressing clinical healthcare employees. The researchers first inquired the effect of the campaign on women in the general population and found no direct impact. But, they explored changes in the attitudes and behaviours of women when the messages were mediated by the employees. Although the text does not mention it, it is crucial to consider that the employees might have been viewed as specialists by the women. This may be associated with the position of celebrities viewed on TV, rather than attributing the power of influence generically on media.
From a different point of view, the employees might have shown greater self-esteem, which is the topic of a research conducted by David and Johnson (1998) among female college students with their response to idealised media images. The research findings suggest that individuals with higher self-esteem perform the third person effect greater. The research explores that two distinctive processes occur: one is the effect of media on the self and others in association with self-esteem, and the other is directly related to the level of self-esteem, and therefore, limited to the self.

The idealised images do not only affect a targeted audience, but are embedded in occupation-based stereotypes presented as cultural ideals in the society. Garner and Garfinkel's (Garner & Garfinkel, 1980) study of dance and modelling students and a control group have shown that AN is much more common among dance and modelling students. Being cautious to establish direct relations between AN and cultural ideals, the researchers argue that "Although it may appear superficial to ascribe to cultural ideals a role in the development of anorexia nervosa, the potential impact of the media in establishing identificatory role models cannot be overemphasized" (p.652). Note that the

identificatory role models are not created by media, as the communication studies have agreed since the time the research was carried out.

According to research, media has a two-fold effect: It spreads the BI of slim woman as ideal and causes psychological problems such as anxiety for fears of not reaching that ideal. The influence of these beauty and fashion mainstream ideas is that they inspire female college students to be underweight both directly and indirectly by influencing one another, according to Harrison and Cantor (1997). The ideals inspired are presumed by individuals very hard to achieve, as surveys indicate. McCabe, Butler and Watt (2007) have inquired how people concerned with BI estimate their body size. Working with 60 men and 60 women, the research has found that men overestimated chest, waist, and thighs, and women overestimated all body parts.

BI messages are conveyed not only visually but also verbally. Fouts and Burggraff (1999) have analysed prime-time situation comedies on TV by employing content analysis. The research has found that the female characters below average in weight are overrepresented and the comments they receive from male characters about their weight and body share are more positive than the over average female characters. In a follow-up study, the researchers have also investigated how the audience reacts to the verbal comments. The research reveals that negative comments by male characters on weight and body shape of over average female characters. These comments are reinforced by audience laughter compared to the under average female characters (Fouts & Burggraf, 2000).

2.4 Eating Disorder and Culture

A comparative study on BI by Marios Argyrides (2013) had 563 young participants from the UK, Cyprus, Lithuania and Iceland, all of whom were associated with the European Confederation of Youth Clubs. According to the findings of the study, young women from the UK were more concerned with having a thin, ideal body than participants from other European countries. In line with these findings, the UK was found to have a higher rate of EDs. Argyrides's (2013) study was significant for pointing out the socio-cultural dimension of BI. Another cross-cultural study carried out by Swami et al. (2010) in 10 different regions of the world has similar findings on the socio-economic dimension of BI, as a thinner body

is favoured in wealthier countries, whereas a voluminous body is more favourable in poorer countries.

2.5 Negative Body Image & Eating Disorders

Everybody needs confidence and self-esteem to live (Greenspan, 2007). An individual's self-esteem can be influenced by different factors. Dissatisfaction with body appearance can drive an individual towards EDs, unhealthy habits, and even mental problems (Stice, 2002). In fact, recent studies show a positive correlation between BI-related EDs and low self-esteem. Qualitative studies reveal a link between media and body dissatisfaction in that women who are more exposed to media images are likely to develop more negative feelings towards their body image (Thomsen, Weber & Brown, 2002; Levine & Murnen, 2009). It is not only women, but also men who are affected by the images in media.

In stressful situations, negative feelings towards one's body image can result in anorexic and bulimic behaviours (Croll, 2005). Even though a positive correlation between EDs and body dissatisfaction has already been suggested by studies not directly focusing on media, media exposure is stated to intensify AN and BN behaviours (Bissell and Zhou, 2004). The relation between body dissatisfaction, EDs and the media's role has been put forward in a riveting empirical study in Fiji, which is remote from the influence of Western mass media (Becker, Burwell, Herzog, Hamburg, & Gilman, 2002). Fijians' eating habits were monitored before and after their access to television and it was observed that young Fijian women showed symptoms of EDs after they were exposed to mass media, mainly television.

The reason why women are more influenced by mass media and its beauty standards is explained with the Objectification Theory, which suggests that for centuries, women's body has been an object monitored by the society's gaze (Fredrickson and Roberts, 1997). The level of objectification has intensified over time and it has become more difficult for women to achieve the ideal beauty imposed on them. As a result, their body dissatisfaction increased and paved the way for ED.

2.6 Critique from the Cross-Cultural Perspective

EDs have been studied in specific countries, particularly in Western Europe, Asia, and the USA, where EDs are found to be more prevalent (Botta, 2000; Thomsen, 2002). EDs are also on the rise in other countries and cultures, but research on them is either scarce or irrelevant to other non-Western contexts (Soh, Touyz & Surgenor, 2006; Chisuwa & O'Dea, 2010). The worldwide increase in EDs has been regarded allegedly as a by-product of Westernization, prompting scholars such as Bemporad (1996) to refer to them as "the price paid for Western civilisation". While the framework of westernisation provides a perspective, the term itself is problematic as it is usually coupled with modernity and modernisation, a concept that has positive overtones in public perception. In fact, it can be argued that not only non-Western cultures modernise. The processes that the European countries have undertaken in the early modern period are also described with the term. Bemporad (1996) discusses the phenomenon of ED in a historical perspective by referring to two Greek concepts: chthonian modes and Apollonian functions, as the former represents feel, touch, smell, and taste, associated with the feminine, while the latter seeing, being seen, and hearing, associated with the masculine. He defines the Apollonian as "esthetics, order, culture" (p.234). He argues that AN has been present since the Antiquity. The problem is not its existence but its prevalence in Western cultures. He contends that the Western civilisation has been moving since the Ancient Greeks in a direction in which the Apollonian dominates and that the phenomenon of AN is an outcome of this process. The subject calls for further research to gain insights into the practice of ED in non-Western populations (Soh & Walter, 2013). For the time being, it can be inferred that non-Western women distance themselves from seeking for help for ED, as research reveals lower rates (Chisuwa & O'Dea, 2010; Becker, 2007; Cachelin & Striegel-Moore, 2006), and therefore, it is not easy to obtain empirical data for these communities.

Another issue to keep in mind is that non-Western cultures can have different standards for beauty and might not idealise a thin body (Nasser, 1988). A large population of the world lives in mixed-cultures and studying their eating habits appears alluring as unmarked territory for researchers considering the scarcity of studies on EDs among minorities. The UK stands out as a vast land to be explored in the context of EDs with its multi-cultural structure, which is an indispensable element of this research. Beauty standards are socio-cultural and when entering a new culture, women are also challenged by the standards of

the new culture. The adaptation to a new culture, as well as being torn between two cultures in the conflict zone of the native culture and the new one, the majority culture, are stressing and discomforting experiences for young women (Zalta & Keel, 2006; Harris & Kuba, 1997). The discomfort and stress can manifest themselves as EDs, which may be the case for the young Turkish Londoner women who have taken part in this research.

The concepts of westernisation and modernisation are actually forms of acculturation, and acculturation is a complex practice that does not necessarily yield the same outcomes even with cultures in proximity (Lester, 2004). What is even more complex is that in this globalised world, there are many people who grow in a family with a different cultural background but live in another, which gives them the power of acting comparatively.

In the light of the discussion above, concerning ED types and external factors that cause ED behaviours, the research question of this dissertation essay is as follows:

- How do Turkish Londoner young women experience ED and BI in their everyday life as individuals living cross-culturally?

The aims of the research include:

- to define ED types as experienced by the participants;
- to explore the influence of media;
- to examine the role of the host culture;
- to examine the role of the home culture

in their experience.

3. RATIONALE

A major focus of this study is the body image and body dissatisfaction of young Turkish Londoner women before and after their experience in London. The invisible aspects of leading a multi-cultural life and the stress and anxiety it creates have also been included as possible causes of ED. The socio-economic and cultural backgrounds of the participants and of their family, as well as any prior addictions have been considered in the interpretation of the interviews. Females aged between 18 and 24 are chosen as participants because this age group is more prone to being influenced by a new culture

and mass media. Participants aware of their condition and of the cultural and personal influences behind their conclusion have been chosen to be in the evaluation.

4. METHODS

4.1 Epistemology

The phenomenological grounds of the current research, therefore, fall into the realm of critical realism. The approach adopted acknowledges that the phenomenon of ED is a reality independent of the human mind, but it also views that the human mind is able to attribute different meanings to their experience of it (Fade, 2004). In other words, critical realism adopts the idea that the reality of ED has been defined scientifically as a health problem, that is realism, whether humans are able to perceive it (Wynn, Jr. & Williams, 2012). However, it also acknowledges that causal explanation may involve consideration of non-observable structures and the scientific objectives "… that are causally active, giving rise to the actual events that do and do not occur (Mingers, 2006, p.19), that is criticism. Taken altogether, ED is a scientifically defined health problem and a reality independent of human perception. But, it is also redefined and reinterpreted by humans under the social construct of BI. Therefore, the current research seeks to understand how the social construct of BI leads people to attach meaning to the illness of ED in the context of Turkish Londoners and their response to the impact of media and culture. Taking the critical realist position, this research adopts Bhaskar's (2008) three-domain structure of reality, which holds that the domain of the real is the mechanism that regulates human experiences and is linked to the domain of the actual, in which events happen and are produced in patterns with forces and mechanisms. Third, the domain of experience includes performative activities of events, observable or experienced. It should be noted that these domains are not in a causal relationship linearly. They are independent, but making sense of experience can be achieved by referring to the others. In the context of the current research, ED is in the domain of experience as observable or diagnosable, whereas BI and related activities such as social comparison are in the domain of the actual. The cultural and the social construction, on the other hand, belong to the domain of the real and are independent of the other domains, but a meaningful perception of others needs to refer to it.

4.2 Method & Analysis

In line with the critical realist epistemology, this research employs interpretative phenomenological analysis (IPA), which mainly concerns the redefinition and interpretation of ED by individuals, rather than the reality of ED existing independent of those individuals. In the process of data collection, IPA allows the researcher to get insights into the 'lived experience' of the participants through interviewing. The emphasis on 'lived experience' is most commonly met with the term idiographic as opposed to nomothetic. It refers to both the individuality of the study and the specificity of the situation, and therefore, describes both the individual's lived experience and the specific situation (Larkin, Watts, & Clifton, 2006).

Being dependent on the rich material in the interview and keeping away from the general knowledge of the event or situation, IPA does not hypothesise or test pre-given hypotheses, instead it relies on the experience and the expertise of the participant (Reid, Flowers, & Larkin, 2005). Put simply, "an IPA researcher must approach their data with two aims in mind. The first aim is to try to understand their participants' world, and to describe 'what it is like'". The second part of this description involves the researcher's analysis.

Although the idiographic nature of the study demands focusing on lived experience, the researcher has prior knowledge at his/her disposal in order to explore 'what it is like', and it involves high awareness of the contextual and cultural background of the lived experience. In other words, IPA is not independent of theory as far as the analytical stage of research is concerned (Braun & Clarke, 2006).

In the context of the current research, the pre-existing theory that the researcher refers to includes BI, social construction of gender, and cultural relativism, all responding to the requirement of awareness of context and cultural background. Among them, the BI theory concerns the increasingly widespread phenomenon of idealised body image that people look after. The theory of social construction of gender, on the other hand, relates the BI theory to the gender disparity as a social structure. The theory of cultural relativism is to explore how people with a particular background attach meaning to their own ED experience as practiced in a cultural environment different from their original cultural background.

The interviews have been conducted as a semi-structured type. The decision has been made on the fact that semi-structured interviewing both frames the scope of communication between the researcher and the interviewee and allows the interviewee to comment on the questions extensively with rich content, to express own thoughts, to provide details with open-ended questions, giving the researcher the opportunity to have material with potential of producing knowledge (Brinkmann, 2013). A semi-structured interview is not under the total control of the interviewer but is guided according to the schedule set earlier by the interviewee. The loose structure also allows the interviewer to direct questions during the interviewee's comments in order to redirect her/him to the scope of the main question or to explain the question in more details in case of misunderstanding. In this respect, in semi-structured interview and the questions are not organised for precise answers, but as a guideline for discussion with the interviewee. In the organisation of the questions, a particular attention is paid to avoid giving the impression of hidden presumptions to the interviewee (Biggerstaff & Thompson, 2008). As for the sample size, the IPA theory does not require any ideal sample size, for it appreciates each individual interview and the interviewee's expertise of his/her lived experience (Smith & Osborn, 2008). With a predetermined scope that required work with women between the ages of 18 and 24 to display ED and a manifested high-risk, chosen from a cohort on a voluntary basis, the researcher decided to interview 6 female Turkish Londoners (For the interview topic guide, see: Appendix 1.D).

