



UNIVERSITÀ DEGLI STUDI DI PADOVA

Dipartimento di Psicologia Generale

Corso di laurea Magistrale in Psicologia Clinica

Tesi di Laurea Magistrale

The “One Size” Country:

An investigation on eating behavior and body image in South Korea

Relatrice

Prof.ssa Valentina Cardi

Correlatrice

Dott.ssa Ludovica Natali

Laureanda: Ada Crocilla

Matricola: 2080918

Anno Accademico 2023/24

TABLE OF CONTENTS

ABSTRACT	6
INTRODUZIONE	8
CHAPTER 1	15
1. An Introduction to Eating Disorders	15
<i>1.1 Classification and Characteristics</i>	15
<i>1.2 Epidemiology</i>	17
<i>1.3 Risk Factors for Eating Disorders</i>	19
<i>1.4 The Tripartite Influence Model</i>	26
<i>1.5 Self Objectification Theory and Feminist Theory</i>	30
<i>1.6 The Role of Culture</i>	32
CHAPTER 2	35
2. A Look into South Korea	35
<i>2.1 Why South Korea</i>	35
<i>2.2 The three Cs of Korean culture: collectivism, Confucianism and Conformism in relation to Eating Disorders</i>	37
<i>2.3 Eating in Korea</i>	40
<i>2.4 Appearance in Korea</i>	41
CHAPTER 3	45
3.1 The present study: objectives and relevance	45
3.2 Methods	47
<i>3.2.1 Participants</i>	47
<i>3.2.2 Materials</i>	47
<i>3.2.3 Procedure</i>	49
<i>3.2.4 Data Analysis</i>	50
CHAPTER 4	52
4. Results	52

<i>4.1 Descriptive Analysis</i>	52
<i>4.2 Thematic Analysis</i>	53
<i>4.2.1 Theme 1</i>	53
<i>4.2.2 Theme 2</i>	56
<i>4.2.3 Theme 3</i>	57
<i>4.2.4 Theme 4</i>	59
<i>4.2.5 Theme 5</i>	59
<i>4.2.6 Theme 6</i>	61
<i>4.2.7 Theme 7</i>	62
CHAPTER 5	64
5. Discussion and Conclusion	64
<i>5.1 Discussion</i>	64
<i>5.2 Strengths and Limitations</i>	72
<i>5.3 Future Perspectives</i>	73
<i>5.4 Potential Impact</i>	76
<i>5.5 Conclusion</i>	77
APPENDIX	79
REFERENCES	85

ABSTRACT

Research on Eating Disorders has confirmed that sociocultural factors play a significant role in influencing their presentation and development. Many studies have also brought forward that distinct cultural variables could represent significant factors of influence in body image issues and eating dysfunctions. Nonetheless, so far research efforts have been focused on Western countries, leaving a considerable gap in the current literature about eating disorder presentation and risk factors in non-Western populations. It was determined that South Korea could represent fertile grounds for innovative research on how eating behavior and body image are influenced by specific cultural characteristics. Therefore, the present study aimed to investigate eating behavior and body image in South Korea, through a qualitative approach. This objective was pursued by organizing structured interviews with 10 South Korean people and analyzing the data obtained using thematic analysis. From the data analysis seven main themes emerged, which revealed some interesting insights into how certain aspects of Korean culture could impact eating behavior and body image. The main narrative that emerged from the participants' responses was how crucial appearance is for South Korean people, so much so that many felt immense pressure towards maintaining certain standards of appearance, not only for their social life, but their professional life as well. Participants also identified two main sources for this pressure: comments from other people and restrictive clothing sizes, which were singled out as possible culturally specific risk factors for the development of EDs in South Korea. The influence of the media on body image and eating behavior was also recognized as a theme, as the participants mentioned TV and media influence to be a significant pressure towards the thin ideal. However, a plausible protective influence of social media was also found to be relevant according to the participants' answers.

A second predominant narrative that emerged from the interviews was how much control the participants exerted on their eating behavior, and how little distress was associated with it, which is a phenomenon that needs to be delved into more deeply by future research. Two other themes emerged, which are the rise of muscularity as a new beauty standard, and the importance of physical health in determining eating behavior

and attitudes on body shape and weight. Both themes seemed to clash with previous research outcomes and, as such, could represent starting points for future studies. Overall, this study shed light on several cultural phenomena that could represent potential influences on the development and presentation of eating disorders in South Korean people, which future research should investigate further in order to improve prevention, identification, and intervention strategies for EDs in this population.

INTRODUZIONE

I disturbi alimentari sono un gruppo di sindromi psicopatologiche in grado di elicitare forte disagio e riduzione del funzionamento in tutte le aree della vita della persona che li esperisce. Sono caratterizzati da alterazioni clinicamente significative nel comportamento alimentare che si presentano insieme ad atteggiamenti e ideali disfunzionali sul proprio corpo e il proprio peso (American Psychiatric Association [APA], 2013; Treasure et al., 2020). Il DSM-5 annovera nella categoria dei disturbi della nutrizione e dell'alimentazione 6 differenti sindromi: pica, disturbo da ruminazione, disturbo evitante/selettivo dell'assunzione di cibo, anoressia nervosa, bulimia nervosa e disturbo da alimentazione incontrollata (APA, 2013).

I disturbi dell'alimentazione possono avere esordio indipendentemente da sesso o etnia e sono presenti in tutti i contesti culturali e socioeconomici. Il DSM-5 dichiara un tasso di prevalenza nella popolazione dello 0,4% per l'anoressia nervosa e dell'1,5% per la bulimia nervosa e dichiara che esso è 10 volte superiore nelle donne che negli uomini. Per il disturbo da alimentazione incontrollata attesta un tasso di prevalenza di 1,6% per le donne e di 0,8 per gli uomini (APA, 2013; Bhattacharya et al., 2020; Qian et al., 2021).

Nel corso del tempo, molti studi hanno identificato alcuni fattori di rischio che si ipotizza siano implicati nell'esordio e nello sviluppo della sintomatologia dei disturbi alimentari. La ricerca in ambito genetico e neurobiologico ha confermato il coinvolgimento di alcuni geni, circuiti neurali e neurotrasmettitori nella genesi di questo tipo di disturbi (APA, 2013; Barakat et al., 2023; Bhattacharya et al., 2020; Treasure et al., 2020). Alcuni tratti di personalità, come perfezionismo e ossessività sono stati associati allo sviluppo di sintomi caratteristici dei DCA; inoltre, alessitimia e difficoltà nella regolazione emotiva sono stati connessi a disfunzioni nel comportamento alimentare da molti studi (Barakat et al., 2023; Treasure et al., 2020). L'influenza dell'ambiente di crescita e delle esperienze infantili è stata esaminata da alcuni studi che sembrano confermare il coinvolgimento di esperienze avverse nell'infanzia e alcuni comportamenti dei genitori nel determinare un successivo esordio di DCA (Barakat et al., 2023; McClelland et al., 2020). Le influenze socioculturali sono state forse uno degli ambiti più studiati per quanto riguarda una possibile spiegazione eziologica dello

sviluppo di questi disturbi. L'internalizzazione dei moderni standard di bellezza che valorizzano i corpi magri, la comparazione sociale e l'insoddisfazione corporea sono stati citati da molteplici ricerche come fattori di rischio significativi per i DCA (Bhattacharya et al., 2020; Izydorczyk & Sitnik-Warchulska, 2018; Izydorczyk et al., 2020).

Nello specifico, Thompson e colleghi (1999) hanno proposto il Modello Tripartito di Influenza, il quale postula che tre fattori socioculturali contribuiscono allo sviluppo dei disturbi alimentari: le pressioni di famiglia, pari e *mass media* riguardo l'apparenza. Il modello propone inoltre che l'influenza di questi tre elementi sullo sviluppo di disfunzioni del comportamento alimentare sia mediata da due ulteriori fattori: l'internalizzazione dell'ideale di bellezza prevalente nella società, in alcuni studi detto semplicemente ideale di magrezza, e il confronto sociale basato sulle apparenze (Kakar et al., 2023; Thompson et al., 1999). Secondo la Teoria dell'Oggettificazione (Fredrickson & Roberts, 1997), l'emergenza di disfunzioni nel comportamento alimentare delle donne può essere spiegata dal fatto che esse sono istruite dalla società a dare particolare importanza alla loro apparenza fisica a causa dell'oggettificazione sessuale che sperimentano quotidianamente da parte della società. Questo le porterebbe ad avere una maggiore tendenza al controllo del peso, ad internalizzare maggiormente gli ideali di magrezza imposti dalla società e a monitorare di più il loro corpo, tutti fattori associati alla sintomatologia DCA (Fredrickson & Roberts, 1997; Johnson et al., 2014; S. Y. Kim et al., 2014). Ancora, le teorie femministe propongono che l'internalizzazione di standard socioculturali di magrezza può essere spiegata partendo dall'incredibile valore che le donne tendono a dare alla loro apparenza e alla loro forma fisica nella società moderna. Secondo queste teorie gli standard di bellezza moderni sono stati resi così pervasivi dalla società patriarcale che, associando il valore della donna alla sua apparenza e non alla sua competenza, mira a mantenere un certo livello di ineguaglianza di genere (Jung et al., 2009; Springmann et al., 2020). Effettivamente è stato notato che rapidi cambiamenti sociali sono spesso associati all'emergere di standard di bellezza sempre più irrealistici e restrittivi, insieme a tassi più alti di insoddisfazione corporea, sia nei paesi occidentali sia in quelli orientali, come la Corea e la Cina (Jung et al., 2009; S. Kim, 2018).

Le variabili culturali sono spesso state ignorate dalla ricerca sui disturbi alimentari. Nonostante questo, alcune differenze culturali sono state individuate, sia nello studio delle minoranze etniche, sia espandendo la ricerca a paesi non occidentali (Barakat et al., 2023; Burke et al., 2021; Kakar et al., 2023; Monocello, 2022). Tra i paesi non occidentali, i paesi Asiatici sembrano poter rappresentare terreno fertile per la ricerca sui DCA, in quanto molteplici studi hanno riportato in essi tassi crescenti di disfunzioni nel comportamento alimentare e insoddisfazione corporea (Anderson-Fye, 2017; Jackson et al., 2006; S. Y. Kim et al., 2014).

Tra i paesi dell'Asia la Corea del Sud è particolarmente interessante. Più studi hanno trovato tra la popolazione Coreana tassi molto alti di insoddisfazione corporea e di *drive for thinness* (Monocello et al., 2024; S. Kim, 2018; S. Y. Kim et al., 2014). La Corea ha attraversato negli ultimi decenni un rapido e improvviso cambiamento sociale ed economico, il quale ha portato con sé la comparsa di standard di bellezza sempre più restrittivi e irraggiungibili, improntati verso la magrezza, accompagnati da un aumento della presenza di fenomeni come insoddisfazione corporea e disfunzioni del comportamento alimentare all'interno della popolazione (Jung et al., 2009; Kwon, 1998; Monocello, 2022; S. Han et al., 2018; Shim et al., 2008; S. Y. Kim et al., 2014). Alcune caratteristiche della cultura coreana potrebbero rappresentare particolari fattori di rischio per l'esordio della sintomatologia dei DCA nella popolazione del paese: la presenza dei valori del confucianesimo nella società moderna, il collettivismo e il conformismo. La filosofia del confucianesimo, ponendo fortemente l'accento sull'importanza del gruppo, ha improntato un'organizzazione sociale determinata da collettivismo e conformismo nei confronti del gruppo sociale. Conformismo e collettivismo sono stati associati da molteplici ricerche a diversi fattori implicati nella genesi dei disturbi alimentari, quali una maggiore tendenza ad interiorizzare gli standard socioculturali di magrezza, a fare più comparazioni sociali, a sentire maggiori pressioni sociali nei confronti della propria apparenza (Jung et al., 2009; Jung & Lee, 2006; K. B. Kim, 2014; Lee et al., 2014; Shim et al., 2008). La particolare importanza dell'aspetto fisico per la società coreana potrebbe verosimilmente rappresentare un altro argomento di interesse per la ricerca sui DCA. Molteplici ricerche hanno infatti attestato quanto la bellezza sia fondamentale in Corea, ed alcuni studi hanno trovato che le persone Coreane tendono a considerare le qualità ornamentali del corpo più importanti di quelle

strumentali, fenomeno che è spesso stato associato a comportamenti alimentari disfunzionali (Cho, 2009; Jung & Lee, 2006; Monocello & Dressler, 2020; S. Han et al., 2018).

Date le suddette considerazioni, l'obiettivo del presente studio è di esplorare come la cultura coreana possa influenzare gli atteggiamenti sull'alimentazione, il peso e la forma corporea delle persone. Ciò è stato fatto investigando fenomeni quali comportamento alimentare e immagine corporea in Corea del Sud, tramite interviste strutturate che poi sono state analizzate utilizzando l'analisi tematica.

Dall'analisi tematica sono emersi 7 temi, rappresentanti delle narrative più significative portate dai partecipanti dello studio, e articolati come segue:

- Tema 1: *Lookism*: l'importanza dell'aspetto fisico;
- Tema 2: Pressioni specifiche verso il conformismo agli standard della società;
- Tema 3: Influenze dall'occidente? *Healthism* in Corea;
- Tema 4: Verso uno standard di bellezza più occidentale: l'ascesa dei fisici muscolosi;
- Tema 5: La normalizzazione del controllo sul mangiare e la forma corporea;
- Tema 6: Emozioni dimenticate: una sorprendente mancanza di disagio nella restrizione;
- Tema 7: Il ruolo dei Media: una medaglia con due facce.

L'analisi delle interviste ha prodotto alcuni risultati che hanno confermato la precedente letteratura, ma anche risultati innovativi che potrebbero rappresentare interessanti spunti per ricerche future.

Il primo tema emerso, ovvero l'importanza dell'aspetto fisico per i Coreani, è stato suddiviso in due sottotemi. Il primo sottolinea come, secondo i partecipanti, ai coreani importerebbe dell'aspetto fisico in maniera maggiore rispetto a persone di altri paesi. Il secondo invece, si riferisce alla rilevanza fondamentale del rientrare negli standard socioculturali di bellezza per ottenere successo, anche in ambito lavorativo, tanto che molte persone affermano di iniziare diete restrittive per aumentare la probabilità di essere assunte. La narrativa che emerge da questo tema conferma i risultati di alcune ricerche precedenti, oltre a proporre alcuni argomenti di interesse per la ricerca cross-culturale sui DCA, quali l'indagine su come l'importanza data all'aspetto fisico possa influenzare l'emergere della sintomatologia tipica dei disturbi alimentari e su come

cercare lavoro possa influenzare i comportamenti alimentari delle persone Coreane (Cho, 2009; S. Han et al., 2018; Jung & Lee, 2006; K. B. Kim, 2014; Lee et al., 2014). Come secondo tema sono state individuate due specifiche pressioni verso lo standard di bellezza (e magrezza) imposto dalla società: i frequenti commenti delle persone sulle abitudini alimentari e l'aspetto fisico, e la taglia unica dei vestiti, spesso piccola, presente nei negozi. Molti partecipanti hanno dichiarato che percepivano questi due fattori in particolare come esplicite pressioni verso un corpo magro o abitudini alimentari più restrittive. Questi due fenomeni potrebbero essere considerati come specifici fattori di rischio per l'esordio di DCA, che quindi potrebbero predisporre la popolazione coreana in particolare ad un rischio più alto per lo sviluppo di questi disturbi.