The interview topic guide has been organised as follows:

Figure 1: Organisation of topics in the interview questions serving as topic guide

Schedule / Topic	The sequence of questions
Feelings about Body Image	1-3
Feelings About Eating Episodes	4-6
Social / Media Pressure on Body Appearance	7, 11, 12
Cross-cultural Comparison of Social Pressure on Body Appearance	8
Definition of ED as Experienced by the participant	10
Individuality of Managing Body Image	9
Awareness of ED and healthy nutrition	13

And, the research procedure includes the following steps:
Step 1: Organisation of the interview topic guide
Step 2: Conducting the interviews with audio recording and note taking
Step 3: Comparing recordings and notes to find missing points in the notes
Step 4: Transcription of the interviews
Step 5: Reading and rereading the transcripts to identify themes highlighted by the interviewees.
Step 6: Classification of data according to the themes drawn from the interviews.
Step 7: Creating a Table representing themes that came out from the interviews.
Step 8: Interpreting the material in the context of the research questions.
Step 9: Discussing the inferences with their contribution to the theory of ED.

5. PARTICIPANTS & ETHICAL/PROFESSIONAL ISSUES

5.1 Participants

The participants consist of 6 women with Turkish origin living in London between the ages of 18 and 24. Volunteers were found through personal connections with the snowballing method. Those who scored the highest were asked to participate. The selected participants were invited to in-depth interviews that took place at the UEL Campus or elsewhere chosen by the participant. Each participant has been interviewed alone, and the interview was estimated to last around an hour. To be able to address the cross-cultural aspect of this current research, the participants chosen are either native of Istanbul or they have familial connections with the city. They are all currently studying in London.

5.2 Professional / Ethical Issues

5.2.1 Informed Consent

An information sheet explaining the subject and content of the research was provided to the volunteers. This information sheet also included the timetable and the procedure of the test. Before the interviews, participants were requested to give their full and free consent to the interviewer by signing the consent form (Appendix 1.C). Further questions that participants asked were answered by the interviewer before the interview. Participants were informed orally that they hold the right to end the interview without any consequences in case that they feel uncomfortable, and they do not have to provide any reason for ending the interview. In such situations, all prior data belonging to the interviewee would be destroyed.

5.2.2Confidentiality

The study respects the confidentiality of the participants due to the sensitivity of the subject and their names and personal data were not disclosed at any time during and after the research process. Consent forms and research data will be kept separately in a safe place, and only the researcher and the supervisor will know their location. After the completion of the analysis of data, the consent forms and personal information were destroyed, and the anonymity of the participants was secured.

5.3 Limitations

This research is limited to the data collected from the interviews with the six Turkish Londoner women between the ages of 18 and 24, all of whom are students and have familial and social connections in Istanbul. Although they were selected as representatives of Turkish expatriates in London, the findings are meaningful only in context. None of the concluding remarks can be generalised to discuss the ED phenomenon among the expatriates of the same age range living in London. Based on the data, the types of ED are also limited to three, namely AN, BN, and BE. The findings and concluding remarks are not meant to discuss other types of ED.

6.ANALYSIS

The analysis follows the guidelines in Smith and Osborn's (2008) article. A preliminary list of themes has been refined and elaborated to reach a constellation of themes. The examination of the interview transcripts revealed the following master themes and subthemes:

- Unwanted self
  - body image
- Lack of control over self
  - social stressors
    - family/friends relations,
    - intimate relations,
    - social comparison,
  - cultural context,
  - media effect
  - fear of judgement
- Remedy to unwanted self
  - external (pills and gym exercises),
  - internal (AN, BM)
- Reaction to Remedy
  - BE
- Struggle to manage eating
  - psychological breakdown
    - crying
    - feeling of disgust and shame
- Dilemma of healthy body and body image

First, a discussion of themes and subthemes takes place below. Second, themes and subthemes are discussed in the context of the interview data. All data is given in appendix 1.E

6.1 Defining the Themes

Unwanted Self is the state of dissatisfaction with aspects of oneself, which may include “images of the bad me and of the far more dangerous and disowned not me” (Ogilvie, 1987, p.380). Its distance from the real self-explains the degree of satisfaction of life and its counterpart of ideal self. The pressure, therefore, is on the real self between the ideal and the unwanted self. The definition fits the body management in the sense that the lack of proximity towards the ideal body image generates a backward movement to the negative body image and informs the theme.

Self-control is a concept that describes “the aspect of inhibitory control that involves control over one’s behaviour and control over one’s emotions in the service of controlling one’s behaviour" (Diamond, 2013, p.136). In this research, the Lack of Control Over Self means that the case of lacking self-control affects behaviours towards eating through the superiority of emotions over cognitive abilities of self-control, which implies a nexus between Unwanted Self and the Lack of Control Over Self in the sense that the latter is present due to the emergence of the former. Typically, in the case of eating disorders and body image management, the Lack of Control Over Self emerges under the influence of external factors, which constitute its subthemes. Social stressors as a major factor have appeared in the forms of family/friends relations and intimate relations. The subtheme of cultural context refers to the ability of participants to make a comparison between the two cultural environments that they have experience in. However, it should be noted that cultural comparison is not similar to social comparison. Social comparison is a behaviour that is directly related to the Lack of Control Over Self. In cultural comparison, the data collected rather reveal participants’ perception of social stressors present in each culture, e.g., London and Istanbul. Media effect, as one dimension that this dissertation essay is concerned with, about the ways in which the participants are affected negatively by the visual material published by media outlets, including social media. Fear of judgement is a consequence that occurs through the presence of other subthemes in the phenomena of ED. Taken altogether, the higher degree of the Lack of Control Over Self would generate the stronger fear of judgement, which implies the interrelatedness of the subthemes.

The theme of Remedy to Unwanted Self is to describe what the participants do to overcome the negative body image. It resides at the centre of this dissertation essay and is the core of experience in Bhaskar’s (2008) terms. In other words, eating disorder-related practices of participants are actually taken as remedy to unwanted self under the impact of the Lack of Control Over Self. Two subthemes of the remedy are present in the interviews:

external, that is, taking pills and going to the gym, and internal, the exercise of AN and BM. In Bhaskar's (2008) realist theory of science, remedy to unwanted is what is observable, diagnosable, and/or experienced.

Although AN, BM, and BE were rightly discussed above as types of eating disorder, BE has a distinct feature as it contrasts AN and BM as types of remedy, simply because it is a reactionary attitude against dieting, AN, and BM. BE is, therefore, a subtheme of Reaction to Remedy. A BE episode comes when the individual stops dieting. The amount of food consumed during the episode is enormous and brings to one's mind loss of control, although not all scholars agree on the interaction of the amount of food and the loss of control. It should be noted that Reaction to Remedy is closely related to Remedy to Unwanted Self, but only to the internal subtheme, for BE is followed by AN and/or BM. Struggle to Manage Eating has been revealed as an emotional dimension rather than inhibitory Remedy practice. The failure of managing eating episodes in terms of quality and quantity of food brings about the Struggle dimension. The failure results in psychological breakdown leading to experiencing the feeling of shame and guilt, as well as crying. Thus, Reaction to Remedy including BE has a causal relationship with Struggle to Manage Eating. However, Struggle to Manage Eating is not limited to BE, for BE is a particular type of ED and BE episodes occur as attacks. But, during a dieting period, any excessive amount of food may cause Struggle to Manage Eating and any form of psychological breakdown.

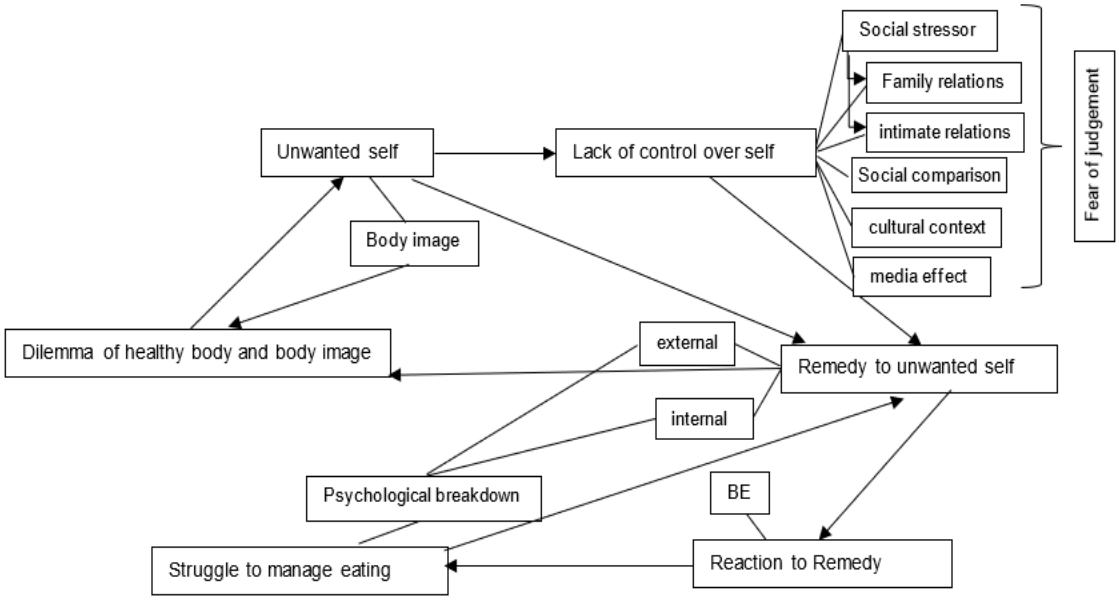
Finally, the data collected pinpoints the theme entitled Dilemma of Healthy Body and Body Image. Dilemma, here, refers to the awareness of what a healthy body needs and of how Body Image is built. In the context of ED, it can be argued that body image outweighs, although individuals are aware that healthy body can be achieved with a balanced diet rather than cutbacks on eating.

6.2 Connections of the Themes and Theoretical Assumptions

The discussion of connections between the themes is necessary for the sake of theory and analysis, without which analysis of data could remain fragmented. A consecutive order can be noticed between the themes 1 to 5 respectively. This implies that there is a causal relationship between them, although this does not mean that absence of any one of them

in the series is impossible. Nevertheless, the emergence of Unwanted Self is followed by Lack of Control over Self in order for the Remedy to Unwanted Self to occur. These three themes are the core elements of the experience of ED and they form a triangular structure. Remedy to Unwanted Self can happen only in the presence of Lack of Control over Self, but it is actually a response to Unwanted Self. Reaction to Remedy can be seen as arbitrary, for not all individuals suffering ED practice it. However, when it happens, it happens in the presence of Remedy to Unwanted Self. The Struggle to Manage Eating is arbitrary too, but it can happen usually after Reaction to Remedy. The Dilemma of Healthy Body and Body Image is not part of consecutive order, but it is connected to Unwanted Self and Remedy to Unwanted Self. In the following Table the arrows depict connections between the themes, and the lines relate themes and subthemes

Figure 2: Connections map of themes



6.3 Themes and Subthemes as Appeared in the Data

The sections have been organised in accordance to the theoretical discussion in the Introduction. In addition, the common themes of body image and external factors have been drawn from the data. In the analysis, the participants are referred to as P1, P2, … for preserving confidentiality.

6.3.1 Unwanted Self

The Unwanted Self is one of the themes shared by all participants in one way or another. In the case of P1, P4, and P5, the dissatisfaction with body is a persistent perception. P1 holds:

> "Okay, to be honest, I've never been completely happy about my body and I've never been completely happy about my body image."

Similarly, P4 has dissatisfaction with her body, but employs gym exercises as a remedy to her unwanted self-problem:

> "Frankly, I never see myself skinny enough, which is why I always push myself harder to lose weight, sometimes I fast I don't eat, and I go to the gym regularly, actually sometimes I go twice a day or more than twice, my umm, my longest period to stay in a gym is like, was like 6 hours."

The other participants share the partial commitment to body image concern, as it comes and goes from time to time. P2, for example, states:

> "Okay, sometimes I don't like it, sometimes I think it's nice. Sometimes when I feel bad about my body, umm I - I think, especially my stomach and my thighs look really fat, and then I don't have the mindset that I should eat less or eat healthier. I go to the gym but then I don't have a high motivation to actually do something against it, so I just wait until the feeling passes. And then, I forget about myself again."

When P2 and P4 are compared with regard to their Remedy to Unwanted Self-activities, the correlation between gym exercises and persistence of the perception of Unwanted Self is significant. While P2 has a permanent problem of Unwanted Self and goes to gym every day on a regular basis, P4, who has the problem occasionally, does not put so much effort on Remedy to Unwanted Self. The statements also justify the nexus between the themes Unwanted Self and Remedy to Unwanted Self.

6.3.2 Lack of Control Over Self

6.3.2.1Social Pressors

Lack of Control Over Self occurs in the interview data due to a variety of factors, all of which are external. Two types of social pressors are present: family/friends and intimate relations. P3 explains her overreaction to her parents' critical look when having dinner. P1 on the other hand states:

> I always umm ask opinion about my friends like do I look fat today? or my cheecks are fat? Or like I always like umm make them comment about my body.

The significance of family/friends relations as a form of social pressure appears in the absence of them in the individual's living environment. Since all the participants live away from their families and friends, their level of communication is low, which implies alleviation of pressure from these agents. P6 holds:

> I think in Turkey umm I felt a bit more umm pressure on my body image maybe it's because I'm umm my all friends are there, my umm ex-boyfriend was there so here I'm a single and I'm meeting with new people so they, I don't feel the pressure that much when I compare to Istanbul, Turkey.

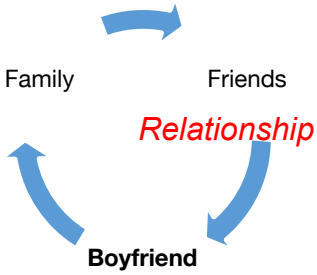
Yet, there can also be contest between Unwanted Self and family/friends relations and alleviation of pressure does not always help to feel better. The person may stop or reduce her diet due to the low pressure, but the preponderance of Unwanted Self feelings may cause discomfort, as is the case with P1:

> I'm staying in the student accommodation so I live all my own so I don't have any friends like, actually I have friends but compare to back home, I have like best friends and I was avoiding to like get a real connection with people so like most of the time I'm spending my nights in my room so I ate like a lot of food and that makes me actually that makes me eating more than I used to and umm yeah since London I experienced a lot of moments with myself and I get to know myself better so I'm not comfortable and I'm not happy with it.

In other words, gaining control back due to the absence of family members and friends around does not always make positive impact on the individual.

Intimate relations seem to play a more significant role in the emergence and persistence of Unwanted Self. Four participants have told their experiences with and opinions about boyfriend relations in Turkey. P6, for example, feels more comfortable in London because her friends and ex-boyfriend are back in her home town. P4 began dieting and exercising after she realised that her boyfriend was cheating on her with a "super, super skinny hot girl". P5's experience was about the first time her boyfriend was going to see her in bikini. As he found her "bulky", she vomited for the first time and started dieting. P2 was told by her boyfriend to lose some weight, after which it took her some years to get over the bad feeling. The adverse effect of a boyfriend's negative behaviour is found in P3's experience in that she found herself shopping for junk food. This was the first time when her Binge ED occurred.

Figure 4: The theme of relationship with its components



Social comparison is "the act of comparing an aspect of the self to another person" (Altabe & Thompson, 1996, p.182), as discussed in the section 2.2. It has been found with P1, who says that body image as being skinny is almost a race between girls, as they compare each other's bodies. Similarly, P2 states:

> if I see a skinny model I wouldn't be thinking oh I wanna look like that but if I would have a close friend that is very skinny, I would think, there would be high possibility of me thinking oh I wish I look like that too.

6.3.2.2 Cultural Context

The significance of a boyfriend as a social pressor justifies Bemporad's (1996) argument of shift from chthonian modes, associated with the feminine, to Apollonian functions, rep-

resenting the masculine, which, in fact, can be discussed within the realm of the Cultural Context theme. Through the cultural shift in Bemprad's (1996) argument, feel, touch, smell, and taste are replaced by seeing, being seen, and hearing, or the elements of the dominant masculine culture.

A more significant aspect of Cultural Context is cross-cultural comparison through the experience of participants. The research has been carried out with Turkish women currently living in London, which makes it possible to conduct a cross-cultural comparison between the Turkish culture and the new cultural environment in Britain.

The interviews revealed that all participants have begun suffering ED in Turkey. Although they were born in Britain, they refer to Turkey as their native cultural environment. They all agree that they feel a much higher pressure in Turkey. In comparison, people in London are more comfortable about what one wears and whether the dress fits the individual's body. In Turkey, however, people are in general more critical about the body type and dressing. Having grown up in or being affiliated to a cultural environment as such, the participants have experienced Unwanted Self in their adolescence years.

All participants also agree that the pressure for body image is much lower in London. Londoner women freely wear short skirts and other garments that do not fit their bodies. Not much attention is paid to body image, gaining weight, and dieting in this city either. For example, P3 states:

> In my hometown, if you are fat and wear short, people look and gossip about you. If you have a boyfriend, it's the same. Here, I don't see people like this.

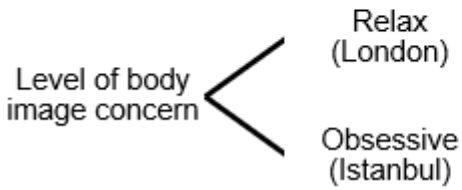
In this respect, one would ask why the participants still experience ED and Unwanted Self in their new cultural environment. There could be several hypothetical reasons depending on the individual's adaptation, but it is apparent that the London effect does not eliminate the habits and behaviours originated in the hometown. Broadly speaking, it can be concluded that the host culture is not as influential as the home culture. In the context of Turkish young women living in London, the participants seem to be still bound by their Unwanted Self habits back in Istanbul. While all participants agree that the culture of body

image and appearance is different and more relax in London, they all state that nothing has changed in their reaction to overeating.

The theory of cross-cultural aspects of ED suggests that beauty standards differ from one culture to another. This is particularly emphasised in the comparison of Western and non-Western cultures. Consequently, women entering a new culture are challenged by the new standards of beauty. They may achieve to adapt themselves to the new culture or experience discomfort because of straddling between the home and host cultures (Zalta & Keel, 2006; Harris & Kuba, 1997). Adaptation and discomfort in this framework do not actually pose a dichotomy. There could be several shades from one to the other depending on the way the individual departs from one culture and enters another, which is informed by the idiographic nature of studying ED and BI. In the context of participants, it should be noted that they are students at universities in London. They might be going back and forth to Istanbul and London. This implies that they have a close connection to their native culture. This could be one reason they keep the behavioural patterns of ED that they started in Istanbul. In different cases, moving from one culture to another may lead the individuals to different behaviours. But, in the context of the participants, their frequent connection with the native cultural environment can explain the reason why they are under the influence of the cultural environment in their home town. After all, the participants are in London for the purpose of education and they may go back to their hometown when they graduate. The research, in this respect, sheds light on the situation of women moving from one culture to another in the context of education. It also includes some clues that the home culture is not about where the individuals are born, but rather, where their sense of belonging refers to. Some of the participants are natives of Istanbul and some other view the city as their hometown, although they were born in London, but they all share similar thoughts and behaviours with the newcomer Turkish women with reference to the London effect and the cultural differences between London and Istanbul. The very concept of culture as revealed in this research implies that adaptation to a new culture and the straddle between two cultures is different depending on the individual's perception of the home and host cultures. Adaptation to a new culture can be expected to change behaviours towards ED. However, neither London-born participants behave according to the beauty standards of London, nor those who have come to London for the purpose of education seem to have changed their habits. The straddle between the two cultures seems to prevail in both groups of participants. The sense of native culture and affiliation

to the hometown culture gives them all the same form of the eating habits and body image management.

Figure 5: Level of body image concern in London and Istanbul as perceived by the participants



P1's comments provide another clue for the question of why the participants still experience ED and Unwanted Self in their new cultural environment. In her case, the dominance of Unwanted Self over Lack of Control Over Self makes it difficult to eliminate body image concerns.

6.3.2.3 Media Effect

Alongside cross-cultural comparison and social pressure, media impact on body image perception and internalisation has been emphasised by all participants. It is so prevalent among them that even the questions not directly related to media, such as pressure put on women in the question 9, have been replied by some participants in the context of media impact. On the one hand, they are critical to the images of skinny body as appearing in media, being aware that the images are not realistic and might have been photoshopped. The participants agree that media, and social media in particular, makes a great impact on the body image perception. The theme referential body size and type reoccurs in this section.

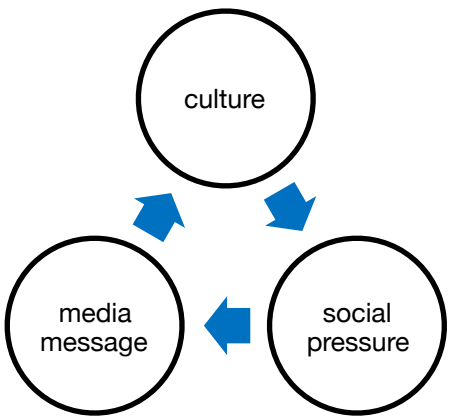
As discussed in the section 2.3, media itself does not have the power to create the concept of ideal body image, but makes use of stereotypes embedded in the dominant culture. Nevertheless, it still has remarkable impact on the growth of a negative body image. P6's statement is significant for media impact on teenagers:

> "I think it really affects more and more people's lives and especially teenagers, teenagers' lives as they grew up with those images on media and they were bombarded with all these perfect body images."

The theory of media impact discussed earlier in the section 2.3 informs how media expedites the negative body image among the participants. There are two aspects of the theory that help understand the role of media impact on Unwanted Self and negative body image of participants: the bandwagon effect and the third-person effect, on the one hand, and self-esteem on the other. The bandwagon effect creates an impression that positioning against or in favour of something, that is, ideal body image here, influences people's decision-making. The theory of third person effect suggests that media messages are perceived by people to exert stronger effect on others. This explains how social pressure comes into existence. It informs why the participants feel more comfortable in London than in Istanbul, even though the media impact is present everywhere around the world. The same media messages are seemingly not so powerful in London, since the social pressure emerging from media's influence on the third persons has been left behind in Istanbul.

The concept of self-esteem relates to media impact in two ways: impact on the self and others, informed by the third person effect, and the level of self-esteem focusing on the individual. The latter directly concerns the topic of this research, as the participants have been exposed to ED problems due to the loss of self-esteem after certain events. Typically, P3 has faced Binge Eating, after a boy posted the photo of a "hot girl" on Facebook. In this example, the media image influences the third person, that is, the boy, and his posting of the image makes a great impact on the participant lowering her self-esteem. Eventually, a low level of self-esteem makes the participants exposed to social pressure, or, other third persons.

Figure 4: Interaction between culture, social pressure, and media message



The impact of media has been a catch-all phrase in common parlance, but it needs to be elaborated in different contexts. The context of body image and ED in this research has revealed that it is related to self-esteem and enhances the third person's influence. A vicious circle has been identified. The impact of media may cause lower self-esteem on the individual level that implies an idiographic study. The lower self-esteem may lead individuals to be exposed to a greater influence of media, directly or through third persons.

6.3.3 Remedy to Unwanted Self

Although it is named "remedy", this theme includes ED types as internal practices alongside the external subtheme that includes consumption of laxatives, appetite cutters, and fat burners, as well as gym exercises. Only P6 specified her problem as BM, but the self-reported statements of all participants include relevant accounts. Participants do not merely stay away from nutrition, which defines AN. Rather, they exhibit behaviours like vomiting or consuming laxatives, appetite cutters, and fat burners as external remedies. It is only P4 who tries to manage her body image by regularly exercising at the gym. But she too states that she uses fat burners. P5's account reveals how the use of pills is connected to Lack of Control Over Self:

> "When I go out of my diet I can go really really crazy about it. I feel like I wanna get rid of those calories right away that's why sometimes I use fat burner pills and I know it's a really really bad thing to do to yourself, but I don't know… I can't control myself, I wanna directly get rid of the calories, so I use it."

Although external and internal remedies are categorised separately, it should be noted that they are exercised in combination in reality, as indicated by P1:

> "I need to lose weight, but it is too hard but… umm that's why I'm starting to use, started to use pill or sometimes I just like I choose vomiting instead, if I cannot stop myself from eating so yeah there is a huge pressure on me."

6.3.4 Reaction to Remedy

In the data from the interviews, BE disorder seems to be a reaction to Remedy to Unwanted Self and is also related to the theme of Lack of Control Over Self. P3's account has the statement exemplifying how connection occurs:

> "In the first year of university I was quiteskinny, I was talking with a guy and I thought like our relationship, it wasn't a relationship but I thought that our communication was good and one day he posted a photo on Facebook with a h-, with a hot girl, and her body was like a curvy and she was having a boops and it was so obvious in the, in the photo and it made me, it made me feel like a shit and right after that I found myself in the market like buying a lot of junk foods."

Her action is reactionary because she was already practicing Remedy to Unwanted Self at the time of the event. It is also connected to Lack of Control Over Self, as it was a response to intimate-relations-type of social pressor.