Il terzo tema individuato si pone in contrasto con i risultati proposti da alcune precedenti ricerche. Alcuni ricercatori, infatti, hanno affermato che i Coreani sembrano non distinguere le caratteristiche strumentali del corpo da quelle ornamentali, prioritizzando le ultime; da precedenti ricerche è risultato che i Coreani non si curassero delle implicazioni per la salute di avere un corpo grasso, concentrandosi solo sulle conseguenze che la grassezza possa avere sull'aspetto fisico (Monocello, 2019; Monocello & Dressler, 2020; Monocello et al., 2024). Dall'analisi delle interviste condotte è invece emerso che, almeno nel caso delle persone intervistate, le caratteristiche strumentali del corpo e la salute fisica erano ritenuti molto importanti e tenuti in considerazione in ogni discussione relativa alle abitudini alimentari, la forma corporea e il peso.

Un'altra novità contrastante con le constatazioni della letteratura esistente riguarda lo standard di bellezza in Corea, che sembra essere in continua evoluzione. Il quarto tema emerso dalle interviste, infatti, consiste nel fatto che l'ideale di bellezza sembra star attraversando un cambiamento. Mentre in passato venivano esaltati i corpi magri, negli ultimi tempi avere un corpo muscoloso è diventata la nuova tendenza, sia per gli uomini sia per le donne (Monocello, 2019; Monocello, 2022; Monocello & Dressler, 2020; S. Han et al., 2018; S. Y. Kim et al., 2014). Ancora non è conosciuto l'effetto che questo potrebbe avere sul comportamento alimentare; studi futuri dovrebbero sicuramente esplorare questo cambiamento.

Dalle dichiarazioni dei partecipanti è emersa un'estensiva tendenza ad esercitare elevati livelli di controllo sul proprio comportamento alimentare, sul proprio aspetto e sul proprio peso. Azioni definibili come restrittive o controllanti sono state raccontate da tutti i partecipanti, e descritte come normali. Per questo il quinto tema individuato è stato quello della normalizzazione del controllo sull'alimentazione e sulla forma corporea. Sorprendentemente però, la tendenza al controllo e alla restrizione non è mai stata associata dai partecipanti a particolari reazioni emotive. La mancanza di emotività espressa e di disagio collegato alle tendenze di controllo sul cibo e il peso corporeo ha dunque costituito il sesto tema. Già altre ricerche hanno confermato che i Coreani sono poco propensi ad esprimere le proprie emozioni, soprattutto se negative, in favore del mantenimento dell'armonia sociale nel gruppo (G. Park et al., 2022; Robertson, 2019; S. Choi & Lee, 2002). La tendenza a controllare il proprio comportamento alimentare, la propria forma corporea e il proprio peso è caratteristica della sintomatologia dei DCA (APA, 2013; Treasure et al., 2020; Yamamiya et al., 2022). La soppressione delle emozioni, invece, è stata frequentemente associata allo sviluppo di disturbi del comportamento alimentare (G. Park et al., 2022). È quindi fondamentale che la futura ricerca sui DCA si concentri sui due fenomeni precedentemente esposti per valutare il rischio di sviluppare un disturbo alimentare nella popolazione coreana.

L'ultimo tema emerso dall'analisi delle risposte dei partecipanti riguarda la pressione percepita verso l'ottenimento di un corpo più magro da parte dei media. Molte ricerche confermano l'influenza dei media nello sviluppo dei disturbi alimentari; quindi, non è sorprendente che molti partecipanti abbiano affermato di percepire molta pressione verso la magrezza guardando la televisione o seguendo alcune celebrità (Izydorczyk et al., 2021; Kakar et al., 2023; Krug et al., 2020; Roberts et al., 2022; Thompson et al., 1999). Un dato inatteso emerso dalle interviste è stato però il fatto che per molti partecipanti i social media rappresentassero un'influenza positiva, dove apprendere informazioni riguardanti la propria salute o confrontarsi con opinioni diverse, positive, e più inclusive su corpi non convenzionalmente attraenti. Non è ancora conosciuto l'effetto che questa possibile influenza positiva dei social media possa avere sulla sintomatologia dei DCA. Servono sicuramente ulteriori ricerche a riguardo.

In conclusione, questo studio è riuscito ad esplorare come i Coreani vivono la propria alimentazione, il proprio corpo e il proprio peso, e in che modo la società e la cultura

coreana potrebbero influenzare i loro atteggiamenti e comportamenti. I risultati di questo studio non sono certamente generalizzabili a tutta la popolazione coreana, ma la ricerca futura potrà sicuramente trarre ispirazione da essi per ampliare la conoscenza della comunità scientifica su come alcune caratteristiche culturali possono impattare la presentazione e lo sviluppo dei disturbi del comportamento alimentare.

CHAPTER I

1. An Introduction to Eating Disorders

1.1 Classification and Characteristics

Eating disorders (EDs) are a group of psychiatric conditions characterized by disturbances and abnormalities in eating behavior and attitudes about eating, weight and body shape. These disturbances and attitudes cause significant distress to the person affected by the disorder, and lead to significant impairment in all areas of their life, including physical health and psychosocial functioning (APA, 2013; Treasure et al., 2020). The “Feeding and Eating Disorders” category of the Diagnostic and Statistical Manual of Mental Disorders, the DSM-5 (APA, 2013), includes six feeding and eating disorders: pica, rumination, ARFID (avoidant/restrictive food intake disorder), anorexia nervosa, bulimia nervosa, and binge-eating disorder. In addition to the six disorders presented earlier, the DSM-5 adds two categories: other specified eating or feeding disorder, and unspecified eating or feeding disorder. These two diagnostic labels cover all the cases that cannot be explained by the already existing categories (APA, 2013). More specifically, “other specified eating or feeding disorder” comprises all the cases in which the symptoms presented by the person cause significant distress and impairment in psychosocial functioning but do not fully satisfy the criteria for any aforementioned diagnosis. In this instance the clinician discloses the reason the patient does not satisfy the criteria; an example of this would be atypical anorexia nervosa, in which the patient satisfies all but the weight criteria. “Unspecified eating or feeding disorder” is reserved for those instances in which it is not possible to provide a specific explanation (APA, 2013). Each of these disorders presents significant differences in its symptoms and challenges, and as such the diagnostic criteria proposed by the DSM are mutually exclusive, so that if a person meets the criteria for the diagnosis of one disorder during an episode, other disorders’ diagnostic criteria cannot be applied to them at the same time. Pica, however, can be diagnosed simultaneously with any other eating or feeding disorder (APA, 2013). This classification represents a marked difference compared to the previous edition of the manual (the DSM-IV), in which pica, rumination, and

feeding disorder of infancy and early childhood were categorized separately, as “Feeding or Eating Disorders of Infancy and Early Childhood”, and were presented at the beginning of the manual, included into “Disorders Usually Diagnosed in Childhood, Infancy or Adolescence” (APA, 1994). The inclusion of these three feeding disorders and subsequent expansion of the “Feeding and Eating Disorders” category in the DSM-5 was actuated in order to limit the number of diagnoses that fell into the “other specified eating or feeding disorder” and “unspecified eating or feeding disorder” categories, since they represented about 60% to 80% of ED diagnoses in adolescents (Bhattacharya et al., 2020). Furthermore, the DSM-5 provides specific diagnostic criteria for each disorder, together with definitions for subtypes of each disorder, remission status, and severity measures (APA, 2013).

Eating Disorders present many similarities in etiology, pathophysiology, and symptom presentation, but there are many key differences that should not be overlooked in order to optimize understanding and treatments of these conditions (Bhattacharya et al., 2020). Anorexia nervosa is characterized by a persistent restriction of caloric and food intake, to the point that the person’s weight is significantly under what is considered normal or expected relatively to their age, height, gender, and development. This restriction is underpinned by an intense fear of getting fat and a persistent overvaluation of body shape and weight, which are considered fundamental to the individual’s identity (APA, 2013; Treasure et al., 2020). The same mechanic of body shape and weight overvaluation also occurs in bulimia nervosa, but in the case of this disorder, it is accompanied by recurrent episodes of binge eating, followed by a wide range of compensatory behaviors, such as self-induced vomiting, use of laxatives or excessive exercise. These behaviors are implemented in order to prevent weight gain after the binge episode, and occur at least once a week for a minimum of 3 months (APA, 2013). Moreover, in most cases, individuals who receive a diagnosis of bulimia nervosa are in the normal weight range or even overweight. Binge eating episodes, which can be defined as discrete time frames (for example 2 hours) in which an individual consumes large amounts of food while feeling a loss of control over that action, are the main symptomatic manifestation of binge eating disorder (APA, 2013). These episodes must occur at least once a week for at least three months for a diagnosis to be made. Typically, people affected by this disorder describe feeling helpless when it comes to

controlling their food intake during binge eating episodes and describe the loss of control as being in a dissociative state. A sense of severe distress, guilt, or shame usually follows the episodes (APA, 2013). As a result of the high caloric intake that occurs often for these people, obesity and other metabolic syndromes have often been associated with the disorder (APA, 2013).

Many medical complications can arise in patients suffering from an eating disorder, mostly caused by malnutrition and purging behaviors. Anorexia nervosa has often been associated with cardiovascular issues, liver failure, kidney injury, gastrointestinal problems, and even neurological complications. Patients with bulimia nervosa often present with similar health concerns, albeit less severe, but are subject to dangers specifically related to purging, such as erosion or perforation of the stomach or esophagus, and sudden cardiac failure (Bhattacharya et al., 2020; Treasure et al., 2020). Eating disorders also present with many psychiatric comorbidities, with the most common being depressive and anxiety disorders. Bulimia nervosa and anorexia nervosa are also often associated with bipolar disorder, and suicide risk for both is elevated compared to the general population (APA, 2013; Bhattacharya et al., 2020; Treasure et al., 2020).

1.2 Epidemiology

Eating Disorders can affect anyone, regardless of age, gender, social standing, ethnicity, or culture. Nevertheless, over the years, the estimated prevalence rates of these disorders in the general population seem to have varied significantly. This may be due to the change in the diagnostic criteria used by researchers, who moved from using DSM-IV criteria to DSM-5 criteria, which seem to allow for more individuals to meet the criteria for an ED diagnosis. Moreover, most of the research on eating disorders has historically been conducted in Western countries, a factor that significantly limits our knowledge of worldwide prevalence of these disorders (APA, 2013; Bhattacharya et al., 2020; Qian et al., 2021). The DSM-5 reports estimated 12-month prevalences among young females of 0.4% and 1-1.5% for anorexia nervosa and bulimia nervosa respectively, with an astounding 10:1 female to male gender ratio. Gender differences

seem to be less substantial when it comes to binge eating disorder, for which the DSM-5 reports a 1.6% prevalence in females and a 0.8% prevalence in males (APA, 2013). A recent literature review (Silén & Keski-Rahkonen, 2022) has reported that by early adulthood, approximately 5.5% to 17.9% of women and 0.6–2.4% of men have been affected by an eating disorder, while another data analysis estimates lifetime prevalence rates for anorexia nervosa, bulimia nervosa, and binge eating disorder to be 0.80%, 0.28%, and 0.85%, respectively, and 12 months prevalences to be 0.05% , 0.14%, and 0.44% respectively (Silén & Keski-Rahkonen, 2022; Udo & Grilo, 2018). Another recent literature review (Van Eeden et al., 2021) has found reported lifetime prevalence rates for anorexia nervosa to range between 0.1% and 3.6% in females and 0% and 0.3% in males, and reported lifetime prevalence rates for bulimia nervosa to range between 0.3% and 4.6% in females and from 0.1% and 1.3% in males (Van Eeden et al., 2021). This review brings light to the previously mentioned changes in estimated prevalence rates after the publication of the DSM-5. An interesting finding of this review is that, for both disorders, resulting prevalence rates increased from 0.2% to 0.9% for anorexia nervosa and from 0.6% to 1.4% for bulimia nervosa when looking at studies that applied DSM-5 criteria compared to studies that used either the DSM-IV or the DSM-5 criteria (Van Eeden et al., 2021).

It has been widely reported that significant gender differences exist in the prevalence of eating disorders. Females are more likely than males to be diagnosed with an ED, and seem to have higher mortality rates, with more suicide attempts than their male counterparts (Bhattacharya et al., 2020). Mortality rates and suicide risk are high for both genders compared to the general population, and adolescents and young adults are particularly at risk, since eating disorders usually develop in this life period (APA, 2013; Bhattacharya et al., 2020). In fact, the onset for most of these disorders is reported to fall between adolescence and early adulthood. Anorexia nervosa seems to develop before other eating disorders, with median age of onset being reported to be 12.3 years of age for both genders, and onset being exceedingly rare (but still possible) after the age of 30 (APA, 2013; Bhattacharya et al., 2020; Treasure et al., 2020). Nevertheless, the age of onset has been rapidly decreasing for all eating disorders. Bulimia nervosa has also been known to develop in early to late adolescence, while binge eating disorder has been shown to be prevalent in teens and young adults, while also having a later age

of onset than both other disorders according to other reports (Bhattacharya et al., 2020; Treasure et al., 2020).

Similar prevalences of eating disorders are reported by the DSM-5 in most industrialized countries, such as the United States of America, most European countries, New Zealand, Japan, Australia, Canada, and South Africa. However, more recent studies report differences in the prevalence rates of these disorders across different countries and cultures (APA, 2013; Bhattacharya et al., 2020; Qian et al., 2021). The DSM-5 remarked the unavailability of information regarding eating disorders in low income countries, and mentioned how cultural differences could play a role in how weight concerns present themselves; recent studies have begun to uncover just how big of a role culture and ethnicity play in eating disorder prevalence and presentation (APA, 2013). It has been reported that eating disorders are less prevalent in Latin America and Africa, compared to Western Countries, China, and Japan. According to many sources though, with rapidly increasing rates of industrialization and globalization, eating disorders are becoming more and more prevalent in countries that were previously overlooked by researchers (Bhattacharya et al., 2020; Qian et al., 2021; Van Eeden et al., 2021). Multiple studies have concluded that prevalence rates of eating disorders in Asian Countries are rising and that, although previous studies reported most Asian countries to have lower prevalence rates of EDs compared to Western countries, recently they could be as high in Asian Countries as in the Western part of the world, or even higher, according to some sources (Qian et al., 2021; Van Eeden et al., 2021). All in all, we can confidently say that there is still a considerable gap in the literature concerning non-Western parts of the world, and that further research on epidemiology, presentation, and pathophysiological paths of eating disorders in non-Western cultures is still needed (Qian et al., 2021).

1.3 Risk Factors for Eating Disorders

Over the years, a large number of hypotheses have been made regarding possible pathophysiological paths towards the development of eating disorders. Researchers have thus far confirmed the existence of many genetic, neurobiological, psychological, and sociocultural factors that could represent a significant risk for the development of

an ED or contribute to its onset (Barakat et al., 2023; McClelland et al., 2020; Treasure et al., 2020).

Genes seem to play an important role in increasing the risk for eating disorders; many studies have shown that the likelihood of developing an ED is more than double for people with a first-degree relative who has or had an ED diagnosis, compared to individuals with no family history of EDs (Barakat et al., 2023). While this holds true for all eating disorders, anorexia nervosa has been proven to be the most influenced by genetic predisposition, as it is 11 times more likely for an individual with family history of anorexia nervosa to develop the disorder compared to a person with no family history (APA, 2013; Barakat et al., 2023). The same statistic drops to 9.6 times more likely for bulimia nervosa, and 2.2 times for binge eating disorder (Barakat et al., 2023).

Furthermore, genetic influence looks to be more prevalent in the female gender; hereditary risk for the development of an ED is not only higher for females, but drive for thinness and body dissatisfaction, two factors proven to have significant impact in ED symptomatology, have proven to be 50% less likely to be predicted by genes in males compared to their female counterparts (Barakat et al., 2023). Hormonal differences could play a significant role in this disparity: it has been shown that variations in the gene ESR1, an estrogen receptor, could be inherited and increase the risk of developing the restrictive subtype of anorexia nervosa. As a matter of fact, estrogen could also be a factor underpinning the sudden increase in the risk of developing an ED in females after puberty, while it has been shown that testosterone exposure while in utero could be a protective factor (Barakat et al., 2023; Bhattacharya et al., 2020). Research also indicates that gene expression is involved in two other important processes related to eating disorder pathogenesis. Polymorphisms of genes implicated in the production of endocrines that influence appetite and weight are thought to have an impact in lower satiety interoception experienced by people with anorexia nervosa and lower pain interoception experienced by people with bulimia nervosa (Barakat et al., 2023). Finally, polymorphisms in the genes underpinning the production of dopamine and serotonin, neurotransmitters involved in the rewards pathways of the brain, have been associated with both binge eating disorder and bulimia nervosa (Barakat et al., 2023).

Rewards pathways and more specifically high sensitivity to reward have long been connected to both disorders in neurobiological studies. People with disorders that entail binge eating seem to have trouble with the delay of rewards. The opposite holds true for people with anorexia nervosa, who have been shown to have a heightened capability to delay rewards and seem to present with avoidance or decreased attention towards food cues (Treasure et al., 2020). At the same time, rewards circuits could play another role in AN symptomatology: studies have proposed that the development of habits could be connected to the disorder. More specifically, restriction, which in the beginning is a highly rewarded behavior, could keep being conducted even in the absence of a reward as a result of habit formation (Bhattacharya et al., 2020).

Several psychological factors have been linked to the onset and maintenance of ED symptomatology. Different personality traits have been connected to eating disorders by multiple studies and reviews. Most notably, perfectionism has been linked to restrictive-type EDs, and more specifically to three key traits: the overvaluation of shape and weight, significant dietary restrictions, and the tendency to “hide the self”, better explained as the aversion towards showing others their faults and flaws (Barakat et al., 2023; Treasure et al., 2020). The association between anorexia nervosa, bulimia nervosa and perfectionism has been well documented; research shows that people with both disorders have extremely high standards for themselves and tend to be overly self critical, but while AN seems to be more connected to high personal standards, BN has a stronger association with parental figures being overly critical of the individual (Barakat et al., 2023). Another personality trait of interest when talking about restrictive type eating disorders is obsessiveness. It has been attested that this trait is associated with anorexia nervosa, and more specifically with a drive for thinness, a key aspect of AN clinical presentation (Barakat et al., 2023). Alexithymia, characterized by an inability to recognize and express emotions, has been frequently associated with both anorexia nervosa and bulimia nervosa, but emotional regulation difficulties and deficits in emotional awareness have in general been connected to all maladaptive eating disorder symptomatology (Barakat et al., 2023; Treasure et al., 2020). Together with emotional dysregulation, the two most notable traits that seem to appear with a higher frequency in people with a binge/purge type ED compared to healthy controls are impulsivity and negative urgency, which is the tendency to act rashly when distressed (Davis et al.,

2024). These mechanisms could underpin binge eating behavior, as it is often described as a way to escape or deal with intense negative emotions (Barakat et al., 2023). As a matter of fact, multiple studies have highlighted the role of negative affect in the onset and maintenance of ED symptoms, as both negative affect and impaired psychosocial functioning seem to have a predictive value towards binge eating symptoms, and weight control symptoms. Binge eating is commonly employed to improve mood, while weight control behaviors could be executed in order to reduce anxiety about body shape and weight (Stice et al., 2017). Anomalies regarding attention and impulsivity found in people affected by binge type disorders could also explain the frequent association between these disorders and ADHD (Treasure et al., 2020).

An important area of the research surrounding risk factors for eating disorders concerns childhood. Many of these syndromes seem to have their roots in childhood experiences and behaviors (Barakat et al., 2023; McClelland et al., 2020). Eating difficulties present in early life have been shown to predict later ED presentation: several studies found that undereating, fussy eating, unpleasant mealtimes, pica, and digestive problems during childhood were predictive of anorexia nervosa and bulimia nervosa symptoms in later stages of life, while early overeating predicted future manifestations of binge eating disorder (McClelland et al., 2020). Moreover, parental eating problems, as well as parent's behavior, attitudes, and comments about food and eating seem to pose a significant risk for the future onset of an ED in the child. It has been indeed demonstrated that individuals are more likely to develop any eating disorder if their parents, and more specifically the mother, display attitudes coherent with ED symptomatology, such as drive for thinness or perfectionism, or have an eating disorder themselves (Barakat et al., 2023). Childhood weight also plays a significant role in increasing the risk of developing any ED. Research shows that both low and high childhood BMI has a predictive power in future ED onset; more specifically, high BMI during early life seems to be associated with later onset of all eating disorders, while low BMI was specifically connected with anorexia nervosa (Barakat et al., 2023; Stice et al., 2017). Parenting style has also been reported to have an effect on the manifestation of EDs in later life; both anorexia nervosa and bulimia nervosa have been associated with low parental connectedness and low maternal warmth. Individuals with anorexia nervosa specifically tend to have an insecure attachment style compared to

their siblings, who are more likely to develop a secure attachment style (Barakat et al., 2023). Childhood adversities represent a notable risk for the future development of all eating disorders. Experiencing or being exposed to trauma during early life has been connected with the subsequent onset of both restrictive type and binge/purge type EDs. It has been proven that emotional abuse presents several links with higher chances of developing binge/purge symptoms in women, while the same symptoms were associated with neglect and sexual abuse in males. Emotional abuse has also been proven to be an important risk factor for the development of all eating disorders (Barakat et al., 2023).

The role of overvaluation of shape and weight, body dissatisfaction, weight control behaviors, and drive for thinness in the etiology of EDs has been studied for several years. Most experts agree on the fact that all four factors, in addition to being key aspects of ED presentation, represent prodromes of eating disorder symptomatology, and are often present just prior to the onset of many EDs (Izydorczyk et al., 2021; McClelland et al., 2020; Stice et al., 2017; Treasure et al., 2020). Many studies show that higher levels of body dissatisfaction, often coupled with dieting and restricting in order to lose weight, and body shape/weight overvaluation consistently predict future ED onset and symptomatology (McClelland et al., 2020; Stice et al., 2017). More precisely, especially in recent years, research has been focusing on the desire for low body weight and thin ideals for women, and muscularity and leanness ideals for men (Barakat et al., 2023; Bhattacharya et al., 2020; Izydorczyk et al., 2020). Body image and body dissatisfaction are also connected to self-esteem, which is usually found to be quite low in ED patients compared to the general population (Izydorczyk & Sitnik-Warchulska, 2018; Treasure et al., 2020). It has been hypothesized that one of the mechanisms underpinning body dissatisfaction could be body comparison, or the act of comparing one's body to other people's bodies. Social comparison theory explains that people tend to draw information from their surroundings and tend to compare themselves to others when trying to assess their qualities, and this usually applies to appearance as well. It has been demonstrated that women tend to compare their appearance to that of other women, and that they have a specific tendency to make upwards social comparisons. This usually results in a negative appraisal of their own appearance and in feelings of body dissatisfaction (Johnson et al., 2014). Distortions in

body image perceptions are especially common among people suffering from an eating disorder, and they have been noticed more consistently in women compared to men. Generally, for people with an ED, this means that they tend to view their body as fatter than it actually is, and this phenomenon is usually accompanied by a significant fear of gaining weight (Izydorczyk & Sitnik-Warchulska, 2018; Izydorczyk et al., 2020; Izydorczyk et al., 2021). It is possible that body image distortion, body dissatisfaction, and fear of fatness all contribute to the development of Eating Disorders (McClelland et al., 2020). However, it is reasonable to believe that marked and persistent dissatisfaction with one's body and the desire for an ideal thin or lean body do not emerge on their own. Over the years researchers have conducted many investigations of how different factors could impact body image and body dissatisfaction. Sociocultural influences have come out to be a major determinant in body image and eating behavior difficulties and cannot be ignored when discussing ED etiology and development (Izydorczyk & Sitnik-Warchulska, 2018).

Sociocultural influence is a broad phenomenon. There are many aspects of it that research on eating disorders has been focusing on; the most studied factors are definitely sociocultural pressures towards appearance by family and peers and media influence. Family pressures and the pressure experienced from peers have been found to influence a person's opinions and behavior. Furthermore, mass-media, and in recent years social media, have been considered of particular interest, as they can have a significant impact on cognition, attitudes, and behavior (Izydorczyk & Sitnik-Warchulska, 2018; Izydorczyk et al., 2020; White et al., 2023).

Modern society values thinness and appearance to an extreme, so it comes as no surprise that several studies have observed how the internalization of a thin ideal and sociocultural pressures on appearance and body shape influence eating behavior and consequently play an important part in the etiology of eating disorders (Barakat et al., 2023; Izydorczyk & Sitnik-Warchulska, 2018; Izydorczyk et al., 2021; Stice et al., 2017). Multiple reports show that thin bodies are commonly considered attractive, or even ideal, in most modern, industrialized societies, especially for women. Many women tend to actively pursue the ideal thin body perceived to fit the beauty standard of their society, partly because of the need for social approval regarding their appearance, or the need to be considered attractive, a process that seems to be of particular

importance for the self-esteem of women and adolescent females (Izydorczyk & Sitnik-Warchulska, 2018). The constant pursuit of an often-unrealistic thin beauty ideal has been associated with feelings of dissatisfaction concerning body shape and weight and can result in disordered eating behavior. Internalization of the thin ideal has been mentioned by early ED cognitive behavioral models, which propose that both thin ideal internalization and shape and weight overvaluation can lead to dieting and restrictive eating behavior (Bhattacharya et al., 2020; Izydorczyk & Sitnik-Warchulska, 2018; Izydorczyk et al., 2020). The influence of sociocultural standards of shape and weight on body image disturbances and disordered eating has been confirmed by many studies, which have demonstrated that sociocultural pressures and appearance ideals promoted by the media in particular could represent causal risk factors for body dissatisfaction, dieting, negative affect, and eating pathology (Barakat et al., 2023; Izydorczyk & Sitnik-Warchulska, 2018). Media influence has been one of the most studied sociocultural risk factors in recent years, partly due to the constantly rising popularity of social media. Mass media plays an enormous role in promoting the societal standards for beauty, with images shown on TV, magazines and social media, and with direct and indirect messages divulged through as many means as possible (Izydorczyk et al., 2021). Multiple studies have shown that viewing idealized images can result in an increase in body dissatisfaction, while the use of social media, especially when appearance focused, seems to impact body shape and weight concerns, and is associated with ED symptomatology (Barakat et al., 2023; Izydorczyk & Sitnik-Warchulska, 2018; Izydorczyk et al., 2021; M. Han, 2003).

Family pressure has also been cited as a determining factor for eating disorder development. Family represents a significant social influence in young individuals' attitudes, emotions and behaviors, and different types of interactions, such as comments about weight or appearance, teasing, or encouragement to diet can encourage the internalization of the thin appearance ideal and subsequently influence the development of disordered eating (Chen et al., 2023; White et al., 2023). Even in early life, research has found that children of parents who tend to tease and comment on body shape and weight perceive considerable amounts of pressure and as a result are likely to develop unhealthy eating behaviors (Chen et al., 2023). Negative comments about appearance made by parents are associated with higher levels of body dissatisfaction, and studies

have shown that not just direct comments about the person's appearance or weight, but even comments about other people or engaging in discussion about the topic with family members can be connected to body image difficulties and disordered eating (Chen et al., 2023; White et al., 2023). The so-called "family body culture" (White et al., 2023, p. 2) is not the only societal pressure experienced by people; research shows that peers tend to have much of the same effect. Appearance expectations and norms seem to be spread through conversations and teasing between adolescents specifically, thus creating a sort of "appearance culture" (White et al., 2023, p. 2) among groups of people (White et al., 2023).

Risk factors for eating disorders are many and varied and cannot be analyzed separately. As a matter of fact, many believe that the sociocultural pressure to be thin and thin ideal internalization endorsed by the media could promote body dissatisfaction, which in turn could contribute to the emergence of disordered eating behaviors (Stice et al., 2017). On this note, many models have been proposed to explain how sociocultural influences interact with other risk factors in the development of eating disorders, of which the best known is definitely the Tripartite Influence Model, proposed by Thompson et al. (1999), which will be discussed next (Thompson et al., 1999).

1.4 The Tripartite Influence Model

In their pioneering study, Thompson et al. (1999) suggested that three main sociocultural pressures towards appearance could be behind the development of body image and eating disturbances: family, peers, and the media. They also proposed that the relationship between these factors and the insurgence of eating dysfunction and body dissatisfaction could be mediated by two added influences: the tendency to internalize and culturally mandated standards of beauty, and appearance based social comparison, or the tendency to compare one's appearance to that of others, often in order to assess one's attractiveness (Kakar et al., 2023; Thompson et al., 1999; Van Den Berg et al., 2002). Following research has also mentioned thin-ideal internalization as part of the model. As society glorifies thin bodies as the standard of beauty, it is only logical to assume that the internalized cultural standard is in fact related to thinness; therefore many studies use thin-ideal internalization in place of the more broad concept of the

internalization of the societal standards of appearance (Burke et al., 2021; Kakar et al., 2023; Krug et al., 2020).

This model has received support from many following studies, which have aimed to replicate it in different cohorts, and conditions. The influence of appearance comparisons and internalization of societal beauty ideals on body dissatisfaction and eating behavior disturbances has been confirmed by many. Social comparison was found to be a stronger predictor of body dissatisfaction in women compared to sociocultural ideal internalization in some studies (Kakar et al., 2023; Krug et al., 2020). It is important to note that when people compare their appearance to others this does not only concern their weight or body shape, but many other physical characteristics. Moreover, the targets of these comparisons are not limited to peers or close friends but include celebrities and models as well. As it stands, it has been confirmed by a number of studies that appearance based social comparison tends to be an upward social comparison, so people tend to compare themselves with those who they consider more attractive than them, and this kind of comparison has consistently been associated with worse outcomes in body satisfaction and poor body image (Kakar et al., 2023).

Appearance related pressure from family, friends, and the media has also been widely recognized as a substantial influence on body image and eating disfunction. Numerous studies have noted that peer pressure, such as teasing about weight and body shape, and peer preoccupation with diet and weight, have significant impact in both high school and college women's inclinations towards dieting and result in heightened body dissatisfaction. Family influence has also been confirmed to be quite significant in the development of eating and body image related issues by many researchers (Van Den Berg et al., 2002; White et al., 2023). Several studies have focused on the media as a substantial form of influence in regard to both eating disturbances and body dissatisfaction (Izydorczyk et al., 2021; Van Den Berg et al., 2002).

The original Tripartite Influence Model focused only on traditional forms of media, such as TV, magazines, and advertising, but over the years adjustments of the model that could include social media and the internet have been proposed (Krug et al., 2020; Roberts et al., 2022). Social Networking Sites (SNS) have become increasingly popular over the last couple of decades, and many of the most used ones, such as Instagram, seem to be particularly focused on appearance. Moreover, many of these sites allow for

a metric evaluation of one's appearance or attractiveness through "likes", so that how many likes a picture gets can be interpreted as a sort of grading system for that person's attractiveness. The exposure to such mechanics, especially at a vulnerable age such as adolescence, has been linked to body dissatisfaction in girls (Roberts et al., 2022). Research conducted on the specific role that social media plays in determining the emergence or worsening of body image or eating related difficulties seems to suggest a good fit for social media in the Tripartite Influence Model. Studies have found that posting pictures on social media is associated with higher levels of thin-ideal internalization and body dissatisfaction, with social comparison playing a mediating role in the relationship between social media use and body dissatisfaction. Overall, research seems to confirm both the influence of social media pressures on body dissatisfaction and appearance esteem, and the mediating role played by social comparison and thin-ideal internalization, aligning recent research outcomes with the original model. With these results in mind, it is reasonable to believe that social media could represent a fourth factor of appearance related pressure in theoretical frame of the Tripartite Influence Model (Krug et al., 2020; Roberts et al., 2022).