6.3.5 Struggle to Manage Eating

The theme concerns the psychological consequences of failure in managing Remedy to Unwanted Self resulting in Reaction to Remedy, either in the form of BE, or any other types of excessive consumption of food. However, it facilitates the return to Remedy to Unwanted Self, constituting a triangular relationship with the other themes. P3, with self-diagnosed BE problem, reveals in her account of the aftermath of the BE attack how the use of pills is connected to other themes:

> "I mentioned before I feel guilty, I feel shame umm I'm umm like later that day I'm fasting or as I said I'm using laxative pills or fat burner and because I really hate seeing myself with a full tummy big tummy and the bloated and that's why I keep myself a bit in hunger umm this is not something healthy to do for sure, I need to mention it, but umm I feel more comfortable."

6.3.6 Dilemma of Healthy Body and Body Image

The awareness of the requirements of healthy body and the measures for body image create a tension between Unwanted Self and real self, for Unwanted Self prevents individuals from going for a healthy body over the real self. The participants were asked for their understanding of a healthy body and a healthy body image. However, some of the answers include a tense comparison of a healthy body and the negative body image. P1 holds:

> “I’m only umm thinking about muscles or having a good body of course I’m aware the facts of like I should get protein, I should get carbs, I should get everything to, you know, be healthy but at the same time I know that there is a lot of work to do. So, yeah, being healthy is so hard to deal with for me right now.”

The tension also implies a correlation between the themes Dilemma of Healthy Body and Body Image, Remedy to Unwanted Self and Unwanted Self.

6.4 Discussion

Revisiting Bhaskar’s (2008) theory of the three domain structure of reality, ED as diagnosed scientifically, is informed by the domain of experience and it is coupled with external agents such as the use of pills and gym exercises. However, participants’ performance of ED is not a form of illness that has occurred to them based on physiological symptoms. It is rather a result of the mental state that pushes them towards it. The name of the theme as Remedy to Unwanted Self is indeed meaningful because it is not a suffering in the eyes of participants, but a remedy to recover from Unwanted Self. This point connects the domain of experience in Bhaskar’s (2008) theory to the domain of the actual, in which events happen and are produced in patterns with forces and mechanisms. Unwanted Self plays a key role in transiting from the domain of experience to the actual, as it has codes from both domains. It can be argued that the other themes, except for Lack of Control Over Self, are in the domain of the actual, as actions attributed to them are produced in certain patterns (such as crying, feeling shame and guilt, BE, and so on). The items in Lack of Control Over Self, on the other hand, are informed by the domain of the real, the mechanism that regulate human experiences. As discussed by Bhaskar (2008), these three domains are not in a causal relationship and, therefore, exist independent of one another. As seen in the list of subthemes under Lack of Control Over Self, they are not peculiarly related to ED or BI. But, they are the mechanisms that people refer to in their endeavour to make their experiences meaningful. Consequently, adaptation of the ED phenomenon to the theory of Bhaskar (2008) helps understand the significance of the theme of Lack of Control Over Self and its constituents external to the phenomenon. The cross-cultural perspective of this dissertation essay resides in the subtheme of Cultural Context, as one mechanism that regulates human experiences. Its significance rests in the fact that other themes and subthemes can be found in many

situations, but cross-cultural study of ED adds value by exploring how the regulatory mechanisms are used by people at the junction of two different cultures.

This research reveals that the cultural environment is effective in the emergence of a negative body image perception and ED among women. The analysis of the cultural environment informs the broader domain, in which the social pressure emerges with the catalytic effect of media. In the context of media impact, the participants mostly focus on social media, so that localisation of media impact in the research is irrelevant, as the participants are able to reach the same media channels in London or Istanbul. The interview data has revealed that Turkish women living in London have ED problems stemming from the negative body image perception. The perception is closely related to the native culture and the social environment in the hometown of participants. Although London, as the location of the new culture that the participants live in, is found to be more relax compared to Istanbul, the hometown, it is unable to create opportunity for the participants to change their behaviours. The case of the Turkish female Londoners suggests that moving from one culture to another is not a linear process, the individual strategies may still emphasise the stereotypes in the native culture and lead to the persistence of a negative body image and ED.
The persistence is present in the ways in which the participants manage their body image and ED. Although they all agree that London is more relax about the body image and eating-related issues, they still favour the use of laxatives, appetite cutters, fat burners, and vomiting. Only one participant tells that she practices gym exercises in addition. Taken all together, it seems that the participants brought along their perception of body image and the habits of managing it through the ways that define their ED. The key concept to explain the phenomenon is self-esteem and the participants represent how delicate the self-esteem is in relation to the opposite sex. Once it is lowered in the native culture and social environment, the symptoms are likely to come after the individual even though in the case of a change of cultural environment. Consequently, culture, social environment, and media interact intensely to influence the individual's decision-making.

7. CONCLUSION

This research contributes to the study of body image and ED in the context of women with a particular cultural background different from the cultural environment they currently live in. The Western vs. non-Western dichotomy in this framework has been studied extensively. Nasser (1988) contends that the conception of beauty in non-Western cultures may not idealise a thin body for women. Two later studies contribute to the argument by the fact that these women are faced with the beauty standards of the new culture. Adaptation to a new culture or being torn between two cultures is what they experience as discomforting and stressing (Zalta & Keel, 2006; Harris & Kuba, 1997). The findings of this research do not support the theory. In fact, the research claims the opposite in the context of cross-cultural living. While the other themes and subthemes can be experienced by women in any cultural environment, the findings regarding the cross-cultural perspective in this research are significant. Whether the relax mood in London typically relates to the socio-cultural environment in the city or to the feeling of being free from the external pressures in the home culture merits further inquiry.

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9. APPENDICES

APPENDIX 1:

School of Psychology Research Ethics Committee

NOTICE OF ETHICS REVIEW DECISION

For research involving human participants
BSc/MSc/MA/Professional Doctorates in Clinical, Counselling and Educational Psychology

REVIEWER: Poul Rohleder

SUPERVISOR: **Sultana Choudhry**

STUDENT: Cansu Culculoglu

Course: MSc Clinical and Community Psychology

Title of proposed study: What are the effects of Western media on eating disordered behaviour and body image for young women from Turkish culture in London?

DECISION OPTIONS:

1. **APPROVED:** Ethics approval for the above named research study has been granted from the date of approval (see end of this notice) to the date it is submitted for assessment/examination.

2. **APPROVED, BUT MINOR AMENDMENTS ARE REQUIRED BEFORE THE RESEARCH COMMENCES** (see Minor Amendments box below)**:** In this circumstance, re-submission of an ethics application is not required but the student must confirm with their supervisor that all minor amendments have been made before the research commences. Students are to do this by filling in the confirmation box below when all amendments have been attended to and emailing a copy of this decision notice to her/his supervisor for their records. The supervisor will then forward the student's confirmation to the School for its records.

3. **NOT APPROVED, MAJOR AMENDMENTS AND RE-SUBMISSION REQUIRED** (see Major Amendments box below)**:** In this circumstance, a revised ethics application must be submitted and approved before any research takes place. The revised application will be reviewed by the same reviewer. If in doubt, students should ask their supervisor for support in revising their ethics application.

DECISION ON THE ABOVE-NAMED PROPOSED RESEARCH STUDY
(Please indicate the decision according to one of the 3 options above)

APPROVED, BUT MINOR AMENDMENTS ARE REQUIRED BEFORE THE RESEARCH COMMENCES

Minor amendments required *(for reviewer)*:

Section 10: Design: What is the rationale for excluding people above the age of 26?

Section 10 Recruitment: How/where will participants be recruited?

Section 10: Recruitment: The EAT-26 is considered a screening tool, so may indicate possible eating disorder, which may require debriefing and signposting to possible support services. It may also be unethical to exclude volunteers because their scores are not high enough (what is the cut off?). Your interview questions also seem to focus more on body image and eating. Thus, consider recruiting participants who self-report eating or body image difficulties/concerns.

Section 11: Clarify what is meant by questions will be "modified"? Which questions will be modified?

Section 13: Clarify what is meant by "foundations". See also comment above about the use of EAT-26 as an inclusion/exclusion tool. Location of interview needs to be a confidential, but safe, space.

Participation Info Sheet: Revise sheet to reflect above revisions

Major amendments required *(for reviewer):*

Confirmation of making the above minor amendments *(for students)*:

I have noted and made all the required minor amendments, as stated above, before starting my research and collecting data.

Student's name *(Typed name to act as signature):* Cansu CULCULOGLU
Student number: 1724191

Date: 26/06/2018

(Please submit a copy of this decision letter to your supervisor with this box completed, if minor amendments to your ethics application are required)

ASSESSMENT OF RISK TO RESEACHER *(for reviewer)*

Has an adequate risk assessment been offered in the application form?

YES / NO

Please request resubmission with an adequate risk assessment

If the proposed research could expose the researcher to any of kind of emotional, physical or health and safety hazard? Please rate the degree of risk:

☐ HIGH

Please do not approve a high risk application and refer to the Chair of Ethics. Travel to countries/provinces/areas deemed to be high risk should not be permitted and an application not approved on this basis. If unsure please refer to the Chair of Ethics.

☐

MEDIUM (Please approve but with appropriate recommendations)

[X] LOW

Reviewer comments in relation to researcher risk (if any).

Reviewer *(Typed name to act as signature)*: Poul Rohleder

Date: 26/06/2018

This reviewer has assessed the ethics application for the named research study on behalf of the School of Psychology Research Ethics Committee

RESEARCHER PLEASE NOTE:

For the researcher and participants involved in the above named study to be covered by UEL's Insurance, prior ethics approval from the School of Psychology (acting on behalf of the UEL Research Ethics Committee), and confirmation from students where minor amendments were required, must be obtained before any research takes place.

For a copy of UELs Personal Accident & Travel Insurance Policy, please see the Ethics Folder in the Psychology Noticeboard

APPENDIX 1.A

Effects of Western Media relating Eating Disorder Behaviour and Body İmage of Young Turkish Women Living in London.

Cansu Culculoglu Student of masters on Clinical Psychology would like to invite you to participate on interview. You would be interviewed for about an hour on a location and time of your choosing. The interview will contain questions about your feelings, experiences with food and your eating behaviour. It will be fully confidential and you have the right to leave at any time you want.

UEL
University of East London

PARTICIPANT INVITATION LETTER

You are being invited to participate in a research study. Before you agree it is important that you understand what your participation would involve. Please take time to read the following information carefully.

Who am I?

I am a postgraduate student at the School of Psychology at the University of East London and I am studying for a Mac Clinical and Community Psychology. As part of my studies, I am conducting the research you are being invited to participate in.

What is the research?

I am conducting research into the Effects of Western Media relating Eating Disorder Behaviour and Body İmage of Young Turkish Women Living in London.
My research has been approved by the School of Psychology Research Ethics Committee. This means that my research follows the standard of research ethics set by the British Psychological Society.

Why have you been asked to participate?

You have been invited to participate in my research as someone who fits the kind of people I am looking for to help me explore my research topic. I am looking to involve young Turkish Women living in London with Eating disorder behaviour

I emphasize that I am not looking for ‘experts’ on the topic I am studying. You will not be judged or personally analysed in any way and you will be treated with respect.

You are quite free to decide whether or not to participate and should not feel coerced.

What will your participation involve?

If you agree to participate, you will be asked to
answer questions related to body image and eating disorder behaviour in an interview.
It will take about an hour.
The interview will take place in an isolated room chosen by the interviewee that is neutral to both parties at a time convenient to the interviewee
The interview will cover questions in a non-strict manner.
The interview will be recorded using an audio recorder.

I will not be able to pay you for participating in my research, but your participation would be very valuable in helping to develop knowledge and understanding of my research topic.

Your taking part will be safe and confidential

Your privacy and safety will be respected at all times.

Participants will not be identified during the interview and on any data collected.
Participants can leave at any time they like without giving any reason. If they wish to leave and destroy the data collected, they are able to do so.
.

What will happen to the information that you provide?

What I will do with the material you provide will involve:

Information will be stored in password protected files. Only the researcher and the supervisor can access the files.
Names and contact details of the participants will be erased from files right after the interview. The files will only hold the unique number of the participant. During the interview, the interviewer will address the participants with their unique numbers to keep the interview anonymous for the audio record.
Only the examiners and the supervisor will see the anonymous data.
All the data gathered will be destroyed after the analysis.

What if you want to withdraw?

You are free to withdraw from the research study at any time without explanation, disadvantage or consequence. However, if you withdraw I would reserve the right to use the material that you have provided up until the point of my analysis of the data.

Contact Details

If you would like further information about my research or have any questions or concerns, please do not hesitate to contact me.

Cansu Culculoglu
U1724191@uel.ac.uk

If you have any questions or concerns about how the research has been conducted, please contact the research supervisor Sultana Choudhry. School of Psychology, University of East London, Water Lane, London E15 4LZ,
Email: S.choudhry@uel.ac.uk

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.
(Email: m.finn@uel.ac.uk)

APPENDIX 1.B

UNIVERSITY OF EAST LONDON

Consent to participate in a research study

A Qualitative Research on The Effects of Western Media relating Eating Disorder Behaviour and Body İmage of Young Turkish Women Living in London

I have read the information sheet related to the above research study and have been given a copy to keep. The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about this information. I understand what is being proposed and the procedures in which I will be involved have been explained to me.