In recent years, sociocultural standards of beauty have also evolved. These days it has been reported that girls feel pressure not only to be thin, but to be muscular as well. Even social media content has shifted from only glorifying the thin ideal to incorporating "fitspiration" (content aimed to inspire a fit body or fitness in general), and highlighting the beauty of a fit, athletic body. We can say that the current beauty ideal portrayed in media can range from a thin body to an athletic, fit, but still slim figure, and that both the thin ideal and muscularity ideal seem to be internalized by women. Research has demonstrated that exposure to fitspiration content presents an association with pressures from social media and peers, but not from family or traditional media, suggesting that the emerging muscularity beauty ideal might not yet be internalized by the older generation. Results regarding the influence of the muscularity beauty standard, fitspiration content and their specific effects on body image and eating pathology are still inconsistent, as according to some studies it may impact body dissatisfaction but not exercise behavior, while according to others it may only have an influence on behavioral and not cognitive outcomes (Krug et al., 2020; Roberts et al., 2022).

The sociocultural pressure towards a muscularity ideal has been mainly studied in the male population, and it has been associated with a specific type of disordered eating, which involves steroid use, eating in order to gain muscle, and excessive exercise (Roberts et al., 2022). The male body ideal has mainly been focused on a muscular, yet lean physique, at least from what is known from the limited studies conducted in Western countries. Since most of the research on eating and body image dysfunction has been conducted on the female population, recently efforts have been made to examine the fit of a modified version of the Tripartite Influence Model for male cohorts. It has been reported that even in male populations, appearance related pressures from the media, family, and peers have an impact on eating pathology and body dissatisfaction, through three main mediating variables: internalization of the thin body ideal, internalization of the muscular/athletic body ideal, and social comparison (Girard et al., 2017). All in all, it definitely seems that the inclusion of muscularity into the Tripartite Influence Model could represent a significant step forward in including both the male gender and more modern societal appearance standards, even though more research is definitely needed (Girard et al., 2017; Krug et al., 2020; Roberts et al., 2022).

A notable limitation that modern researchers have pointed out in the literature supporting the Tripartite Influence Model is that the majority of studies on the matter have been conducted in predominantly white and western populations. Appearance concerns have been found in girls on a global scale, but limited research has been done on non-white and non-Western populations regarding the applicability of the Tripartite Influence Model (Kakar et al., 2023). It is reasonable to believe that culturally significant variations in societal ideals regarding appearance or the way a specific society functions could have an impact on how exactly sociocultural pressures on appearance influence eating behavior and body dissatisfaction. For example, some studies have found weakened connections when applying the Tripartite Influence Model on a population of Black women, perhaps due to the higher acceptance of bigger bodies in their community (Burke et al., 2021). Other studies have noticed that the importance attributed to family in Asian cultures could determine a stronger influence of family pressure compared to other countries (Kakar et al., 2023). Some researchers suggested the modification of the model to include direct associations between sociocultural factors and eating pathology, as direct associations have been found in some cross-

cultural studies. Thus far, there has been little interest in cross cultural variations of eating pathology and body image issues, and there is not enough data to draw significant conclusions. More attention to the role that cultural variation plays in determining how sociocultural pressures are experienced in distinct cultures and how these differences could affect eating pathology and body image issues is definitely necessary (Burke et al., 2021; Kakar et al., 2023).

1.5 Objectification Theory and Feminist Theory

Sociocultural theories have tried to explain the emergence body dissatisfaction and eating behavior disturbances by suggesting the roles of influences such as family, peer, and media pressures and the internalization of sociocultural beauty ideals as important risk factors for their development (Kakar et al., 2023; Thompson et al., 1999). It cannot be denied that, thus far, research has shown significant gender differences in the presence, course, and general prevalence of eating pathology (Barakat et al., 2023). Objectification theory (Fredrickson & Roberts, 1997) posits that the societal role forced onto the female body could be a factor implied in the emergence of eating disorder pathology and body image disturbances in the female gender. According to this model, women are implicitly taught by society to place extreme importance and base their own self worth on their appearance through the sexual objectification they experience on a daily basis from the media, people around them, and interpersonal relationships in general. Sexual objectification refers to the fact that women are often treated as bodies, commodities for the viewing pleasure of others, and not as whole people (Fredrickson & Roberts, 1997; Johnson et al., 2014; S. Y. Kim et al., 2014). The constant experience of being objectified might lead to self-objectification, which comes to be when a person looks at themselves from the outside in, as an object to be appraised and evaluated by everyone else. Studies have found that self-objectification results in higher body surveillance, appearance monitoring, the belief of being able to control and impact one's appearance and body shape, and higher levels of internalization of sociocultural beauty standards. The comparison with societal standards of beauty, which are often unrealistic, and not being able to live up to those standards, usually results in feelings of shame surrounding the body. All these factors have consistently been linked to disordered

eating behavior (S. Y. Kim et al., 2014). According to this theory, some studies have proposed that, because both positive and negative comments about appearance bring attention to the body and are equally objectifying, any kind of appearance related comment could be associated to higher levels of disordered eating behavior. Positive comments may also encourage control over food intake because, hearing that, women might want to put in place measures to maintain the characteristics that have been praised. While it has been found that positive comments about appearance do in fact relate to dietary control, results on the matter are still inconclusive, and more research is definitely needed (Varnagirytė & Perminas, 2021). Multiple studies have confirmed the relationship of various types of objectification experiences, such as exposure to objectifying media, with body surveillance eating disorder symptoms. It seems that these experiences, associated with known factors such as body shame, appearance pressure, appearance comparison, and internalization of culturally mandated beauty ideals, could indeed be a prominent influence on eating dysfunction (S. Y. Kim et al., 2014).

The sexual objectification experienced by women in society cannot be separated by how society itself views the female gender and how gender roles are perpetuated in modern society. Feminist theories draw a framework into which the self defining value that women give to their appearance and to fitting the beauty standard in modern society can be explained (Springmann et al., 2020). Society imposes on women strict gender roles that place women in an inferior and powerless role compared to their male counterparts, even though legally in most countries today both genders have equal rights and social standing. Women's worth is often connected to appearance and body shape, instead of their accomplishments and competence (Jung et al., 2009; Springmann et al., 2020). According to feminist theories, the thin, unrealistic beauty ideal supported by today's society can therefore be viewed as a covert way in which our patriarchal society aims to maintain gender roles as traditional and unequal as possible (Jung et al., 2009). According to some, this effect seems to have repercussions on the male gender as well. It has been proposed that, with the narrowing of the gender gap and as an increasing number of women started to occupy position previously reserved for the male gender, men have consistently been influenced to express their masculinity through their body. As time progresses, the ideal male body is that of an athletic, fit and muscular body, that

is often unrealistic. As it stands, with the rise of importance placed on male physiques, elevated levels of body dissatisfaction and masculinity dissatisfaction have been found in men in the last few decades (Girard et al., 2017).

It has been observed that in Western societies, rapid social change seems to be connected to the emergence of strict, unrealistic beauty standards and consistently higher rates of body dissatisfaction (Jung et al., 2009; S. Kim, 2018). Social change has also been studied in non-Western countries. It stands to reason that any society where traditional gender roles are prevalent, patriarchal social norms are upheld, and rapid social change is happening is susceptible to these effects. On this note, in the past few decades, more and more unrealistic body standards and body dissatisfaction have been observed in East Asian countries like China and South Korea, which have gone through rapid periods of social change and openness to the West and its ideals (Jung et al., 2009; S. Kim, 2018).

1.7 The role of Culture

In the present day, scholars commonly define culture according to three main characteristics. First, it includes ideals, beliefs, and attitudes. Secondly, those beliefs usually result in certain behaviors, such as actions, rituals, and habits that are particular of that culture. Lastly, it is something shared by a group of people (Anderson-Fye, 2017). The study of eating disorders has notably relied on the biopsychosocial model, which posits that different sources can play a role in the development of any disorder. Namely, in this theoretical framework, biological, psychological, and social or group factors are all taken into account when trying to understand the onset and course of any disorder. Nonetheless, cultural variables are often excluded from this model in modern research, even though some studies have already confirmed their significance for the development and course of many disorders, including eating disturbances and body image concerns (Anderson-Fye, 2017; K. B. Kim, 2014). Researchers have found that cultural context may in fact have an influence on dieting behaviors and the specific role that sociocultural factors play in impacting body image and body ideals (Kakar et al., 2023; K. B. Kim, 2014). For instance, it has been reported by some that ED symptoms seem to be less common in Black individuals and Asian individuals compared to White

individuals. While body dissatisfaction and thin ideal internalization were also found to be lower in Black individuals, perhaps due to the fact that larger body shapes are more accepted in the black community, multiple studies have found lower appearance satisfaction and greater thin ideal internalization in Asian and Asian-American people (Barakat et al., 2023; Burke et al., 2021; Kakar et al., 2023; Monocello, 2022). Prior to the introduction of television, a powerful form of media that represented an important mode of popularizing the ideal western thin figure, Fijian population were known to not have experiences of disordered eating or body dissatisfaction, and to value a robust, strong figure. Even though, following the popularity of TV fictions, the thin ideal started to make way into their culture, compromise seems to have been found in a “just right ideal” (Monocello, 2022, p. 444), that differs from that idealized by the West. Similarly, a lack of disordered eating was also found in Belizean women, perhaps due to their religious beliefs and the glorification of an hourglass shape, which is considered ideal regardless of weight (Monocello, 2022).

It has been shown by numerous studies that even subcultures can have a significant impact on disordered eating and body image dysfunctions. Sports that place importance on appearance, such as dance, gymnastics, or ice skating, focus heavily on aesthetics and require constant body monitoring. Eating disorders appear to affect as high as 42% of female athletes involved in these kinds of sports. Body image concerns and eating behavior difficulties have also been associated to certain job subcultures, such as modelling or working as a flight attendant, both of which are focused on appearance (Anderson-Fye, 2017; Barakat et al., 2023).

If even being part of a subculture connected to one’s job or sport can have such effects on eating disorder pathology, the culture to which an individual belongs definitely needs to be taken into account when talking about the specific mechanisms that lead to the onset of an eating disorder (Anderson-Fye, 2017).

While in the past, eating disorders were thought to be a prerogative of the West, rising rates of eating pathology have been reported for many countries that were previously seldom considered by scholars. Asian countries have often been ignored, as Asian individuals were believed to exhibit lower levels of body dissatisfaction and eating disturbances, but recent studies have reported rising rates of eating pathology in Asian societies, and even higher rates of body dissatisfaction compared to the West

(Anderson-Fye, 2017; Jackson et al., 2006; S. Y. Kim et al., 2014). It is true that with globalization people from all over the world are constantly exposed to influences from different cultures, and many have blamed Westernization, or the influence of western culture, for the apparent rise of ED diagnoses in Asia (Anderson-Fye, 2017; Izydorczyk, Khanh, et al., 2021; Jackson et al., 2006). It cannot be ruled out, however, that specific native cultural aspects might have an influence on the development or expression of ED symptomatology and its causes. For example, familism is quite pronounced in Asian countries. Family is usually one of the most regarded influences and filial obligation is felt quite strongly by Asian individuals. It should be thus considered when studying the sociocultural influence of family in Asian populations (Jackson et al., 2006; Kakar et al., 2023).

In conclusion, while there is ample evidence that points to the fact that culture does influence eating behavior and body image evaluation, very little research has been done on how specifically culture can impact appearance evaluation, body ideals, and disordered eating behavior. Moreover, not very much is known about which specific cultural factors play a role in influencing specific symptoms and phenomena connected to dysfunctions in eating behavior (K. B. Kim, 2014).

As the majority of research has been conducted on white and Western cohorts, there is little understanding of how eating disorders present themselves and operate in non-Western populations, and how cultural differences may influence prevention and treatment practices (Jackson et al., 2006; Kakar et al., 2023; Schaefer et al., 2018). The present study aims to analyze eating behavior and body image concerns in South Korea, a country that has been overlooked by scholars in the past, but that could represent fertile ground for the study of eating disorders in a non-Western, non-white context.

CHAPTER 2

2. A Look into South Korea

2.1 *Why South Korea*

There is a relative dearth of studies regarding eating behavior, body image, body dissatisfaction, and other related variables in South Korea. Regardless, the information we do have paints a picture that seems to warrant the attention of the scientific community. South Korea is said to be the most diet conscious country in Asia, and many have reported high levels of disordered eating behavior such as meal skipping and dieting in its population (Johnson et al., 2014; Lee et al., 2014). Moreover, some studies report that Koreans exhibit extremely high levels of body dissatisfaction and drive for thinness, in addition to allegedly placing extreme importance on appearance, with South Korea being the Asian country with the highest rates of plastic surgery procedures (Monocello et al., 2024; S. Kim, 2018; S. Y. Kim et al., 2014).

Korean women have been considered to be less susceptible to the negative impact of the thin beauty ideal on body dissatisfaction and consequently disordered eating due to the fact that they tend to have a lower BMI compared to American women, which have been the most studied cohort in the matter of Eating Disorders. Nonetheless, multiple sources have reported elevated levels of body dissatisfaction in Korean samples, with some studies finding higher levels of body dissatisfaction in Korean women than American women (Jung et al., 2009; S. Kim, 2018; You et al., 2017). Weight stigma is also prominent in the country. Koreans have been recorded to have the strongest preference for thin bodies over overweight or obese bodies out of 72 countries and are known to be particularly explicit in the stigmatization of larger bodies. All the data we have on Korea seems to describe it as a country in which appearance is extremely important, and in which people strive towards having a slim physique (Lee et al., 2014; S. Han et al., 2018; Y. Kim et al., 2018).

Despite all of this, thin bodies have not always represented the beauty standard for the Korean population. In Traditional Korean society a plump body and a round face were preferred, as they were associated with high status and wealth, while thin bodies were

unfavored, and considered a symbol of poverty and ill health (Jung & Lee, 2006; M. Han, 2003; S. Kim, 2018; S. Y. Kim et al., 2014; Y. Kim et al., 2018). Both women's and men's standards of beauty have undergone significant changes throughout the last century of Korean history, in part due to the rapid changes the country itself was and still is experiencing (Monocello, 2022; S. Y. Kim et al., 2014). South Korea has experienced significant political, economical, and social development in the past century, with a far quicker pace than usually observed in other countries. From the 1910s to 1945 Korea was under Japanese occupation. Right after, between 1950 and 1953, the Korean War erupted, and decades of military dictatorship began. After the 1980s, democracy slowly emerged and economic reforms were implemented in order to promote growth and national stability. In 1997, the financial crisis and the so called IMF bailout, a situation in which Korea had to rely on loans from the International Monetary Fund to recover from the financial crisis, temporarily put a health on economic growth, but in turn encouraged the Korean government to further implement a rapid economic restructuring. Thus, in the past 50 years, Korea went from being among the poorest countries in the world to having one of the strongest and most powerful economies on a global scale (Jung et al., 2009; Kwon, 1998; Monocello, 2022; S. Han et al., 2018; Shim et al., 2008; S. Y. Kim et al., 2014). This rapid economic growth brought on significant social change, which had a particular impact on women and their position in society. Women began to have greater opportunities and more power in social, economic, and political contexts. Together with these changes, scholars noticed a rapid increase in body dissatisfaction and eating disorder rates in Korean society. According to feminist theories, which posit that with social change and any movement towards gender equality unrealistic beauty standards and heightened pressure to meet those standards emerge, it is reasonable to assume that this exact phenomenon took place in South Korea. Indeed, the past few decades, the plump, traditional body standard has been replaced by the thin beauty ideal and, as social change occurred at a particularly rapid pace in South Korea, it very well may be that Korean women could experience particularly high levels of drive for thinness and body dissatisfaction compared to other countries (Jung et al., 2009; S. Y. Kim et al., 2014).

Male body ideals were also heavily influenced by social structure and social views on masculinity. Before the experience of Japanese colonialism and the Korean war the

ideal male body was represented by the thin, frail body of scholars or philosophers, while, after those events, a more muscular worker's body started to be favored. Following the economic restructuring, a softer masculinity began to gain popularity, with slender figures and lean muscles becoming the new male body ideal (Monocello, 2022). There is currently very little research on male body dissatisfaction in South Korea, but it is reasonable to believe that, since according to feminist theories rapid social changes also bring about an increase in the importance placed on the male body, South Korean men could also be affected by rising rates of body dissatisfaction (Jung et al., 2009; Monocello, 2022).

2.2 The three Cs of Korean culture: Confucianism, Collectivism, and Conformism

Confucian values have guided Korean society since the Joseon era (1397-1910), when Neo-Confucianism was adopted as the state ideology and upheld for the subsequent 500 years. Even today, Confucianism still exerts significant influence on all aspects of people's lives in Korea, from interpersonal relationships to politics, even though in the present day Western influences have begun to infiltrate the country (Jung et al., 2009; Monocello, 2022; Shim et al., 2008; S. Kim, 2018; T. Kim, 2003).

Confucianism prescribed a well defined role for women and for their body, placing them as submissive to men; their body was considered only as a vessel for the progeny of their husband's lineage since, unlike men, they did not possess *ki*, or the life force that was thought to connect the body, the mind, and everything in the universe (S. Kim, 2018; T. Kim, 2003). With the tumultuous social and political changes that occurred in Korean society after the end of the Joseon era, women began to have more opportunities and became increasingly independent. Nonetheless, even in modern society Confucian views on gender are still prevalent: women are still considered to have limited opportunities and it is believed that they can be of service to their family by marrying into a prominent lineage. Thus, immense importance is placed on a woman's appearance, and even professional matchmakers rate women's appearance as their most crucial quality to be chosen for marriage (Jackson et al., 2006; S. Kim, 2018). The prevalence of traditional Confucian gender roles amidst rapid social change and the overvaluation of appearance could, according to feminist theories and sociocultural

theories, represent noteworthy factors that researchers ought to consider when studying body image concerns and eating dysfunction in the Korean context.

Confucian tradition has also had an impact on how Koreans view male bodies and the ideal male physique. Both the importance that Confucianism places on balance or “the Confucian doctrine of the mean” (He & Barnhart, 2024, p. 2) and the ideal small physique of philosophers who avoided manual labor to maintain their status seem to be reflected in Korean male body ideals. A balanced physique with small muscles seems to be preferred, as too much muscle is viewed as shallow and is connected to not being well educated (He & Barnhart, 2024; Monocello, 2022).

Confucian philosophy emphasizes social harmony and the importance of the group, and particularly the family, with high importance placed on the individual’s obligations to others (Jung et al., 2009). Two fundamental concepts of Confucian tradition, *woo-ri* and *na-doo*, are particularly important for Korean society. *Woo-ri* can be translated to “we-ness”, and it’s the concept of the group, the interdependence between people that is so highly regarded by collectivistic societies like the Korean one. The concept of *woo-ri* goes hand in hand with *na-doo*, which directly translates into “me too”. With the high value attributed to belonging to a group comes almost an obligation to conform to the norms of the group. The need to maintain ingroup membership for Korean people can be inferred even from the difference between American and Korean advertisements. It was pointed out that while in America, a notably individualistic society, commercials for mobile phones emphasized practical features, Korean ads focused on the social meaning of owning the phone, with messages implying that having it would allow the person to keep up with trends, and with that, their ingroup as well (Shim et al., 2008).

Many have theorized that people in collectivistic cultures may feel more pressured to follow the norms and duties set by their society compared to people in individualistic cultures. Consequently, it is possible that people who live in a collectivistic society such as the Korean one may feel greater pressure to conform to the beauty standard and to follow body image trends such as the thin beauty ideal. It is also plausible that other’s opinions may be taken into account more and be more influential for Korean people. They may internalize their ingroup’s opinion more easily, and consequently be more likely to base their self evaluation on it (Jung & Lee, 2006; K. B. Kim, 2014; Lee et al., 2014). This could represent a specific culturally defined risk factor for the development

of body image disturbances, as the involvement of sociocultural pressures to conform to appearance standards in the etiology of eating disorders has been confirmed by many sources (Kakar et al., 2023; Thompson et al., 1999). Moreover, it seems that people in collectivistic societies have a tendency to make more social comparisons than people who live in individualistic societies; it has been hypothesized that this heightened tendency may be due to the fact that social comparison is put in place in order to verify their compliance to the ingroup standard. Social comparison has been cited as one of the main influence factors for the development of body dissatisfaction, and has been found to act as a mediator between sociocultural pressure and disordered eating behavior in many studies (Kakar et al., 2023; Krug et al., 2020). Accordingly, it may be that Korean women are more susceptible to these negative outcomes of social comparison. Indeed, it has been reported that Korean women are more concerned with their appearance compared to American women and give appearance more cognitive importance. According to the same study (Jung & Lee, 2006), it has also been found that they are less satisfied with their body, and they perceive greater discrepancies between their body shape and their desired body shape compared to American women (Jung & Lee, 2006; Lee et al., 2014). Johnson et al. (2014) have also proposed that body comparison and pressure to conform may be particularly significant for Koreans regarding the engagement in risky appearance management behaviors such as extreme dieting. According to their interpretation, for Korean people these types of behaviors may not reflect a desire to be more satisfied with their bodies, but a desire to conform to what others are doing (Johnson et al., 2014). On this note, it has been often observed that many appearance related behaviors, such as getting plastic surgery or dressing fashionably, may represent a way to conform to society's trends for Koreans. Instead, it has been noticed that people from other countries put those kinds of behaviors in place to express themselves and their personal wishes regarding appearance. Indeed, while Americans often justify the decision to get plastic surgery using terms such as empowerment or individual choice, when asked, a young Korean girl affirmed that, like buying clothes, getting surgery was something that, when in trend, everyone follows (T. Kim, 2003). Even though specific cultural characteristics such as these have been known to shape Korean society's views, opinions, and behaviors, and even though many hypotheses about their possible involvement in shaping culturally specific etiological

paths for eating disorders have been made, there is still a considerable gap in the scientific literature at our disposal on the matter. More research must be conducted in order to further our understanding of how these specific cultural factors may impact the onset and maintenance of disordered eating in collectivistic countries such as South Korea. This way, specific and effective prevention and treatment options for people belonging to different, non-Western, cultures could be developed (Agüera et al., 2017; Jackson et al., 2006).

2.3 Eating in Korea

It has been theorized that cultural eating practices, or eating habits promulgated by a specific culture, may have an influence on subsequent eating behavior (Anderson-Fye, 2017). As such, it could be interesting to look into Korean people's eating habits to understand how cultural and social environment may shape eating behavior.

In recent years, it has been reported that more and more people prefer eating out rather than cooking and consuming home cooked meals; in fact, recent reports show that while the frequency of eating out has increased, Korean families seem to spend less and less household income on food to be cooked and eaten at home (H. J. Kim et al., 2019). In a recent study (S. Park et al., 2017), Korean workers expressed their frustration over often having to eat at restaurants or eating processed food instead of having home cooked meals due to their busy schedule. Being busy at work and work culture in general seems to be behind many of the eating practices of modern Korean people. Again, the centrality of Confucian values in Korean culture seems to play a significant role in influencing eating practices. Confucianism preaches the importance of the group and social harmony, which is maintained through a strict social hierarchy and respecting elders in particular. This directly translates into the work culture, where employees often cannot leave work before their bosses and as a result work long hours without breaks for proper meals. Staying late after work is also cited as one of the reasons why workers often don't have time for family meals and end up eating out most of the time (S. Park et al., 2017). Another key factor to consider when talking about the importance of the ingroup and hierarchy at work is the existence of *huesik*, or the frequent practice of having company dinners after work. This collectivistic practice heavily contributes to

the frequency with which Korean people eat out, as they might feel almost an obligation to take part in these social gatherings in order to bond with the ingroup and avoid disrespecting their bosses (S. Park et al., 2008; S. Park et al., 2017). Moreover, eating is considered a social act in Korea, such that even lunches are usually taken with coworkers, as a way to build teamwork. Many Korean workers have complained that it is difficult to eat what you want when eating out with a group of coworkers, and that they often felt it was a requirement to conform to what the other members of the group chose to eat (S. Park et al., 2017).

The importance of eating as a group is also involved in another common eating practice in Korea: meal skipping. In fact, many employees have reported that they feel uncomfortable eating alone and that because of it they have a tendency to skip lunches when that kind of situation happens. Meal skipping is also common among employees of Korean companies due to the pressure to work hard to help the company survive the difficult economic state of the country; succumbing to social pressure, employees often work through their lunches and skip dinner because of late evenings spent in the office (S. Park et al., 2017). According to a recent study, Korean people's dietary habits seem to be more and more characterized by reduction of meal frequency and skipping meals entirely (H. Park et al., 2023). Furthermore, Hong et al. (2014) found that meal skipping, and especially breakfast skipping was highest among participants who were actively trying to lose weight, suggesting that this practice might be also used as a weight management behavior by the Korean population. Further investigation on the employment of meal skipping as a weight management practice among Korean cohorts are definitely needed (Hong et al., 2014).

All of the eating practices that have become common among Koreans deserve to be studied thoroughly, as it has been observed that parental eating practices have a significant influence on children's eating behavior and that certain eating habits might impact the possibility of the development of an eating disorder in later years of the child's life (S. Park et al., 2017).

2.4 Appearance in Korea

Appearance is highly regarded in Korean society. Moreover, body shape comes across as being conceptualized through a somewhat different point of view compared to Western countries such as America (Jung & Lee, 2006; Monocello, 2019). Some studies comparing Korean and American cohorts have noticed that Koreans' notions of body shape were defined mainly by ornamentality rather than instrumentality, and that they based their opinion more on "lookism" rather than "healthism" (Monocello et al., 2024, p. 9). Contrary to Americans, overweight bodies were not considered dangerous for the person's health by Korean participants, but rather as something unpleasant to look at, that reflected a worse appearance that could hinder the possibility of making friends, finding romantic partners or even getting a job (Monocello et al., 2024). According to Monocello (2019), America and Korea tend to judge fatness through two different channels: health, or appearance. This is represented both on a personal level and on a societal level. In the United States the stigma around fatness seems to be based on the moral value of health, and by the notion that being fat represents a danger to the person's physical health; thus fat people are seen as responsible for their diseases and gaining fat is feared as it is seen as something that can bring health complications. In Korea, on the other hand, body weight is encapsulated in the broader concept of *chagi kwalli*, which can be understood as self-maintenance, or the act of managing a good, socially acceptable appearance. A good appearance can be achieved through many means, such as skincare, makeup, fashion, working out, and taking care of one's body in general (Monocello, 2019). Fatness is one of the contributing factors to an ugly appearance, but it is only considered as part of a whole, as can be seen in the term *anyodwae*, which incorporates the words for glasses, pimples, and pig (often used to refer to overweight people), to refer to an undesirable appearance (Monocello, 2019). This approach to appearance can be noticed also in the fact that Koreans often incorporate factors other than body shape and weight into their body image; proper proportions, the head, the face, and even clothes are often included into their body schema. There are many popular Korean phrases that evidence this kind of mentality. *Paldungsin*, meaning "eight head body", refers to the importance of body proportions, and posits that the ideal body is as tall as eight heads stacked on top of each other; *momwanöl* highlights the importance of the face compared to the body, as in Korea facial features and face size/shape are considered very important factors to gauge

whether a person fits the beauty standard (Monocello, 2019; Monocello & Dressler, 2020; S. Y. Kim et al., 2014). The fact that fatness is encapsulated in the person's appearance as whole can be understood by considering the dualistic framework of ornamentality and instrumentality. It has been found that while Americans can differ instrumental qualities of the body and ornamental ones, for example differentiating an athlete's muscle (instrumental) from an actor's muscles (ornamental), Koreans seem to care only for the physical appearance of muscles, no matter what they're used for. In short, it seems that bodies for Korean people are purely ornamental and related to self presentation and appearance. Research has previously connected ornamentality to disordered eating behavior, so it could be proposed that this particular characteristic of Korean society should be taken into account when investigating eating disorders in Korean populations (Monocello & Dressler, 2020).

The importance of appearance in Korea can be further explained by its role in determining or displaying social status. Already in the Joseon era the body was strictly linked with social status: small, thin bodies were reserved for the scholars, the governing class, while bulkier bodies were associated to those deemed less fit to rule (Monocello & Dressler, 2020). Today, attractiveness and good self presentation are associated with wealth and high social status, as all the procedures required to maintain a good self presentation can be expensive and time consuming. *Kkonminam*, which can be translated into "flower boy", is the perfect example of this. These kinds of men are known for taking part in many appearance management practices, and perfectly fit into the male beauty standard of having small muscles. Their appearance shows that they can afford the luxury of good fashion and skincare, while also having the time to cultivate the body by going to the gym. On the other hand, too much muscle is a problem, as it shows that the person is probably not involved in a lucrative career, since they spend a lot of time working out (Monocello, 2019; Monocello, 2022; Monocello & Dressler, 2020; S. Han et al., 2018). On this note, according to many reports, career opportunities in Korea seem to be easily influenced by the job seeker's appearance; fat people are not only seen as unattractive, but also lazy and less organized, and potential employers often doubt their ability to offer proper contributions to the company's mission or image (Monocello et al., 2024). When applying to possible job positions in Korea it's required that the applicant attach a photo to their resume, and while it is legally not allowed to

operate discriminations based on appearance in the process of hiring someone, many still believe that it is a deciding factor in any job interview. Being overweight specifically seems to bring with it severe social stigma and explicit discrimination. Due to the fact that body shape and appearance is so important, not only in how a person is judged as a whole, but even when it comes to obtaining employment, it is safe to assume that Korean people feel incredible pressure to achieve or maintain the thin body that is considered the standard of beauty (Cho, 2009; S. Han et al., 2018).

Social pressure towards obtaining a certain body or looking a certain way has been confirmed to be one of the most dangerous influences on disordered eating behavior. It is thus imperative that the peculiar way in which appearance is approached in South Korean society is delved into more deeply (S. Han et al., 2018).

CHAPTER 3

3.1 The present study: objectives and relevance

According to what has been discussed thus far, we can confidently say that cultural factors do indeed deserve a place among the myriad of officially recognized influences on the presentation and development of eating disorders (Anderson-Fye, 2017; Kakar et al., 2023; K. B. Kim, 2014). The scientific literature at our disposal has proposed how certain aspects of Korean society and culture may influence body image and eating behavior, and certain studies have even highlighted how Korean women seem to exhibit higher rates of body dissatisfaction compared to their western counterparts (Jung et al., 2009; S. Y. Kim et al., 2014). Confucian tradition is embedded in modern Korean culture, and it directly includes collectivism as a cardinal value of Korean society. With the idea that the group should be above the individual and the concept of interdependence imbued into the fundamental values of this society, conformity has been recognized as one of the main principles of Korean civilization. It has been brought forth that the internalization of societal (thin) beauty standards and sociocultural pressures towards appearance may be felt more strongly by people who have been brought up inside such a particular social climate (Jung & Lee, 2006; K. B. Kim, 2014; Lee et al., 2014; Shim et al., 2008). Moreover, Korea has long been known as a land where appearance is a fundamental part of life, in the personal sphere as well as in the social and in the professional context, heightening the societal pressure to fit into a certain ideal mold. Thus, it is reasonable to assume that certain peculiarities of Korean societies could represent culturally specific risk factors for the development of body image issues and disordered eating behavior, and that the Korean population might be especially at risk for the development of eating disorders (Cho, 2009; S. Han et al., 2018; Monocello et al., 2024). Unfortunately, not many studies have been conducted on Korean cohorts, and research on eating disorders has mainly focused on white and Western populations, so there is still a considerable gap in our understanding on how all of these factors interact with phenomena such as body dissatisfaction and the possible onset of eating disorders (Agüera et al., 2017; Jackson et al., 2006).