I understand that my involvement in this study, and particular data from this research, will remain strictly confidential. Only the researcher(s) involved in the study will have access to identifying the data. It has been explained to me what will happen once the research study has been completed.

I hereby freely and fully consent to participate in the study which has been fully explained to me. Having given this consent, I understand that I have the right to withdraw from the study at any time without any disadvantage to myself and without being obliged to give any reason. I also understand that should I withdraw, the researcher reserves the right to use my anonymous data after analysis of the data has begun.

Participant's Name (BLOCK CAPITALS)

…….

Participant's Signature

……..

Researcher's Name (BLOCK CAPITALS)

……..

Researcher's Signature

……

Date: ……..…….

APPENDIX 1.C

UNIVERSITY OF EAST LONDON
School of Psychology
Water Lane
London E15 4LZ

The Principal Investigator(s): Cansu Culculoglu
Project Title: A Qualitative Research on The Effects of Western Media relating Eating Disorder Behaviour and Body İmage of Young Turkish Women Living in London

Debrief Sheet

Your participation in this study is much appreciated. We wish it was an interesting experience for you and we did not give you any hard time with our questions. The goal of this study is to understand the effects of Western media on body image and eating disorder behaviour.
If you have any issues regarding the intended study and wish to ask questions about anything that has bothered or distressed you, please do contact the researcher Cansu Culculoglu by email u1724191@uel.ac.uk

If you have any questions or problems about how the study was conducted and wish to express them, please contact the study's supervisor Sultana Choudhry by email S.-choudhry@uel.ac.uk

Or the Chair of the School of Psychology Research Ethics Committee: Dr. Mary Spiller; m.j.spiller@uel.ac.uk.

If you wish to seek help on the issue, please do contact:
Beat Eating Disorders helpline 0808 801 0667.

APPENDIX 1.D

Interview Questions:

1. After introducing the selection process of participants, ask her why she would qualify as an interviewee)

2. How do you feel about your body?

3. Do you have any experiences to support that feeling? If you do, how do you manage your feelings or your experiences?

4. Did your feelings about your body have changed after you moved to London?

5. How do you feel about eating? Do you feel comfortable during your eating process?

6. Are you able to manage your feelings on food, if so, how are you able to do it?

7. Are there any particular moments where you over-reacted to the way you have eaten? If so, have they increased since you moved to London?

8. Do you think there is a pressure about body appearance in London compare to your own country ?

9. What do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?

10. Do you think that there is a difference between how you manage your body image and how other women do?

11. Have you experienced a specific eating disorder or any eating disordered behavior?

12. Do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?

13. Do you think that media has an effect on your own eating disordered behaviors and your perception of body image ? If so, how do you experience it?

14. What do a healthy nutrition and a healthy body image mean for you?

APPENDIX 1.E

Participant 1:

Me: Hello, Why would you qualify as an interviewee ?
P1: Hello, I'm always experiencing some eating disordered behaviors so like, when you mention about your study, I actually think like I'm the one of the most suitable interviewee for this survey or research. So…

Me: Okay, how do you feel about your body ?
P1: Okay to be honest, I've never completely happy about my body and I've never completely happy about my body image because like it was such a long time, even my parents were like umm commenting on my body, I know that I believe in them like because they always want me to like become better and become healthier but somehow I feel like everyone is like criticizing me a lot about that and of course like at the same time I was one of the..(stop), I was too hard on myself on my body and I was always like looking into mirror and find gaps, find like lacks of my body and ummm I never feel completely happy about it. So, …. Yeah

Me: Do you have any experiences to support that feeling? If you have, how do you manage your feelings ?
P1: Okay, I'm gonna share my like the saddest story ever, I was talking with a guy and we had a connection and everything but the problem was we met on internet. So we never actually see each other. Since we attend the same like the school trip together and he saw me for the first time in that trip and afterwards we were talking like as usual because we've talked a lot and a suddenly hen told me that actually I'm quiet beautiful but I'm kind a fat. So like, after this situation I cried almost like days and weeks and almost a month. I couldn't get over it like but (sigh) I was supposed to do something to stop it because like loosing weight is not a big deal for me because I was young since then. Everyone was just telling me the same thing but like hearing that from a guy like actually made me kinda like, I experience such a huge disappointment and umm, but afterwards I couldn't even manage, I couldn't even stop myself like to eating, I ate a lot like…, I started to diet but I never can accomplished that and I actually never able to loose weight since now, it still continues but every time I met a guy, I always assume that they gonna judge me on my body, they gonna judge me on my like fat and everything. I still have that concern. Sometimes like its

too hard to admit that but sometimes I also take some to prevent me to like eat more, like some appetite cutter, fat burner pills and staff because its like, its too hard to like reach those kind of pills because they mostly illegal and you can not go and take them from pharmacy, you have to like order them from online but I don't care, I just order a lot of pills like that and sometimes its the biggest issue but sometimes I force myself to vomit if I ate too much like unnecessarily ate too much.

Me: Did your feelings about your body have changed after you moved to London ?
P1: Actually its hard to say because its not up to like where I live, its mostly about like how I live and how my body like, from-from a long time I'm having the same weight like I'm having the same body and since I moved to London, my body hasn't change. I mean like specifically change. So my concerns still continues but in here, I experience something different because people in here like mostly more healthier maybe because of the food maybe because of the weather I don't know why but like if I like when I running to people in subway, in the street I saw that they most likely to be like healthier than compare to Turkey. So, yeah maybe I changed, maybe my body image has change a little bit and umm I don't know actually but still I'm the same person no matter where I live.

Me: How do you feel about eating , do you feel comfortable during your eating process?
P1: Okay. I'm originally from Turkey so if you know anything about food or not but I'm gonna say you something like we have best cuisine ever so I always grow up in an environment that providing the best food like no matter where like you can access food anytime in any hour like even the 3 am in the morning you can easily eat something like not healthy or healthy, but definitely tasty so I actually love eating so I can say that I like live for eating, I live for good food but I can not say that I'm comfortable with it so like every time, sometimes I dreaming about my lunch during my breakfast time I'm death into food but after like as soon as I finish with my food, all I can think about my weight on the scale next morning so that makes me like kinda how can I say like I'm too like complicated. One side, I just love food, I live for food but on the other side I just like too concern about my body and I know that the things that I putting my body not gonna like not gonna be end up in a good way. So, sometimes if I ate too much like because you know like I'm doing my master here so my daily routine is kinda hard like sometimes I came home like really late and I had to order food because I never had change to eat during the day so its a good thing that is something eventually but the moment I ate something base on the, base on

the time that I eat it like I feel so ashamed actually like even when I'm going to pick up my food, I look at the people and I feel like they like judging me because I'm ordering food that late and I' gonna eat like a whole thing so yeah but in that case, only sometimes ummm I can clearly say that I'm not comfortable for eating food.

Me: Are you able to manage your feelings on food, if so, how do you able to do it ?
P1: Okay, its too hard to admit again but I'm going to be about like completely honest with that question, umm I was not able to manage my eating behaviors before but now I start some new era on my life with eating food. I can say (laugh) that I'm living on the edge because like I eventually I stop eating for good. How can I explain like sometimes if I think that I ate too much during the day I starve myself the next day until I feel comfortable again, until I see my flat stomach again, this is my skill actually, like every morning I check my stomach and if its flat, okay, it means that I can eat something, its completely fine but if I something like if I feel kinda like little bit fat on my stomach this is my umm scale so I started to using pills to cut my appetite and even sometimes if I can not stop myself eating or the pills are not affective as much as I think, I force myself to vomit in the end of the day. So, this is how I manage, I don't know either this is healthy or not but this is how I live know.

Me: Are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P1: First, I can say that during my P.M.S umm become like more emotional and that makes me like be more judgmental about what I eat, what I do so one time I was suffering from p.m.s again I wanna, I was craving for something you know sweet and I order some pizza and soufflé and when I pick up the food, I saw the oil of the pizza and suddenly I started to cry for all of the sudden I started to cry because actually I think that I'm just harming my body just taking this all oil and there is no need to eat that kind of food actually but I was craving like what I suppose to do like I ate it but I was crying at the same time so this is, that was my (laugh) biggest weird moment for eating and since I move in the London I actually like experience a lot because in here I don't know why I'm staying in the student accommodation so I live all my own so I don't have any friends like, actually I have friends but compare to back home, I have like best friends and I was avoiding to like get a real connection with people so like most of the time I'm spending my nights in my room so I ate like a lot of food and that makes me actually that makes me eating more than I used to and umm yeah since London I experienced a lot of moments with myself and I get to

know myself better so I'm not comfortable and I'm not happy with it. So because I ate too much and I'm too judgmental.

Me: Do you think there is a pressure about body appearance in London compare to your own country ?
P1: Ummm London is such a different city like that are lot of nationalities, that are lot of races and that are lot of like different kind of people living in here together but somehow they manage to live peacefully so I can say that no one do any comments about the other people, they all live on their life and they not involved others that much compare to back home, and I can say that like in here, I feel more umm more individual and more like self-confident because I know that no one gonna judge me based on what I wear, how I look or like where I come from umm but back home that was different because you known we have lot of like, maybe its a cultural fact but we are so like involved to each other so like we are, we have no barriers to comment on the other people even we just met we can just say that ooh you look fat or you look like your arm is fat fat or you're ugly bla bla people are cruel in there but in London,I don't know because we are never get real connections in here because everyone living minding their own business umm but in here I'm more self confident and I'm more how can I say, I can be everything I want because I know that no one gonna say anything about it.

Me:What do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?
P1: Okay, there is a slight difference between men and women umm no one, no one is like more judgmental based on the men's appearance but girls are always like even in our friendship, we always like compare each other, we always living in the kinda a race you know you have to be more skinnier than your friend even if its your best friend you always have that like unhealthy idea, I know its too like its too sad but we all that and also like specifically for myself, I always ask other people opinions about my body and I need to stop that because like its in the case my self confidence like I experiencing a lack of self confidence because like I always umm ask opinion about my friends like do I look fat today ? or my checks are fat ? Or like I always like umm make them comment about my body but also like umm its to hard to be woman because we have like we have that pressure like way too much than men because we are expecting to be like good looking ones, we expecting to be like skinnier like healthier and the like umm (stop) good looking and ummm for me its a, I really take care about my body, For example I hate even like I hate walking

but I found myself like 8am in the morning in a gym just because the other people said to me ahh you look fat today or this dress make you look fat or something umma I said before sometimes I use my pills to you know become more skinnier and umm yeah I'm living a life that I don't want to because just because I need to, I feel like I had to achieve this body image based on the other people saying.

Me:Do you think that there is a difference between how you manage your body image and how other women does ?
P1: For me there is a huge difference because like I'm just gonna say you something for example I was doing shopping the other day and I was looking for a skirt and for my body type I only can wear that one type of skirts but I really like these umm some kind of balloon skirts but I saw the other women like one of them was really fat, was looking at the same skirt but somehow I stop looking at it because I knew that if I wear this I'm not gonna look good but I saw at the cash point like she was actually buying it. So compare to other women like I'm forcing myself because I'm kinda perfectionist and I'm so obsessed with being a good looking and being a skinnier and being a, being a perfect the whole time. So I put myself a lot of pressure on that and even if I don't have to like because other people like can basically eat or wear whatever they want but for me totally different kind of scenario for me, I have to like punish myself if I ate too much, I need to like umm judge myself if I wear something like not suitable for my body type like but I actually kind a be more like other people because I saw that actually they are the happy ones I'm not the happy one even I look good, I don't feel happy.

Me: Okay, have you experienced a specific eating disorder or any eating disordered behavior?
P1: Based on my hahaha experiences I can definitely say that I'm experiencing some eating disordered behaviors but I never tack myself that I'm anorexia or I'm bulimia or anything I've never like, I was always avoiding myself to get these titles you know but of course based on how I live I can not say that I'm healthy about it I'm of course showing some ummm big umm behaviors like for example pill no one in my area taking the pills like not of my friends not of my relatives no one except me so clearly I have problems about it but I never talk with some professional or I never talk or I never even admit that I have like this disordered behaviors.