The present study aims to explore how living and taking part in Korean culture may shape the beliefs, attitudes, and feelings of Korean people in regards to eating behavior and body image, in order to gain a deeper understanding on how specific cultural factors come into play inside the broader framework of eating disorder presentation and etiology. This objective was pursued by organizing structured interviews with 10 Korean people about their experiences with their eating, their appearance, their body image, and their wellbeing in the context of their native culture. The data collected was then analyzed using thematic analysis, a process that was thought appropriate to thoroughly investigate such a delicate topic.

Through this investigation, considerable advances could be made in our understanding of how native Korean people perceive their eating, their appearance, and their body while being immersed in such a peculiar and nuanced cultural context, that vastly differs from the Western societies that have been the main focus of scientific research thus far. In addition to this, the present research could represent a starting point for the improvement of treatment experiences for minorities, by encouraging professionals to take cultural variables into account when treating patients that come from particular cultures or societies. As a matter of fact, this information could help clinicians tailor interventions to patients by paying attention to cultural factors, thus improving their understanding of the patient's situation or symptoms. In the case of eating disorders, for instance, knowing that the patient comes from a collectivistic culture such as the Korean one could alert the clinician to pay greater attention to family influences or conformity pressures.

Lastly, while a 2021 mental health survey by the Ministry of Health and Welfare of South Korea reported a 32.7% and 22.9% lifetime mental illness prevalence for males and females respectively, there is still little mental health awareness in South Korea. Several studies report low rates of help seeking and professional care among people in need in the country. In fact, according to previous research, only 12.1% of people diagnosed with a mental health condition receive professional help. The stigma around mental health is still rampant in South Korea, and people seem to be either unaware of their psychological problems or unaware of the existence of services that could help (J. Choi, 2023). This study could help shed light on how problematic behaviors or attitudes related to eating and body image are treated by South Korean people, and hopefully be a

cornerstone that encourages professionals to spread awareness in regards to the dangers of eating disorders among the Korean public. Furthermore, the present study could invite professionals to put in motion initiatives to help reduce the stigma around mental health in Korea, in order to improve access to psychological therapies for people in need.

3.2 Methodology and Analysis

3.2.1 Participants

For the purposes of this study, structured interviews were conducted with 10 people from Korea. Recruitment took place between the months of May and June 2024, and participants were recruited through a document posted on the researcher's social media pages, namely Instagram and Twitter, through instant messaging applications, and through word of mouth by mutual acquaintances. All participants were made aware that involvement in this study was on a voluntary basis, and that they could withdraw from the study at any given point with no repercussion. In addition, before taking part in the interviews, all participants signed a consent form for the processing of personal and special data and gave their informed consent to participate in this study by signing an additional consent form. Inclusion criteria to take part in this study were to be between 18 and 35 years of age, be able to speak and understand English, and to not have any medical condition or take any medication that restricts or alters eating behavior.

3.2.2 Materials

Investigating the participant's thoughts, attitudes, and feelings about their eating behavior, their appearance, their body, and their culture was determined to be the focal point of this study, so a structured interview was created to fulfill that requirement. The choice of using a structured interview as opposed to a less constricting option was made so that researchers could be as consistent as possible in their questioning, and thus minimize the possible influence they could exert on participants. By using this methodology, the interviews could all follow the same general script, but complete

freedom was given to participants as to how they could answer and how detailed the answer could be. This was done to ensure that, while still following a common topic, the answers could be as authentic, unbiased, and personal as possible. Still, due to the language barrier represented by the fact that English was not the participants' native language, some leeway was given so that the interviewer could explain unclear passages or terms.

The interview questions were inspired by the items of notorious questionnaires, such as the Eating Disorder Examination- Questionnaire (Fairburn & Beglin, 1994), the Sociocultural Attitudes Towards Appearance Questionnaire- 4 (Schaefer et al., 2015), and the Thin Ideal Internalization Assessment (Kidd et al., 2023). The Eating Disorder Examination- Questionnaire (EDE-Q) is a 28-item self report measure, used to investigate eating disorder symptomatology in both clinical and non clinical populations, that is structured into four subscales, which are: Restraint, Eating Concern, Shape Concern, and Weight Concern (Carey et al., 2019). The Sociocultural Attitudes Towards Appearance Questionnaire- 4 (SATAQ-4) is a 22-item measure that aims to assess sociocultural influences on appearance. It is structured in 5 factors:

Internalization: Thin/Low Body Fat, Internalization: Muscular/Athletic, Pressures: Family, Pressures: Peers, and Pressures: Media (Schaefer et al., 2015). Finally, the Thin Ideal Internalization Assessment (THIINA) is a 17-item questionnaire, composed of three subscales (Thin Overvaluation, Thin Idealization, and Thin Behavioral Drive), that represents a comprehensive measure of the internalization of the thin ideal by women (Kidd et al., 2023).

The interview created for this study was structured in 10 question clusters, each pertaining to a specific topic of interest. The first part of the interview concerned the participants' identity, and it included two clusters of questions: one about their gender identity and sexual orientation, and one about their ethnic and cultural identity. The next part of the interview was put in place to explore their eating behavior, and was composed of three clusters of questions: one about the participant's thoughts and feelings about their eating behavior, one about the impact they thought their culture might have had on it, and one about the influence that their eating behavior might have had on their well-being. The same trend of questioning was followed for the subsequent part of their interview, which concerned their body image. The participants were asked

questions about how they felt about their body image, how they felt their culture might have had an influence on their thoughts and feelings about their body, and finally their thoughts on how the way they viewed their body might have impacted their well-being. The final two clusters of questions concerned social media, and more particularly how the participants' use of Social Networking Sites could affect their eating behavior and body image.

For a more detailed look at the interview questions, please refer to the appendix.

3.2.3 Procedures

Prior to the recruitment process, approval from the Ethics committee of the University of Padova was requested. After approval to conduct this study was granted (reference number: 351-b), the recruitment and structured interview processes were enacted. Participants were interviewed online, through google meet, and all the interviews were videorecorded. The researcher then transcribed the interviews to ensure anonymity, and the transcripts were shared with the research team in order to be analyzed. The participants were informed of this procedure at the beginning of the interview. Before starting the interview, the researcher informed them about the objectives of this study and the topics that the interview was going to delve into, and they were also told to let the researcher know if any question made them uncomfortable, so that it could be skipped. This step was added to ensure that the participants felt as comfortable as possible, due to the delicate nature of the topic, and to minimize any stress that could be caused by cultural differences that could hinder acceptable communication between the interviewer and the participant. The importance of this step was made clear when one participant expressed that they sometimes feel it is more difficult for them to express disagreement or say no when asked to do something compared to their international friends. When talking about cultural differences they stated: "I think the thing we have in Korean culture especially like when I hang out or when I'm talking with the internationals, they really feel comfortable to express themselves or they seem really comfortable to say no if they don't want to do that, but when it comes to Koreans, we have a tendency to uhm...how can I explain this, like follow others' opinions". This statement further reinforced the researchers' belief that additional reassurance regarding

the possibility to withdraw from the study or refrain from answering questions that could hurt their sensitivity would be beneficial to ensure that the participants felt as comfortable as possible.

Interviews were conducted in English and, based on the questions, were predicted to last about 40 to 45 minutes. In actuality, the duration varied significantly according to the participant, with some interviews lasting about 30 minutes and others lasting over 1 hour. Lastly, participants did not receive any compensation for taking part in this study, as they were made aware of during the recruitment process.

3.2.4 Data Analysis

The data collected through the interviews was analyzed using thematic analysis, a qualitative data analysis method developed in psychological research by Braun and Clarke (2006). Thematic analysis is a methodology that allows the researcher to get a deeper insight into a set of data by systematically searching for common meanings and significant patterns that emerge from the ensemble of information they are presented with. The patterns that emerge should be meaningful and relevant to the research topic. It is a very flexible methodology that can be adapted to many different types of data and procedures (Braun & Clarke, 2006; Braun & Clarke, 2012). In this study, a mostly bottom-up, inductive, and experiential approach was preferred, as the information present in the data itself was the focal point of the research conducted.

By analyzing the interviews conducted using thematic analysis, the answers that participants gave were thoroughly examined, common meanings emerged and developed into a group of themes that could represent a starting point for understanding the peculiar ways in which Korean people conceive eating, appearance, and body image.

The analysis conducted required multiple phases. At first, the transcripts of the interviews were read multiple times by two different researchers, in order to become familiar with the data. After the familiarization process, both researchers independently started to generate codes based on recurring patterns and significant topics that emerged from the data set. The codes were then shared and discussed, which led to the altering of the set of codes, where some codes were changed, incorporated into others, added, or

even discarded. The final set of codes was comprised of 59 individual codes, which were both representative of the data and relevant to the research question. Some of the final codes were: “Koreans care more about appearance/body shape than people from other countries”, “Fitting the beauty standard brings advantages in society”, “Desire to be thin to fit clothes”, “Muscle is not as important as the west”, “Fear of being fat/dislike of a fat body”, “Desire to gain muscle”, “Fear of losing muscle”, “Feeling more comfortable in one’s skin after leaving Korea”, “Fear/Worry about other’s judgement or comments”, “Food tracking/worry in order to promote health”, “Good food vs. bad food”, “Exercise as a compensatory mechanism”.

Once the codes were finalized, they were analyzed by both researchers in order to find patterns that could be meaningful to the research question and that could possibly represent innovative and relevant topics or become key concepts for future researchers interested in studying eating and body image related phenomena in South Korea. What resulted from this process was a set of themes that describes the peculiar ways in which Korean people view eating and appearance, some of which were expected based on pre-existing literature, and some that could represent innovative insights that hopefully could inspire new and significant research advancements.

CHAPTER 4

4. Results

4.1 Descriptive Analysis

The mean age of this study's participants was 24,2 years old ($SD= 3.45$), and the participants' ages ranged from 21 to 33 years old. Six of the responders identified as female, while four identified as male, and all of them assigned their ethnic identity and nationality as Korean. For a more detailed look at the demographic questions please refer to Table 1.

VARIABLE	N	%
Gender		
Female	6	60%
Male	4	40%
Ethnicity		
Korean	10	100%
Marital Status		
Single	4	40%
In a relationship	6	60%
Highest Education Level		
High School Diploma	6	60%
Bachelor's degree	3	30%
Master's degree	1	10%
Employment (more than 1 choice possible)		
Unemployed	1	10%
Student	8	80%
Part-time occupation	3	30%
Previous psychological diagnosis	3	30%

Note. N= 10. Participants were on average 24,2 years old ($SD=3.45$)

Table 1

Sociodemographic Characteristics of Participants

4.2 Thematic Analysis

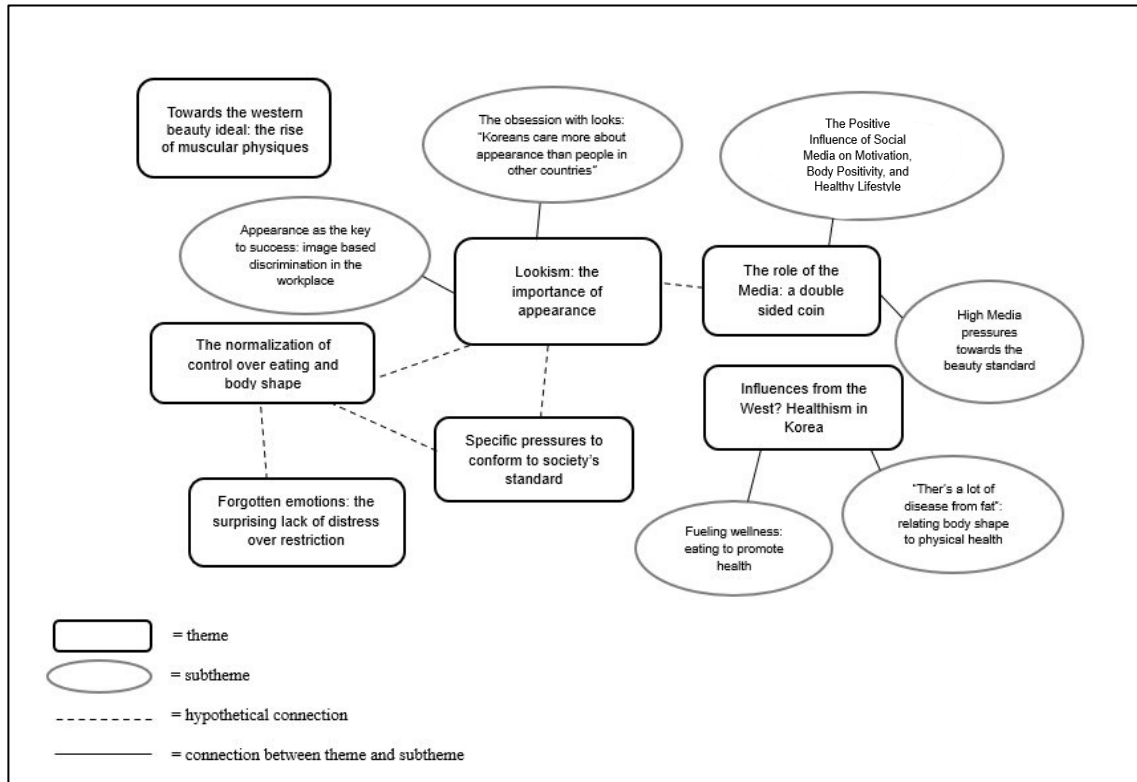


Figure 1

Thematic Map of the Data Obtained Through the Interviews

4.2.1 Theme 1: Lookism: the importance of appearance

The first theme that emerged from the interviews conducted concerned how important appearance seems to be for Korean people, and how much pressure was felt by the participants to present their “best look” to other people. Two main subthemes were identified. The first narrates how important appearance is for Korean people, while the second focuses on the impact of the centrality of appearance on the participants’ ordinary life.

Subtheme 1: The obsession with looks: “Koreans care more about appearance than people in other countries”

The main narrative that emerged from all the interviews conducted paints a picture of a group of people who are hyper aware of how much looking good and fitting the societal standards of beauty can improve a person’s quality of life. All the participants recognized that being thin represents a substantial part of fitting the beauty standard, but many recognized fashion and looking “put together” as important factors for having a good appearance. Surprisingly, many participants also acknowledged that, in their opinion, the obsession with fitting the beauty standard and looking good is more pronounced in Korea compared to other countries. In one interview a participant stated: “If I were not born in Korea and then the people around me, if they’re not Korean, I think there’s way less time that I’m just picturing about my body, and my body weight, and my appearance a lot, yeah. And then, uhm...body shape + body weight+ body appearance like styling and outfit, especially in Korea that’s like a big part, and if I were not like in Korea I think I would be more feel free and then just go after chill and comfortable outfits (P6)”. From this statement it is apparent just how much pressure towards looking acceptable is felt by Korean people. Moreover, it shows how much just being in Korea compared to being in other countries, and being surrounded by Korean people compared to being around foreigners impacts the way this participant feels regarding their appearance. It is interesting to notice how body weight and body shape are not mentioned alone, but they are incorporated in a global ideal, which also includes styling and clothes. Again, another participant declared: “I feel like Koreans are more conscious about the way they look and we try more to look put together when we’re stepping outside the house, but Americans they don’t care as much, so you can definitely tell that from the way in which people dress... they are like more expressive and they also dress in uh, ways that Koreans would deem as like fashion terrorists cause they’re like, like the combination of their outfits is kind of off putting.. being in that kind of environment made me not care as much and it kind of felt good so... (P10)”. For this participant, experiencing life outside of Korea was helpful, as it made them discover a new, more careless way of living. They also expressed how being in a different kind of environment, not so focused on outwards looks, elicited positive

emotions. It is reasonable to assume that the constant pressure towards appearance is felt almost as a burden, that heavily weighs on people's minds.