Me: Do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?
P1: Of course there is a big pressure from media and the other sources. It all started with newspapers I guess because I was seeing that ladies in the backside of the newspaper and that was like they were posting as ideal women and when ı was kid, even when I was 5 or 6 I was looking at those women and I was like rubbing my like tummy and I was saying my mum like I need to diet I was just age 5 and afterwards now we have that same pressure but the name is different its all Instagram right now, I'm completely blaming the social media on that because they just like, they are celebrities just because like they're famous just because their bodies like their looking so good and they're like photoshopping everything to become like more perfect than they are actually and umm for example from like, from before I had no option to see how women look like in LA or these celebrities how do they look like in their daily life but now first thing in the morning I check my account and I see that all beautiful perfect ladies and I see that how far I am being a perfect, having a perfect body compare to them, its just like a race and now we have to race international base its just making it even worse

Me: Do you think that media has an effect on your own eating disordered behaviors and your perception of body image? If so, how do you experience it ?
P1: Of course there is an effect because now I know that how should I look in the real life before that I wasn't even aware of my body that much but now I have an example, I have a perfect example and I can easily compare myself and look at my body like its all about genetics actually like some people couldn't even have like big breast or anything like big umm but umm anything its mostly genetics but now I forcing myself, I even think of getting the breast implant just because I saw ladies like they always have the beautiful breast like compare to me and umm and of course suffering from being not skinny so I have long way to go and I need to loose weight but it is too hard but umm thats why I'm starting to use, started to use pill or sometimes I just like I choose vomiting instead if I can not stop myself from eating so yeah there is a huge pressure on me.

Me: What do a healthy nutrition and a healthy body image mean for you?
P1: I was always being told in the schools even in the middle school like which is a good for your body, what should you eat like, what should you do to keep your body healthy, there was a like there is lot of documentaries about it I know that everyone knows what is good for your body like for example vegetables, they can not say that vegetables are

harmful for your body of course there is a like there is facts over the world but for me its kind a special, for me is being a healthy body like having its all about like having muscles or like all about like when I sit down there is no-nothing to hide, you know nothing to, don't have to suck my stomach or anything so this is being healthy for me and I can not say that I'm completely healthy but of course I know what is healthy what is not and of course I can not just say that I'm only umm thinking about muscles or having a good body of course I'm aware the facts of like I should get protein, I should get carbs, I should get everything to you know being healthy but at the same time I know that there is a lot of work to do so yeah being healthy is so hard deal for me right now.

Me: Okay, thank you for your participation
P1: Thank you

Participant 2:

Me: Hello, Why would you qualify as an interviewee ?
P2: Because I think, I have some traits that could qualify as a parts of the eating disorders.

Me: Okay, how do you feel about your body ?
P2: Umm, Okay sometimes I don't like it, sometimes I think its nice. Sometimes when I feel bad about my body, umm I- I think, especially my stomach and my thighs look really fat, and then I didn't have mindset that I should eat less or eat healthier. I'm go to the gym but then I don't have a high enough motivation to actually to do something against it so I just wait until the feel is passes. And then I forgot about myself again.

Me: Hmm, do you have any experiences to support that feeling? If you have, how do you manage your feelings ?
P2: When I was younger, a boy I liked told me that I'm actually really pretty if I would loose a couple kilos (laugh) and then that make me feel really bad about myself and it took me a couple years to get over what he said that was one of the experiences I had with it and then ummm usually (stop) I don't have a big body issue problem but sometimes especially in summer when I see other people who are skinnier than me or have a body that I wish I had, I get also really sad about it. I manage this umm usually just by leading time pass over it because I don't like, as I said I don't have enough motivation on being sportively active or changing my diet.

Me: Okay, did your feelings about your body have changed after you moved to London ?
P2: Umm I think I became more self confident after moving to London. Not only about my body but generally as a person. I think I became more mature and umm that involved having about a better body image of myself.

Me: Okay, how do you feel about eating , do you feel comfortable during your eating process?
P2: Yes. Umm I- I usually do feel comfortable with my eating process umm and when I'm hungry I usually don't cut back on eating but umm sometimes umm from time to time when there is something, when I eat too much sweet staffs or sugar staffs or staff that I feel will make me gain weight thats the only time I stop myself and umm just don't eat and rather stay hungry instead.

Me: Okay, are you able to manage your feelings on food, if so, how do you able to do it ?
P2: Umm usually I have a good feeling about food because I enjoy good food or eating but umm there has also been times when I have been really bad with managing my food and where I took fat burner pills right after eating or before eating, for long period of time because I thought that would help me move towards my goal weights or my goal body so I know that I have unsuccessful managing my-my feelings towards food for sometime but umm it also comes and goes in a waves.

Me: Okay, are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P2: I think there have been some moments when I thought I over ate and I'm manage that through compensating and not eating for the next few days afterwards but umm usually umm those moments passed after just a few days and then everything like my eating behavior went back to normal. And ever since I came to London I don't think the amounts excessively changed to either more or less. I think it states stable to how it was before.

Me: Do you think there is a pressure about body appearance in London compare to your own country ?
P2: I do think there is a certain pressure on body appearance which is umm which is influence the load by the your social surroundings also staff like social media and staff, but I think, when I moved first to London, I thought that in London it was a bigger issue or bigger pressure to be more skinny or more stylish or more nice appearance wise but I think

after living here more than 4 years now, that in Turkey actually people care more about it and in London people are a little bit more open minded about it and less judgmental.

Me:Okay, what do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?
P2: Me personally, I've never had the very big pressure to look a certain way but umm (hesitance). I think the biggest pressure I've ever had was the pressure, I put on myself rather than other people putting it on me and umm the way I respond to it, is just try to exercise or eat in a certain way but I'm- I'm not able to carry out this behavior in a constant way so I think thats my respond to it, just trying to eat not bad most of the time.

Me: Okay, do you think that there is a difference between how you manage your body image and how other women does ?
P2: I think there is because there has been lot of women in my surroundings that struggled a lot with body image way more than I did and those people are also more excessive in their behavior, those people I think umm would be more careful about counting calories or working out of certain amount of times during a week umm and I think my own body image (stop)… yeah I think umm the way I manage my body image is more than that I fe- feel bad about it internally but I'm really bad at doing something about it and I think other women are actually better at doing something against how they, against the negative feelings they experience with their body image.

Me: Okay, have you experienced a specific eating disorder or any eating disordered behavior?
P2: I wouldn't say I have a hundred percent eating disorder but I do think I have some traits that could count as one. For example, a couple years ago up until I think one year ago or two years ago I would use a lot of fat burners and also try to go long periods without taking any food umm and now compare to how it was before its got a lot better but I can't say that I have hundred percent over come it and even now, from time to time I show this behavior by not eating for a day or two, or umm sometimes I rarely take, I still taking food supplements like the fat burner pills.

Me: Okay, do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?

P1: I think there is a very high pressure on media umm-umm putting certain appearance towards women umm because when we see how media is nowadays, there- I think probably 99% of the women we see have the perfect body or very thinned or very tall umm and I think its very unrealistic to expect from everyone to look the certain way and I think that by showing people only this kind of body type makes them feel that everything other than that is wrong so I think umm media needs to be more umm there needs to be bigger variety of portrayed people to make umm people feel more confident about themselves and about their bodies.

Me: Okay, do you think that media has an effect on your own eating disordered behaviors and your perception of body image? If so, how do you experience it ?
P2: I think when I was younger, when I was a teenager it used to affect me a lot more, umm also up until I first started to university maybe because I can say it always showed as ideal to have a very skinny body but umm I-I think I wouldn't last year so this hasn't been in the case anymore and I would also say that for example people from my own social circle umm were more influential on me than people in the media like for example if I would see a skinny model I wouldn't be thinking oh I wanna look like that but if I would have a close friends that is very skinny I would think there would be high possibility of me thinking oh I wish I look like that too.

Me: What do a healthy nutrition and a healthy body image mean for you?
P2: A health body image I think its just being comfortable with your body and health nutrition just means that umm, it doesn't mean that you necessarily need to cut out everything that sugary or fatty but just having a balanced diet and eating whatever you want but also looking for a healthy alternatives or healthy supplements because in the end if you don't take care of your body in a good nutrition way umm your gonna feel sick and look sick too.

Me: Okay, thank you for your participation

Participant 3:

Me: Hi, Why would you qualify as an interviewee ?
P3: Umm because I'm having binge eating disorder and I have some eating disordered behaviors that's why I thought that I'm fitting this interview.

Me: Okay, how do you feel about your body ?
P3: Umm, recently I have been feeling good about my body but time to time, I find myself umm hating my body, see my big tummy after, right after eating umm I regret what I have done and umm time to time I don't feel comfortable in my body. Yeah thats it.

Me: Okay, do you have any experiences to support that feeling? If you have, how do you manage your feelings ?
P3: The experience umm I can, I can mention, I can talk about umm the first eating disorder, no, the binge eating attack umm in the first year of university I was quiet skinny, I was talking with a guy and I thought like our relationship, it wasn't a relationship but ı thought that our communication was good and one day he posted a photo on Facebook with a h-, with a hot girl, and her body was like a curvy and she was having a boops and it was so obvious in the, in the photo and it make me, it make me feel like a shit and right after that I found myself in the market like buying a lot of junk foods and the umm (stop). Yeah, how-how I am umm managing my feelings umm right, currently I-I I have been seeing therapist and the psychiatrist and I am under the umm medicine right now, I'm using medicine.

Me: Okay, did your feelings about your body have changed after you moved to London ?
P3: My feelings about my body umm it changed a bit because I feel more comfortable being in London when I compare to my home town. Umm people are less judgmental here and they don't really care what you wear, how you wear it and or like how you look like, and also no one knows me here and don't know anything about me and the people that I met here they don't my passed because when I remember my university time like for instance in the third year umm when I umm saw a friend, she noticed my change like body my body was obviously different when you compare, when I compared to the first year and I was like literally chubby and she was mentioning like how did you change, how come you get gain that much weight and when I remember that, umm when I remember, whenever ı remember that umm time, I-I hate, I really hate that girl. (laugh)

Me: Okay, how do you feel about eating , do you feel comfortable during your eating process?
P3: It, it really about what you eat actually and the for instance if you something healthy, if I eat something healthy, I feel comfortable and I feel fresh and healthy but whenever the binge attack comes, I-I eat lots of junk foods and umm like weird stuff and umm I really hate it but during the binge eating you don't really aware of what you haha, what you eat,

how you feel you just wanna feel your stomach like until you get bothered. And umm but mostly after eating makes me, after eating actually is a nightmare, the process is not important in the binge eating. And also, I wanna, I wanna add that umm I feel guilty and shameful after, after the binge attack and umm I find myself, I tried this many time to vomit. But I'm not able to vomit but I'm using some laxative after that and some fat burners and umm I know that this is not something healthy to do and as I mentioned before the process, the eating process it doesn't really affect me but the after eating its really awful.

Me: Okay, are you able to manage your feelings on food, if so, how do you able to do it ?
P3: Umm am I able to manage my feelings on food.., umm I am I'm trying to, I'm trying to see what is healthy and what is not and I'm a- I'm trying to learn more about the food umm the more that I learn, the more, more I'm aware of what I am doing,I think do- , its better to, its better to get help and read a lot umm and (stop) except getting more knowledge about the food and what you should do, what-what is better to do, umm to dealing with the feeling right after the binge like because I mentioned before I feel guilty, I feel shame umm I'm umm like later that day I'm fasting or as I said I'm using laxative pills or fat burner and because I really hate seeing myself with a full tummy big tummy and the bloated and the thats why if I keep myself a bit in hunger umm this is not something healthy to do for sure I need to mention it but umm I feel more comfortable.

Me: Okay, are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P3: umm over-reacted to the way I, the way I have eaten umm in general I I react in the same way after eating but when I umm let me explain like this my family is not really aware of like what I am going to through because I- I don't like to share these kinds of things with them but when they catch me like I am eating like shit foods or like I'm mixing the foods or like we just had dinner and they are finding me like I am (pause) digging the planet and eat like a pig, they are giving me a bad look or they are judging me and over-reaction starts there and like umm we fight and like I use, I say some bad words but I don't really do anything except like doing fasting, laxative and the using the fat burners and when I mention, when I moved to London I think being here is help me to over-com, I didn't really overcome binge eating but I feel more comfortable here like as I mentioned before like umm people are not that judgmental and I'm not having judgmental people around me umm so I'mm handling better here.

Me: Okay, do you think there is a pressure about body appearance in London compare to your own country ?
P3: Umm there is a body pressure umm is a pressure about my body appearance ?, yeah definitely there is, in my country umm if you are fat and like wearing a short they maybe its probably you can se-, you can face with like at least two people they are making fun of you and or giving a bad look because like why the fuck this fat girl wearing a short and but people don't really care here like if you are fat if you are skinny you can be whatever you want, they don't - they don't really judge and I really like this thing about London umm if I wanna give an another example, for instance in my country if you are fat and having a boyfriend its, its really people find it really weird like how come like a fat girl having a boyfriend because they literally they don't find them sexy or beautiful at all and they don't umm they don't used to see a fat girl with a girl like umm with a umm normal weight guy but here I can see many fat girls or over weighted girls with normal weight guys and yeah its its I'm also not shocked but I'm not used to this that much but what I noticed people are more comfortable in that kind of relationship and the people don't don't (haha) who you are dating with.

Me: Okay, what do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?
P3: Umm recently, the pressure on women in most of days is really high. The physical appearance everybody think think or not think but like expect that you should, you should have a skinny body like you should be like a model and like you should always be pretty and like you should always be wearing, make-up but no we women are also dealing with lots of problem in the day and most of us don't have time to do such things but one day if you don't put make-up, they are looking at you and they are saying like are you sick ? No this is my normal face thats it but umm the Instagram and social media and the umm runways and these kinds of things like umm especially affects young girls and their eating habits what I believe and how do I respond to this situation ? (laugh) I'm trying to not follow any umm any fashion thing umm like I hate like popular diets, I have never done any of them and for for the, yeah thats it actually.

Me:Okay, do you think that there is a difference between how you manage your body image and how other women does ?
P3: Yeah, I believe that I'm having the wrong body image umm for myself and even though like I'm not over weighted and not even like I'm like even like over 65 kilos but I don't like

wearing like shorts because I think if you are wearing a short I think you should be having like umm skinny legs, long legs umm I think some clothes should be (laugh) wear, umm should be umm should be wear from some type of women and also I am aware of that this is something really really wrong but when I see people that they are not really care wear short like short skirts, they, its obviously they love their body and they feel comfortable whatever they they, they feel comfortable whatever they wear.

Me: Okay, have you experienced a specific eating disorder or any eating disordered behavior?
P3: Umm yeah as I said I'm dealing with the binge eating disorder and the eating disordered behaviors making myself putting myself in hunger while using laxative and using fat burner these kind of thins like eating disordered behavior obviously.

Me: Okay, do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?
P3: Its obvious that media and fashion industries supporting this situation like being skinny, being a pretty and these kind of things are so supported by the media and the effect on the eating disorders, people are, I also do this, people are comparing them self with like models or like umm famous famous people because mostly their bodies is their bodies is, I don't wanna say that because their bodies beautiful but actually everyone's bodies is beautiful whatever weight they are but umm lets say skinny lets call them skinny. We are comparing us with them and we wanna wear some clothes like they do but obviously if you can not fit such kind of clothes, it makes you uncomfortable and you are questioning yourself like why, I should be like them, I should wear like them and it makes you stressful actually.

Me: Okay, do you think that media has an effect on your own eating disordered behaviors and your perception of body image? If so, how do you experience it ?
P3: Umm umm media, lets say like this thing happened two weeks before, I was checking my Instagram page and the eating a pizza it wasn't a binge eating at all but ı was eating something unhealthy it was obvious and the umm there is a model and she is working out and she is so skinny she is sweating and she look perfect and I'm eating a pizza like sitting there like a piece of shit and full of mouth and the I really felt my self so bad okay I didn't leave the pizza alone (haha) but it made me feel so bad and shameful at the same time umm thats it.

Me: Okay, what do a healthy nutrition and a healthy body image mean for you?
P3: Umm healthy nutrition means for me a food without a chemical not packed, plant based foods and or plants and natural things are like healthy nutrition for me and a healthy body image, rather than maybe I should rather than talking about the image, maybe I should say like having an illness or something else. If you are skinny and if you are sick, it doesn't mean that you are having a healthy body but umm healthy body image, I think everybody is, I don't have an image of healthy body in my mind okay like media and the most of people believing such a thing or support a idea healthy body image like should be like this but no, if you are not sick and not having any problem in your body it means that you, you are healthy

Me: Okay, thank you for your participation
P3: Your welcome

Participant 4:

Me: Hi, Why would you qualify as an interviewee ?
P4: I think I have eating disordered behavior, I'm aware of this. I think I'm a good candidate for your research when you told me your research, I think I can be a good candidate for your research, thank you.

Me: Okay, how do you feel about your body ?
P4: Frankly, I never see myself skinny enough that is why I always push me, push myself harder to loose weights sometimes I fast I don't eat and I go to the gym regularly, actually sometimes I go twice as a day or more than twice, my umm my longest period to stay in a gym is like, was like 6 hours so yeah, I don't see myself skinny enough, I never see myself skinny enough. There is always a problem when I see myself in the mirror.

Me: Okay, do you have any experiences to support that feeling? If you have, how do you manage your feelings ?
P4: Well, when I was in high school, I had a serious relationship and then I realized that my boyfriend actually had been cheating on me with a super, super skinny hot girl and when I, when I umm learnt this, it made me feel awful and after this actually I started to di-

eting and after this situation actually I started to loose weight and go to the gym and fast myself. It was, I think it might be first step to enter this world. I'm not sure but I think so.

Me: Okay, did your feelings about your body have changed after you moved to London ?
P4: Well to be honest, I feel much more comfortable about my body after moving to the London because here in London, English people are much more relax about their appearance, they don't care about it at all, they don't look at you that much at all so it makes me a little bit umm more relax about my body but still I have some issues actually, I can't I can't say that I'm totally relaxed, I still have issues, ı don't see myself skinny enough but yeah London makes me a slightly changed, slight just slightly.

Me: Okay, how do you feel about eating , do you feel comfortable during your eating process?
P4: No (laugh), Unfortunately not, I don't like to eat at all, I eat only to survive, I eat when I starve like I have to eat to survive, I have to eat to live that's why I'm eating but otherwise I don't eat so much for a day umm and also after eating most of the time I feel so shame (stop), one time after McDonalds because my friends took me to the McDonalds once like maybe three years ago, it might be my last McDonalds ever and I cried (stop). And also umm well to frankly sometimes, sometimes I use fat burners as well umm I used to use them a lot in Turkey but here I reduced them but I still have, I still sometimes use them especially if I feel like I ate so much, if I feel like I eat so much then I definitely use them but most of the time I barely eat (laugh).

Me: Okay, are you able to manage your feelings on food, if so, how do you able to do it ?
P4: Umm, I think I don't, I'm not really capable of the manage my feeling about food, I-I never, I can not say that I really try, I'm really trying, I don't try at all but no I- I don't manage myself at all and I don't have any knowledge about this but I think like my manage umm my manage umm is like if I eat, if I feel I eat, if I feel like I ate so much I just fast or I go to the gym or go to the gym even more and fat burners, this is my managing process.

Me: Okay, are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P4: After moving to London nothing changed actually, I usually don't, I usually eat, if I eat so much I fast myself but if I especially on my period times umm unfortunately I really want to eat something like desserts like sugary like chocolate or something so sometimes just

the square I eat just the square of a chocolate just one square I let myself to eat only one square of chocolate on my period, in my period time and even though that square of chocolate, only one square of chocolate make me feels so bad like I feel so bad after eating that chocolate and fast like maybe seven hours and ugh I don't want to say this but I feel like almost cry, I feel so bad (sign)

Me: Do you think there is a pressure about body appearance in London compare to your own country ?
P4: Well, I told you this before actually here I noticed that, I observed that people are much more relax about their body, they're relax about their appearance, they're relax about what they're wearing so I'm way much more relax about my appearance after moving to London but not completely I still have so much issues, I still don't feel skinny, I still see myself fat, but I wouldn't say that it increased, no. And also, definitely in Turkey the pressure is way much more you can feel the pressure of your body appearance, way much more in Turkey, I don't know maybe in Turkey like people look at you what you wear, what you look like, and they are so mean, sometimes they can even like told you aa your hips looks so big in this jean or like oh did you gain weight? Or something like, they, they are mean, here in London I observed that they don't ask you, if they think that you gain weight, its not their problem, they never ask you but in Turkey actually they ask you so this is the difference.

Me: Okay, what do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?
P4: I, I am well, umm I think especially social media has a so so strong pressure on the women because of all the models, all the singers in social media, I've always seen them, I've always seen them, I've always seen their perfect body with their perfect perfect make-up so I always feel like I would like to be, I would like to look like them, I would like to them, it make me feels like I'm not good enough, I'm not beautiful enough, I'm not skinny enough so yeah and also like men, they want you to be skinny. If you're like fat, I feel like I can not find any boyfriend. I'm single now and it makes me fierce even more.

Me:Okay, do you think that there is a difference between how you manage your body image and how other women does ?
P4:Yeah I never understand other women like I've seen lot like my friends or other people around me like other women they don't care about their fats, their appearance, they have like big tummy, big ass and they still wearing like skinny jeans. If I had that big ass I

wouldn't go out. I don't know, I don't, and they don't care. I don't understand how they don't care. There are a huge difference between them and me. Definitely, I know, I'm aware but I can not, its not, its not on me, its unconsciously, I-I, I don't know.

Me: Okay, have you experienced a specific eating disorder or any eating disordered behavior?
P4: I never go to a doctor or something for this but, that's why I can not say that I have this or I don't have this but I think I have some eating disordered behaviors and because I don't eat at all, I fast, I don't- I hate eating, I go to the gym a lot, and I use fat burners so I can't say that I am but I think I might be, I might be, yeah.

Me: Okay, do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?
P4: Oh my God, is this question is real ?, Of course, yes. Open the social media once, all these advertisements or like TV or like Youtube, all the advertisements, they always using like super hot, super beautiful, super skinny girls and they al- they never use like super tall and super muscly men but they always use the skinny girls, skinny beautiful girls so yeah of course social media has a huge impact on me of course yes.

Me: Okay, do you think that media has an effect on your own eating disordered behaviors and your perception of body image? If so, how do you experience it ?
P4:Yeah, yeah, yeah, yeah, yeah definitely yeah for example when I see a model or when I see like, for example yeah yeah for example when I do online shopping like the-the pictures, they show the pictures with like the beautiful skinny models and when I order something online and if it doesn't fit me at all like when it came, it does not fit me as as as the model fit on her umm in that dress, I feel awful. And then, I go to the gym hours and hours sometimes I cry, I don't eat anything, fat burners, yeah of course there are huge impacts on me. I think everybody feels this, I think it happens to everybody, don't ? Its just me ? And furthermore, if I post something on Instagram or Facebook I usually, I don't want say, its so embarrassing, its so embarrassing but yeah I do, I do photoshop (laugh). Its so embarrassing but yeah I do photoshops yeah.

Me: Okay, what do a healthy nutrition and a healthy body image mean for you?
P4: A healthy body image is (laugh) just like open a Victoria's Secret fashion show and or like advertisement and see that girl thats the perfect body image for me (laugh). Long legs,

flat tummy so yeah Victoria's Secret models and healthy eating its for me actually, as like eat whole foods and eat less. Less is better.

Me: Okay, thank you for your participation
P4: Thank you

Participant 5:

Me: Hello, Why would you qualify as an interviewee ?
P5: Hi, I qualified myself as an interviewee because I think I have eating disorder problems, I'm obsessed with my body type and body image and with my weight.

Me: Okay thank you, how do you feel about your body ?
P5: Umm, I don't feel confident at all. I feel I have a little umm extra kilogram on myself. I wanna be more thin and I wanna be size 0 like umm all the celebrities out there and I feel umm I'll be umm like I feel I can be more happier if I'm less like 45 kilograms.

Me: Okay, do you have any experiences to support that feeling? If you have, how do you manage your feelings ?
P5: Umm I have umm like when I eat to much I feel myself guilty and sometimes I force myself to vomit and I sometimes umm like one time I remember umm I-I I met my boyfriend that time like 3 years ago and it was the first time he was gonna see me in a bikini and first thing he said is like oo you look bulky and I felt very bad and I felt very guilty about myself and umm and I remember it was the first time for me to vomit and it was like it was a beginning of my eating disorder problems started that day. And after that day, ı started to go to gym like everyday, like crazy and I even fast myself like I didn't eat anything at all, I was like, I was in a really miserable umm situation.

Me: Okay, did your feelings about your body have changed after you moved to London ?
P5: Umm, my umm my, yeah my problem little changed in here because people are more umm I mean they are less judgmental and they don't care about your weight, your height, all of your body image or how they are look, how they appear but people back in my country, they're more obsessed about your appearance, your weight, they judge, they judge you by how you appear, how you dress-up, with your body type and umm I feel more confident in here and ı think London is more umm welcoming about this situation.

Me: Okay, how do you feel about eating , do you feel comfortable during your eating process?
P5: Umm I would say to be honest, I don't feel hundred percent confident about it because when I eat like or when I before I'm eating, I'm even decide what to eat, I think about it, if I even wanna go crazy, when I have like a fast food, I think it twice before eating and afterwards I feel very guilty about it like I even like ask myself why did I eat it, did I really need that that' why I always go to umm go to choose like eat umm some healthy dishes like salads, vegetables etc. that's why I don't feel umm hundred percent confident about my eating process.