Subtheme 2: Appearance as the key to success: image-based discrimination in the workplace

The peculiar meaning given to appearance by Korean society was mentioned by most of the interviewees. Most of them stated how impactful having a good self presentation could be towards landing a decent job. Being overweight, in particular, was mentioned as a detrimental factor for obtaining employment, as most of the participants linked fatness to a bad personality, and to personal and moral flaws. One participant stated: "Korean view fat people as too lazy and even they don't want to give them a part time job or like a job because even they are too lazy to like even lose some weight and make yourself more beautiful so they have some very bad views about the fat people (P2)". Koreans seem to be extremely aware that having an appearance that is not socially acceptable, and especially being over the weight standard, can be connected by other people to flaws. These flaws have nothing to do with looks but often with other personal characteristics, such as laziness, that potential employers actually consider when deciding on candidates for a work position. Again, another participants affirmed: "If I'm having a good body shape and an ideal bodyweight it would be easier to get accepted to any roles or jobs because like in Korea, when we apply for our resume we put our pictures? Like profile picture... and when we are doing an interview uhm, I think still the interviewers and the society, when someone have a good body shape they have a good daily routine, and then it comes to them also having...could be a good personality P6)". Body shape is connected to personality and, according to this participant, appearance plays a significant role in the selection of candidates, which seems to be a practice that most job seekers are particularly concerned with. Indeed, as a participant said: "I heard that a lot of Koreans who try to get a job do some diets if they think they're fat because that thing impacts getting a job so I think I would start some diet if I had to go to a field and find a job (P2)." Dieting seems to be a pretty common practice in people entering the job market in Korea, almost as common as preparing for interview questions in the West.

4.2.2 Theme 2: Specific pressures to conform to society's standards

During this investigation, some specific pressures towards appearance and towards the thin beauty ideal were identified, as multiple participants talked about them as significant factors in determining their attitudes towards eating and body appearance. The first phenomenon that was mentioned as critical by the people interviewed was how frequently and easily other people commented on their eating habits and their body. More than one participant mentioned receiving unwanted commentary not only from family, but also from friends, and even from strangers. Observations about food intake seem to be a pretty usual occurrence according to the people interviewed. One participant expressed their frustration with this practice by saying: “when I’m having a meal with people they are always commenting, they always make a comment about my eating, like “oh, you’re such a big eater, I didn’t see you as a heavy eater” or “ oh, you have a smaller portion, that’s why you stay in fit” like any comments aren’t really good for me you know (P6)?”.

Most subjects seemed to be conscious that commentary from other people is to be expected in Korea. As one person said: “Korean culture people comment about people’s bodies quite a lot, in real life and on the internet as well and being skinny is the beauty standard here (P10)”. Commentary about body shape happens from many different sources. One participant recounted: “My dad...me and my dad went to shopping...at Zara, and I was trying out some jeans and I asked my dad:” Oh, dad, do you think that’s good?” and he was like: “you want to buy those jeans in that weight?” because he thought I was too heavy than my usual weight, I think. Yeah, I feel like my family is kind of straight, they talk to me straight when they think I’m fat (P2)”. Comments from friends are also common, but for this participant in particular, it was only male friends that usually commented on their body. They recounted: “ the guy friends, they’re very straight to me and they always tell me: “oh, your head looks like a totally round thing because you gained a lot of weight” (P2)”. Commentary on body shape and weight seems to be a regular occurrence even coming from complete strangers. One interviewee admitted to feeling depressed when shopping if their body is bigger because

“there’s nothing to fit for my body and then even the salesperson would be...like they can say some uncomfortable comment about my body (P6)”.

Clothes represent another factor that plays a significant role in pressuring people towards the thin beauty ideal. From the interviews, it was evident that clothing sized are not inclusive of bigger bodies, and most stores only sell “one size” clothing. Many participants talked about wanting to be thin in order to fit clothes or caring about not gaining weight so that they could continue to wear their favorite clothing items. One participant seemed particularly aware of the impact that the lack of inclusive sizing in Korean fashion might have on people. They stated: “So the clothes size is very standard size, so many girls think the tiny clothes is good for me so want to be less weight and diet; so I think media is very critical but the clothes industry is important... (P4)”.

4.2.3 Theme 3: Influences from the West? Healthism in Korea

Subtheme 1: Fueling Wellness: eating to promote health

According to the information gathered through the interviews, it looks like physical health is of utmost importance for all participants. When asked about their eating habits many of their answers were focused on the quality of the food that they habitually ate and what consequences it could have on their health. Eating healthy appears to be a priority for the people interviewed, as many mentioned caring about eating vegetables and trying to limit their sugar and dessert intake. One participant stated: “I thought I should eat more vegetables because it is important for health and then I started to eat vegetables (P2)”, while another said: ““I think I want to eat more vegetables for my health and of course I want to eat more dessert but it is not good for my health so I personally do not (P1)”. Again, when talking about their eating habits one of the people interviewed affirmed that they used to abuse the quick and easy delivery system in Seoul and eat a lot of junk food during COVID times, while “nowadays I try to eat something healthier than other foods so I just cook with the proper vegetables in my house (P4)”.

Eating unhealthy also seems to cause worry in some of the interviewees, and a strict good food/bad food dichotomy was evident when listening to participants talk about

their eating choices. One affirmed: “I’m really craving for the like *tteokbokki* or a lot of you know, it’s not the things good for your health, and I can’t help but have that, and I have that and I feel like more pressure to maybe tomorrow or for two day I should be choose for the better eating choices because I made a bad choice (P6)”. Eating unhealthily also brings about specific worries about physical wellbeing, such as the belief that a poor diet might lead to worsened health outcomes, like diabetes, which was mentioned by more than one participants as a feared consequence from their eating habits.

Subtheme 2: “There’s a lot of diseases from fat”: relating body shape to physical well-being

A strong narrative that emerged from all the participants was the connection between the body and physical wellbeing. Almost all of the participants seemed to distinguish pretty clearly ornamental characteristics from instrumental characteristics. Many of them declared themselves happy about gaining muscles or getting fit because they felt it was healthier, and because it would allow them to perform certain tasks better. One participant expressed their satisfaction about getting in shape by saying: “(having a body with more muscles) it’s getting my body more functional and more stronger (P5)”. They further remarked on how getting leaner made him feel better, and affirmed: “I’m pretty sure it is having a pretty huge impact on my wellbeing, because losing a lot of weight and gaining a lot of muscle is basically helping myself to improve my health (P5)”. Getting stronger and improving one’s health emerged as significant motivators towards making active changes in one’s body shape and diet, and the participants expressed that they felt fulfilled when implementing those changes with health and physical well-being as an objective. Nonetheless, the link between being in poor shape and negative health outcomes was still present in some narratives, as some participants conveyed that fatness was seen as dangerous for a person’s health. Indeed, one person stated: “diabetes, like excluding diabetes there’s a lot of diseases from fat and it makes me sad (P1)”. Overall, it was found that body shape is consistently connected to health outcomes, and while a fit body was consistently associated to good health, it was commonly believed that fat bodies can lead to disease.

4.2.4 Theme 4: Towards the western beauty ideal: the rise of muscular physiques

While the thin beauty ideal has been well documented, from the interviews conducted a new narrative about body shape standards emerged. It looks like muscular bodies are becoming a new ideal for Korean people, at least in the eyes of the people we interviewed. “At one point Koreans became obsessed with having muscle as well, In Korea there’s a lot of products like protein, or protein drinks, so I used them and I still do actually (P7)” is what one participant said. It does indeed appear that participants are deeply aware that the trend is changing when it comes to body shape, and that having muscles is becoming increasingly accepted. For men, big muscles have started to replace small muscles as the body standard, and a lot of males started going to the gym in order to gain muscles, as one participant confirmed by saying: “now all the dudes have started lifting and yeah like the trend is definitely changing and I’m not following the trend but it just happened to be so... (P8)”.

Fit, muscular bodies are not only trendy for men however, as some female participants have also expressed their preference for muscular physiques over thin physiques. One person stated: “I think I don’t like skinny body but I want to have some- what is the- ...I want to have a well rounded muscle (P4)!”, while another explained that she felt less constrained by this new option in the female beauty standard, by saying: “Like a few years ago in Korea, most of girls, they want to get a body shape just like being thin, but these days there’s some trending with the muscle girlies? So after coming out kind of body trending, I feel like there could be more options that I can choose so I feel more comfortable and free, you know (P6)?”.

4.2.5 Theme 5: The normalization of control over eating and body shape

Over the course of the interviews, it quickly became clear that exercising high amounts of control over their food intake and their body shape was perceived by participants as something common, and almost expected. All the participants talked about closely watching their caloric intake, or meticulously accounting for the macros they consume, either now or at one point of their life. Many male participants also reported following

strict meal plans in order to get leaner and gain muscle at the same time and talked freely about how they were managing their protein intake. Many of the people that were interviewed talked about their experiences with dieting, either in the past or now, and expressed how they think it's important to have certain standards for diet and exercise. Statements like "I recorded all my food and calorie and the protein (P1)", "I try to set the calories to 1500 (P1)", "I'm always on a diet with my sister so we always check the calories to eat something (P2)", "I try to like eat at least 90 g of protein every day so I always try to divide it to like 30 g per meal, and other than that I try to cut down my carbohydrate intake (P5)", or "If I ate a lot yesterday I think oh today I should eat like half the amount that I used to eat (P2)" were said by almost all of the participants. One participant stated: "I try to avoid the sweet or processed food and then especially I'm trying to just having two meals, cause people generally are having three meals in a day but I think that's too much for me and if I'm having all the three meals in a day it could be like...yeah...I want to say unfit (P6)". All of the people interviewed manifested high control over diet and eating, with some sticking to strict meal plans even at the cost of skipping social or professional events, and others following dieting trends such as intermittent fasting, an eating practice where food intake is restricted to a certain time frame, as one participant said.

From some of the interviews, it was also discovered that some participants engaged in extreme dieting practices, which entailed severe restriction and sometimes caused physical consequences, as more than one participant reported feeling faint because of their eating, or lack thereof. Moreover, from what the participants declared, peers and friends also contribute to the tendency of controlling food intake, as many mentioned how they discussed dieting or restricting food intake with their friends.

Exercise was frequently brought up as a way to manage calorie intake. People often admitted to using exercise to compensate for eating too much food or eating unhealthily. The use of exercise as a method to control energy intake by compensating for the food eaten was mentioned spontaneously by multiple participants. One participant told the interviewer that whenever they felt like they ate too much the day before, the next morning they "worked out double the amount in order to get rid of the fat (P7)". Another participant confessed to often thinking about how much they should exercise in

order to amend the food they'd eaten that day, and many more reported similar sentiments.

It appears that exercise serves the function of helping to control body shape by compensating for situations in which the strict control over diet slips up for a lot of the people interviewed. The need to control body shape emerged from all of the interviews, whether it was expressed explicitly or not, as all of the participants reported high rates of body checking and the use of many different measures to control their weight and body shape. Many of them explicitly discussed which actions they put in place daily in order to keep their body shape in check, such as exercising, changing the amount of macronutrients they ate or even undergoing severe diets. Most of them also expressed their desire to exert more control over their weight, as they mentioned working towards a specific shape or weight goal at the time of the interview.

All in all, we can confidently say that a strong narrative of control over eating and body image emerged from all the interviews, both for male and for female participants.

4.2.6 Theme 6: Forgotten emotions: the surprising lack of distress over restriction

Most of the participants displayed a strong tendency to control their food intake and their body shape, so it is surprising that not very much was said about their emotions during the interviews. Nearly all of them showed a significant lack of distress about their eating behavior and their relationship with their body. Some people did actually report feelings of stress about their diet, but they were mostly related to health outcomes, such as the fear of getting diabetes from unhealthy eating habits. Most of the participants expressed feeling either motivated to reach their body shape goals or satisfied with their current body shape. Even the participants who reported body dissatisfaction would say that they did not care that much, or that they did not experience much emotional discomfort because of it. Many of the answers were also focused on behavior rather than feelings and emotions. For instance, when asked about how their relationship with food impacted their mental wellbeing one participant declared: "I think when I'm having a good relationship with my body shape I feel more comfortable when I'm choosing food...like for example I'm craving for the cream coffee...but if I don't have a good image for myself, I would choose for the just without

cream, the coffee without cream because I want to keep my body more fit! But, if I'm just satisfied with my body right now I don't care what kind of food or what kind of ingredients they have, but I just go for things that I really want to do, or want to get (P6)". It is noticeable how the response immediately jumped to a description of their behavior, instead of focusing on their emotional reactions. When asked about their relationship with their body another participant stated: "I feel like I have better things to worry about than my body. I mean it's like I do see a point of improvement, but I don't see a point of...deficiencies (P9)".

Even when actually talking about feelings, they were denied with sentences like "I don't think it ever gave me anxiety because I feel a lot of pressure but not at an anxiety level I think...(P2)" or diminished, with phrases like "Sad...oh...I don't feel like super sad emotion, but if I cannot button up my jeans or so it will make me sad, but not a very strong emotion (P2)". In conclusion, we can assume that the emotional sphere was somewhat neglected by the people interviewed in their answers, as they didn't declare many emotional reactions even when specifically asked about them.

4.2.7 Theme 7: The role of the media: a double sided coin

Subtheme 1: High media pressures towards the beauty standard

From the interviews conducted it seems like the people interviewed are quite susceptible to media pressure. One of the participants even identified the media as the strongest pressure they felt towards fitting the beauty standard. Another participant stated: "the media is like quite a big amount of pressure because nobody in the TV is fat, they're all thin and beautiful and when I was younger I kept thinking oh there's a fat man in the tv show but there's not fat woman, and that's a lot of pressure (P1)". K-pop idols were mentioned by another as role models frequently represented by the media as the ideal that people should follow. They affirmed: "we (Koreans) always view the skinny people like K-pop idols as normal and that we should follow to be like them (P2)".

The idea that people should follow what they see represented in media was mirrored by yet another person, who stated: “Whenever I watch TV there are always such thin girls, and so I actually got this idea (that I should be thin) from our culture (P7)”.

In short, the media emerged as a considerable influence over the idea that the people interviewed had of how the ideal body should look like, and as a significant source of pressure to follow that standard.

Subtheme 2: The Positive Influence of Social Media on Motivation, Body Positivity, and Healthy Lifestyle Choices

Most of the participants talked about social media as a positive influence, as a place they went to for inspiration on recipes, or to search for information on the right way to exercise. Many of them also talked about the role that social media played in helping them stay motivated or gain motivation towards going to the gym or exercising. On this note, one participant declared: “When I see videos of people teaching how to work out, I feel more motivated to go to the gym (P7)!”, while another said that social media helps them work out as it contains a lot of good tips and techniques.

Another reality on social media that was frequently talked about during the interviews was the body positivity movement. One participant stated: “Oh like in the reels, once I saw that kind of content I cried, I was really affected (in a good way) (P1)”. Another participant talked about how social media helped them gain a healthier mindset over their body image by saying: “recently I’ve seen like a lot of people posting about the realities of like photoshop and what you see isn’t everything and people sharing their experiences ... and that’s actually been really informative and helpful (P10)”.

From the responses gathered it seems that social media could represent a positive influence compared to traditional media for phenomena such as dieting and body image.

CHAPTER 5

5. Discussion and conclusions

5.1 Discussion

The present study was conducted with the aim of gaining a better understanding of phenomena related to eating and body image perception in South Korea. Research on eating disorders has thus far been focused on Caucasian and Western populations. This study was conducted as a way to broaden our knowledge about how cultural variables could influence their development and characteristics in non-Western countries.

Specifically, seeing that truly little has been done in order to understand the way in which different cultural variables could shape eating disorder presentation in non-Western countries, it was thought best to examine factors that have been confirmed to be involved in their development. These factors include eating habits, body image concerns, and appearance pressures.