Me: Okay. Are you able to manage your feelings on food, if so, how do you able to do it ?
P5: Umm, I try to manage myself but when I eat too much I can go crazy sometimes, I can go to vomit and that's why I'm not hundred percent able to manage myself. I remember one time umm me and my boyfriend, he like forced me to finish-up like one large pizza and I afterwards, when I finished it I felt very guilty and I like I felt disgusting about myself and my body and I forced myself to vomit, I cried that night all day and umm yeah like when I go like when I go out of my diet I can go really really crazy about it. I feel like I wanna get rid of that calories right away that's why sometimes I use fat burner pills and I know its a really really bad thing to do at yourself but I don't know I can't control myself, I directly wanna get rid off that calories thats so I use it.

Me: Okay, are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P6: Umm, I wouldn't say it didn't increased or decreased that much but as a particular moment as I said before, me and my boyfriend we had that huge pizza and I felt really guilty about it and I vomit, I cried at all night and then I had that pills but like since moving in to London, I feel more confident about my body image but umm since I'm away from my family and my hometown umm there are, there are umm less selection for me as healthy food like in back at home like there is always cooked healthy dishes at home and here I'm with school stress, I find myself at like fast food restaurants more often and I eat more umm fast food more often like so it didn't decreased or it didn't increased like.

Me: Okay, do you think there is a pressure about body appearance in London compare to your own country ?

P5: Umm, as I said they're less umm umm they're less stressful about it umm like in people in here they don't judge you by your appearance, they like they're welcome you as who you are with your height, with your body type, there are lot of people form all over the world so people don't don't belong to one one umm same appearance there are lot of body types, lot of genders, lot of umm people from all over the world so I think London is more umm accepting about this situation.

Me: Okay, what do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?
P5: I think there are lot of pressure nowadays since we all use social media like we all like follow our favorite Hollywood stars or favorite models on Instagram and we always see them in their real life, umm like we can, we can see them every day with their like bathing in their bathing suits like in their ever day life so there is since there is a easy access to social media we always compare us to them that's why there is a very bad impact on us we always wanna be like them like we wanna look like them that's why for me and I know for my friends, for my family we all do that to ourselves so there is a little, there is a very bad impact on us with social media these days, there is a huge pressure on us. Since there is a huge pressure on us like even we can umm even as supermodels like seen with a little bit umm if she has a little bit extra weight on her, it can be a very huge scandal like she's all over the papers with like umm body shamers but there is a like I think its because of this umm impression by social media say like everyone should look to be like all skinny, we should all look the same bla bla all the same thing but its like its not the same on men like men can be umm a little overweight, he can even be fat but he can still be like sexy and he can still be like seen as like the bachelor of the year like the super sexy of the Hollywood but its not the same for women I think.

Me: Okay, do you think that there is a difference between how you manage your body image and how other women does ?
P5: I think I do umm I find myself more umm ı can be more aggressive about it as I said to you earlier, I can go little crazy about with when I like even when I see a friend umm and if she says me like aa did you gain weight bla bla I can be like a like umm obsessed about it like I can like fast myself for days even just to loose that weight, I can go to fat burner pills for easy solution, I can go to vomit, I can go really I can go aggressive I can be like obsessed about this but I think other women they can be umm they embrace theirselves as who they are and they can be more umm they don't care as much I do I think.

Me: Okay, have you experienced a specific eating disorder or any eating disordered behavior?
P5: Umm I yeah I experience myself as specific eating disorder as vomiting myself going to get the fat burner pills or fasting myself for days and umm ı think I have a very very very big problem about this healthying disorder.

Me: Okay, do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?
P5: Yeah as I tell you before, I think there is a big perception on women these days umm I think its because of the magazines, because of the social media, Instagram, they umm they define this perfect beauty through women saying that like every women should be have a umm perfect skin like umm very thin very skinny, she is tall, she is like size zero, she is good on like hair bla bla bla so they define this perfect beauty and we define ourselves in this circle and defined by social media and by like beauty magazines and staff so I think this very very difficult for women.

Me: Okay, do you think that media has an effect on your own eating disordered behaviors and your perception of body image? If so, how do you experience it ?
P5: Umm for me, I find myself like even like looking at magazines like umm I remember one time when I- when I'm watching the Victoria's Secret annual show and they interviewed models before that and they asking them like what is your umm what is your umm diet, what is your work out routine etc. and I remember one time a girl like 18-19 years old she said I-I don't remember myself when I eat French fries like last time when I eat French fries, I was age 3 or 4. I remember this and then its really like affect me and I always think about like when I eating fast food I feel like umm they never eat this bla bla bla, they fast themselves like before and I remember they saying like before to going to that show they only drink smoothies that for one week, they don't even eat like solid food. And I think because of that I find myself in this circle umm because of this beauty image created by media, I force myself to be like them and I e en like fast myself and maybe I even have this eating disorder because of this image and umm that's why I think this social media trends really really affect women in a really bad way.

Me: Okay, what do a healthy nutrition and a healthy body image mean for you?

P5: I think a healthy body image is like it can change to everyone umm considering age and body type and like healthy issues like I think everyone shouldn't be the same, shouldn't be all skinny, shouldn't be like all the same and I think people can be healthy if they feel themselves as healthy but I think women should be healthy if they like umm they look normal without like without seeing of bones, of skeleton of themselves but they can still they can be like umm like fat but they can still be healthy, if they don't have like any health problems, they can all be umm healthy I think. But for my body image concept , I know its wrong but I think I should be like very skinny, size 0 and like umm I like that way even myself I know its wrong though but, for healthy nutrition I think umm their like what we eat is what we are so I always prefer to go organic and like just maybe just vegetables and proteins umm I can eat like all umm meat, chicken umm seafood and vegetables, I think its healthy if it is like organic and you know where its come from.

Me: Okay, thank you for your participation
P5: Thank you, bye.

Participant 6:

Me: Hello, Why would you qualify as an interviewee ?
P6: Umm because I'm having some eating disorder problems and umm I think it would be helpful to answer this questioner.

Me: Okay thank you, how do you feel about your body ?
P6: Umm I feel insecure sometimes and I avoid looking at mirrors and I avoid being in the scale because I'm afraid of the amount its going to be written in the figures but it just comes and goes its not a constant feeling, its just happens every now, we can say like every month and I really like to umm stay thin and fit, if I gain weight it just umm affects my mood and I feel dissatisfied from with my body and I avoid wearing pants or leggings because I think it just not look good on me.

Me: Hmm, do you have any experiences to support that feeling? If you have, how do you manage your feelings ?
P6: I tell myself that umm its only my thoughts, its in my mind and whatever I think its become reality so I'm try to stay away from these umm things, thoughts and try to concentrate on different staff umm I-I open up book or open my laptop to watch a film and I also

read about umm eating disorders and the body image and every every other things that might help my way of thinking.
Me: Okay can you be more specific about do you have any experiences to support that feeling ?
P6: Which feeling?
Me: Bad feelings about your body?
P6: Hmm, umm I can't be specific on this because it just the mood you don't have any moments or you don't have any timings on this it just comes and goes, it just stays in your mind, its your inner voice, so, I can not specify a certain time or certain place that I have it more.

Me: Okay, did your feelings about your body have changed after you moved to London ?
P6: Umm yes because moving to the different place and adopting to different culture is always hard and I umm at-, in my first months I avoid eating so I really eat little and I don't think that I got enough nutrition and afterwards it just umm happened to opposite so I ate umm more than usual so it would it was like an imbalance diet for me over the past eight months.

Me: Okay, how do you feel about eating , do you feel comfortable during your eating process?
P6: Umm yes I do sometimes I count calories and sometimes I just don't care about what eat or than I go in a period of eating healthy foods only and avoiding sugars and umm refined sugar umm meals so yes its really changing.
Me: Do you feel comfortable ?
P6: No, I'm not no.

Me: Okay, are you able to manage your feelings on food, if so, how do you able to do it ?
P6: Umm sometimes yes sometimes no, when I count it just I end up eating more and its umm usually sugar, sugar chocolates, sugary things umm when I can I just thing that umm my thoughts will affect my behavior so I try to focus on the outcome of eating healthy so I know that eating the bad food, bad food or the sugary staff over and over again will only give me a umm small happiness but in the long time it will affect me umm in the opposite direction so I umm constantly umm remind myself that I should focus on the long term happiness of myself rather than being on the stuck of being in the short term but its really hard to do it all the time so that's why sometimes I can't feel to do it and sometimes I suc-

ceed when I succeed I really proud of myself but when I failed I-, at the same time I feel ashamed.

Me: Okay, are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P6: Can you repeat the question ?
Me: Yeah, are there any particular moments where you over-reacted to the way you have eaten ? If so, have they increased since you moved to London ?
P6: Umm yes its definitely increased after I moved to London but umm I, its the, the over reaction haven't umm didn't happen in umm when I'm in a social environment, its happen in again in my inner voices and it happened when I'm alone at home, eating too much, eating too less and I just, it just the constant voice that inside my head but its not like I over reacted umm to what I eat in front of some one else.

Me: Okay, do you think there is a pressure about body appearance in London compare to your own country ?
P6: Umm actually I think in my own country, in my own country the pressure about body appearance is umm a lot and I feel mostly more comfortable where I wear and the body image that I'm having in London umm and so yes I think in Turkey umm I felt a bit more umm pressure on my body image maybe its due to I'm umm my all friends are there, my umm ex-boyfriend was there so here I'm a single and I'm meeting with new people so they, I don't feel the pressure that much when I compare to Istanbul, Turkey.

Me:Okay, what do you feel and how do you experience about the pressure put on women towards physical appearance? How do you respond?
P6: I think the pressure umm which put so many umm which emp- umm, I think the media and all the super thin models and every other thing, it just putting umm a lot of pressure on every women and I personally believe that umm that's why it causes so many insecurities about people's identities and one umm oneself and I really feel low sometimes when I, also the social media affect I really think its really affects because every post on social media must be look perfect and then umm you want to look think and fit and the reality is your not so it just umm you just want to go to this ideal woman appearance but you never get there so it really bothers me a lot.

Me: Okay, do you think that there is a difference between how you manage your body image and how other women does ?
P6: Umm I don't know because I like I don't compare body image with someone else I always compare my body with myself so its like the umm the competition is always with myself. I really want to be more fit and thin all the time umm comparing to my previous years so if I gain weight I feel bad because that wasn't where I was for example a year ago but its never the, the comparison is never the, never umm in between other women and I think when I gain weight I just put so much emphasis on it comparing to my other friends for example a lot of my friends have no, they don't question what they eat during the day, they're just comfortable with what they eat, they go eat pasta or they have a chocolate cake with a coffee but I never had that umm feeling of not choosing what I'm going to eat. It just there all the time in my mind so I think there is a difference between me and how my peers, my friends see the food and see the body image.

Me: Okay, have you experienced a specific eating disorder or any eating disordered behavior?
P6: Yes I had bulimia which started five years ago and I still umm like it just comes and goes. I didn't have bulimia in past one year but when I moved to London, it just suddenly appeared again and I'm just trying to maintain the those feelings and umm old habits and sometimes its really umm hard and frustrating. And I also like when I first started, when I first understand why I am, what was wrong with me I searched on Google and I wrote vomiting and binge eating and using fat burners and all of a sudden I saw this list which says that the bulimic person does those actions so umm it was really hard to confront but yes I did vomit and I eat-ate too much, when I ate too much and I, when I ashamed myself I just umm vomit.

Me: Okay, do you think there is a media pressure and effect on eating disorders and the perception of body image on women, if so, what kind of pressure is it?
P6: Umm I definitely think that there is a media pressure as I previously mentioned and I think it really affects more and more people's life and especially teenagers, teenagers' life as they grew up with those images on media and they bombarded with all of these perfect body image and thats I think the reason, thats actually the why umm recently eating disorder problems just increased so much and I also felt the pressure on me so I try to just avoid looking at that those things or try not to umm focus on those sides of the social media whether than this I try to umm look at from a different perspective and I try to convince

myself that they are only photos and pictures and they're high photoshopped and the body image are, those body images are unreal and for example when I see a Victoria's Secret model or other models I say that their umm job is to maintain that body and I'm just a student and I'm umm I don't have such a responsibility to look so thin and perfect because thats not what I want from my life.

Me: Okay actually you already answered that question but do you think that media has an effect on your own eating disordered behaviors and your perception of body image? If so, how do you experience it ?
P6: Yes it also, yes I am already answered but I can just add something more umm I think yes media has definitely umm downward effects and umm I think millennials would will suffer from this a lot.

Me: Okay, what do a healthy nutrition and a healthy body image mean for you?
P6: It means healthy nutrition is having the, having a balanced diet for example eating more proteins and vegetables and more greens umm and also not eating too much at a once so you have like good breakfast good lunch and then a good dinner with a mixed I don't know a mixed of proteins and vegetables and other staffs.
Me: And healthy body image ?
P6: Healthy body image is umm the, its not I don't want to say thin I want to say healthy looking fit kind of looking, it just umm I don't know how to describe it but maybe a bit muscular not muscular with some muscles rather than just just skin.

Me: Okay, thank you for your participation
P6: Thank you for your questions.