South Korea was considered as fertile grounds for this type of study. It is in fact a non-Western country in which, due to particular cultural characteristics such as the centrality of Confucian values and the high importance placed on appearance, sociocultural pressures on eating and appearance specific to the country could represent a topic of interest for research on ED risk factors (Cho, 2009; S. Han et al., 2018; Monocello et al., 2024). Indeed, even though there is a relative dearth of studies on the topic, some researchers have reported that South Korean women exhibit higher levels of body dissatisfaction compared to Western populations (Jung et al., 2009; S. Y. Kim et al., 2014). For these reasons, it was strongly believed that investigating Korean people's attitudes and feelings on their eating behavior, their body, and their culture could represent a significant first step in researching cultural differences in eating disorder presentation and ED related phenomena.

The results of this study confirmed already existing literature on eating and body image concerns in South Korea, and supported previous findings on how eating, body shape, and appearance are viewed by the South Korean population. Nonetheless, some

surprising and new outcomes, which could represent interesting prompts for future research, emerged.

The first theme that became apparent through the analysis of the interviews concerned the importance of physical appearance for South Korean people. Many participants declared how they felt that Korean people cared more about appearance compared to people from other countries, and expressed how they would feel more comfortable with their appearance if they did not live in Korea. The sentiment expressed by the participants of this study is echoed by several results presented by previous research. As mentioned by Monocello (2019), *chagi kwalli*, or self-maintenance, is extremely important to Koreans. An acceptable body shape (which can be described as a thin or lean physique with small muscles), good fashion sense, good facial features, impeccable makeup, and unblemished skin are all physical traits deemed fundamental for being considered successful and being accepted in society (Monocello, 2019). The relevance of physical appearance for South Korean people and their obsession and concern with their looks has been confirmed by many different sources. South Korea places third worldwide in plastic surgery rates, following much bigger and more populated countries such as the USA. When looking at the density of the population, it takes the lead with the highest rate of cosmetic procedures per capita. Furthermore, lookism, or appearance-based discrimination, is prominent in the country, and studies have proposed how significant portions of the population reported experiencing some sort of prejudice based on their looks (Lee et al., 2017).

Lookism also seems to play a significant role in the workplace, as many participants cited body shape in particular as a determining factor for being able to land a job. More than one participant declared that Korean people link fatness to undesirable personal qualities, such as laziness, or being disorganized. Thus, not being able to take care of or manage one's appearance is directly associated to not being able to manage important tasks in the workplace by potential employers. As the application process requires a picture attached to the resume, many participants felt that a not acceptable appearance would be detrimental to obtaining the position they applied for. One participant even mentioned that it is common for people to start dieting in preparation for job interviews. Some studies have already cited that appearance and thinness being explicitly important

towards employment can be defined as significant sociocultural pressures to fit the beauty standard in South Korea (Cho, 2009; S. Han et al., 2018).

Sociocultural pressures towards appearance and drive for thinness have been confirmed to play a significant role in the development of disordered eating and have been linked to the onset of several eating disorders (Izydoreczyk et al., 2021; Kakar et al., 2023; McClelland et al., 2020; Stice et al., 2017; Thompson et al., 1999; Treasure et al., 2020).

For this reason, the importance of appearance both in society and for employment in South Korea ought to be further explored, as it could represent a significant cultural risk factor for eating disorders in the South Korean population. Moreover, as dieting has been cited by our participants as a common method to prepare to job interviews, increased attention should be paid to Korean people who are seeking employment, as they may be particularly at risk for the development of an eating disorder.

Sociocultural pressures towards appearance have been confirmed to play a significant role in ED etiology, and the internalization of societal standards of beauty has been found to be a mediator in this relationship (Kakar et al., 2023; Thompson et al., 1999). It has been proposed that Korean people may have a higher tendency to internalize societal beauty standards, as they belong to a collectivistic society. According to many sources, this could be because people who live in collectivistic societies tend to experience higher pressures towards conformity compared to people belonging to individualistic societies (Jung & Lee, 2006; K. B. Kim, 2014; Lee et al., 2014).

During the course of our interviews, some specific pressure to conform to the societal standard of appearance emerged. Frequent commentary on eating behavior and body shape was identified as a significant pressure towards conforming to the thin beauty standard through our participant's answers. Many participants talked about how in Korea it is common for other people to comment on a person's eating, body shape, and appearance, and many recounted their personal experiences, expressing feelings of discomfort. Comments originated from many different sources. For example, one participant recalled their father calling them fat, while another expressed their unease over store clerks commenting on their body shape and weight. Comment concerned not only body shape, but eating behavior as well. One participant declared that they felt more at liberty to order items with a higher caloric content in the absence of their

family, since whenever they shared a meal with them, family member frequently commented on how much they ate.

Comments on appearance have been found to be a significant risk factor in the development of disordered eating behavior, and it has been proposed that they contribute to the internalization of the thin ideal. Indeed, in line with what has been posited by the Tripartite Influence Model, they can be considered a sociocultural pressure towards appearance, which can be put in action by family, peers, or even strangers (Thompson et al., 1999; Varnagiryte & Perminas, 2021). The fact that explicit comments about eating and body shape seem to be so common in South Korea coupled with the discomfort experienced by people on the receiving end of such commentary could put South Korean people at a higher risk of developing an eating disorder compared to other populations.

The pressure to conform to the thin beauty standard doesn't seem to be felt only through comments. Many participants cited clothing sizes as an important pressure they felt towards achieving a lean physique. During the interviews, it was mentioned that most Korean stores only sell one standard size of clothing, which is usually pretty small. For this reason, several people reported being worried of gaining weight because of the possibility of not fitting clothes anymore. The limited, if not nonexistent, size range offered by mainstream stores in South Korea could be considered an indirect pressure to conform to the thin beauty ideal, as it has been felt as a significant pressure towards a certain body shape by more than one participant in our study. Indeed, one size clothing could be a contributing factor towards the internalization of the thin ideal and even the development of disordered eating, as people reported altering their eating behavior in order to fit clothes. Unfortunately, no literature is currently available on the topic, but this phenomenon could definitely represent a culturally specific risk factor for EDs in the South Korean population.

An interesting outcome of our analysis concerned the notion of health for Korean people. Multiple studies seem to have found that, while Western countries such as the US make a distinction between the instrumental and ornamental qualities of the body, Koreans seem to focus only on ornamentality when considering different physiques. For instance, when talking about muscles, it was noticed that Koreans did not seem

concerned about separating the muscles of an athlete from the muscles of an actor, caring only about how the muscle looked and not about their purpose. On the contrary, Americans made clear distinctions between the muscular physique of athletes and those of actors and bodybuilders. A similar phenomenon was reported when investigating how fatness is viewed by the same two cohorts. Americans consider fat people as more likely to get diseases and connect fatness to health. Koreans, on the other hand, only seem to care about the look of being overweight, encapsulating fatness in an overall undesirable appearance (Monocello, 2019; Monocello & Dressler, 2020; Monocello et al., 2024). This notion was not reflected in our results. The Korean people we interviewed associated both eating behavior and body shape to physical health in a significant way. Many participants reported altering their diet for health purposes, and not with the objective of modifying their body shape or to get thinner. A predominant good food/bad food dichotomy was also observed, with many participants explicitly or implicitly labeling certain foods such as dessert as “bad” and other foods, such as vegetables as “good”. Healthism was also reflected in the way participants talked about body shape. A considerable number of participants consistently associated body shape and weight to health status. Some even went as far as mentioning how being overweight can lead to different diseases such as diabetes. Thus, according to our analysis it seems that outcomes of studies that found a significant distinction between Korea’s and America’s notions of appearance and health might not be as accurate as previously thought. This outcome was also mirrored in the topic of instrumentality and ornamentality. From what was gathered from the interviews it seemed that Korean participants were clearly able to differentiate instrumental and ornamental qualities of the body; several of them showed particular interest for the instrumental qualities of their body in addition to the ornamental ones. Many participants talked about their desire to gain muscle in order to become strong or getting a more functional body. Some even mentioned achieving a better health status as an objective that kept them motivated to modify their weight and stay consistent with dieting and going to the gym. From our results it looks like Korea is heading towards a more Western concept of body shape and eating, but further research is definitely needed to better explore this topic. The influence of the West could also be the driving force behind the sudden interest that South Korea has shown for muscular body types in the past few years.

Existing literature highlights how in Korean society the beauty standard has consistently been represented by thin bodies for women and small muscles for men (Monocello, 2019; Monocello, 2022; Monocello & Dressler, 2020; S. Han et al., 2018; S. Y. Kim et al., 2014). However, several participants confirmed a shift in the trend. Muscular physiques seem to have become a new ideal for South Korean men and women alike. Many participants declared that they were going to the gym and following meal plans specifically to increase their lean mass and gain muscle. One even expressed relief about finally having more options to choose from to conform to the beauty ideal. This shift in the beauty standard should definitely be confirmed by further investigations, but it could represent an interesting factor to consider when studying the risk of developing disordered eating for the South Korean population, which should not be overlooked.

All the people interviewed displayed, according to their statements, high levels of control over their food intake and their body shape. Almost all of them reported following some sort of diet at one point in their lives, and some even admitted to following extreme, hyper restrictive diets in the past. Even when talking about the present, most of the participants recounted taking note and controlling their caloric intake, their food intake, or their macros. Some spoke about intending to eat a certain amount of protein in a day, some indicated the exact number of calories they aimed to eat everyday, while others reported dieting in general. From many of the interviews it also emerged that many participants engaged in frequent compensatory behaviors, such as skipping meals, exercising more, or eating less the day after a big meal. From all the interviews a strong narrative of control over energy intake, both with restriction and compensatory behaviors, emerged. Restriction over energy intake, compensatory behaviors, and high control over eating and body shape are all phenomena characteristic of eating disorder symptomatology (APA, 2013; Treasure et al., 2020; Yamamiya et al., 2022). All of the participants reported engaging in these kinds of behavior almost as if it was something common, that everyone does. It is surprising that every single person that was interviewed displayed behaviors that are consistent with ED symptoms. This could mean that some behaviors that in the West are known to be dangerous are viewed as normal in South Korean society, which could represent a significant risk factor for people living in the country that needs to be explored further.

Seeing that many participants showed a strong tendency to control or restrict their eating and to try to control their body shape and weight, it was expected that many would also express emotional distress or negative feelings concerning their body or their eating behavior. Rather, even when asked explicitly about their feelings and emotional responses, from the answers given by most participants, it almost seemed like the emotional sphere was ignored. Even when reporting being dissatisfied with their current eating habits, body shape, or weight, most participants denied being worried or having any negative emotions about them. Instead, most of the people interviewed asserted that they were motivated to change their situation, that they needed to make changes, or that the discrepancy between their reality and their wishes about their eating and their body didn't affect them that much.

According to existing literature, it seems that mental health is not taken into account by Korean people for the most part, as research showed that people in the country seemed to not be aware of their own troubles with psychological well-being. Moreover, according to some studies, it also looks like the majority of people who fit the criteria for the diagnosis of a mental disorder rarely seek treatment and are not well informed on services that could be of help (J. Choi, 2023). It could be that lower attention towards the emotional sphere, suppressing emotion, and not talking about feelings (particularly when it comes to negative emotions) may be the result of cultural and societal influences. This can be retraced back to the Confucian and collectivistic ideals that have guided Korean society for centuries. According to the Confucian doctrine, maintaining social harmony is the most important objective for anyone taking part in a society. For people in collectivistic societies, the expression of emotions should be controlled and adjusted based on the social context, and suppressing emotions to maintain relationships or avoid conflicting situations is common. This is because emotions are viewed as an interpersonal and not only intrapersonal matter. In the Korean language, for instance, there are even two particular terms that describe how a person adjusts their emotions based on the social context. *Nun-chi* refers to the ability to correctly read other people, adjusting behavior and emotional expression to the social context. *Che-myon*, which concerns the ability to keep a good face, or social face, within the group, concerns the ability to align one's behavior to the values of the group, thus maintaining one's dignity and avoiding shame (G. Park et al., 2022; Robertson, 2019; S. Choi & Lee, 2002).

Previous literature has proposed that Koreans may indeed be less willing to freely express their emotions, because they fear that negative social consequences may arise from that action. This hypothesis was reinforced by many of the participants' behaviors. They seemed to shy away from talking about emotions and negative feelings. The belief that expressing negative emotions is unacceptable and the suppression of emotions have been linked to many disorders and have been proposed to be risk factors for the development of eating disorders in many studies (G. Park et al., 2022). The tendency displayed by many participants to avoid talking about emotions could indicate a broader cultural phenomenon, which needs to be explored further to understand how certain cultural characteristics may shape ED presentation in South Korea.

The influence of the media on the development of eating disorders has been confirmed by multiple studies (Izydorczyk et al., 2021; Kakar et al., 2023; Krug et al., 2020; Roberts et al., 2022; Thompson et al., 1999). Thus, it was not surprising that many participants mentioned that the strongest pressure they felt towards having a thin physique or modifying their body shape and eating behavior came from watching TV and seeing thin celebrities. Many studies have proposed that social media could have the same effect as traditional media on variables such as thin ideal internalization or body dissatisfaction and contribute to the development of eating disorders in the same way (Krug et al., 2020; Roberts et al., 2022). What emerged through the interviews we conducted though, was somewhat conflicting with previous results. Many participants expressed how social media represented a positive influence for them as, compared to traditional media, it also contained content about body positivity, self-acceptance, and the realities of photoshopped bodies in media. It seems that many shared the opinion that social media helped them, in some ways, make steps towards self acceptance. Social media was also mentioned as a valuable source of information and motivation on a healthier lifestyle, with a focus on instrumentality and physical health in place of appearance. This seemingly protective influence of social media on the people interviewed could be due to the fact that, through the internet, they were exposed to some more modern views on eating and body image that Korean traditional media still lacks, such as the body positivity movement. Nonetheless, the positive role of social media could represent a noteworthy protective factor when it comes to the emergence of

body dissatisfaction or the thin beauty ideal that is usually perpetuated by the media in Korean society. Therefore, it is a phenomenon that needs to be delved into more deeply by upcoming studies.

In conclusion, this study has been able to describe how people who have lived immersed in Korean culture since birth experience their eating, their body shape and their weight, and has led to the discovery of some surprising themes and narratives about how Korean society and Korean culture may influence the relationship that people who live in the country have with their eating and body image.

The findings of this study are preliminary results obtained through qualitative research and as such, they do not claim to be generalizable to the entire Korean population. Nonetheless, they do raise some intricate questions about Korean culture and its possible impact on ED etiology. Many of this study's results could represent interesting starting points for future research on how culture relates to ED presentation, development and symptomatology, a relationship that has been ignored by the scientific community for a long time.

5.2 Strengths and Limitations

This study has some limitations. In the first place, the sample of participants used was quite small, as we were able to interview 10 South Korean people in total. This directly translates to the fact that the outcomes of the data analysis are not generalizable to the entire population. The narratives and themes that emerged from the interviews describe solely the experiences of the people interviewed. Indeed, while they could give some interesting hints on topics that deserve more attention regarding how eating and body image are experienced in South Korea, they cannot claim to represent how the majority of people in South Korea think and feel. The data obtained through the interview process were analyzed using thematic analysis, which is a qualitative method. The strength of this method is that the experience of the people interviewed was given priority, and narratives that could have been overlooked using quantitative methods had a chance to come to light. In addition, using thematic analysis, we were able to gain a deeper insight into how body image issues and eating behavior are conceptualized in

South Korea. However, the qualitative methods used restricted the sample size and limited the generalizability of our results.

The second limitation of this study lies in the fact that the majority of the interviews were conducted in English, and one in Italian, neither of which were participant's native languages. Some participants admitted to feeling uneasy speaking in English and reported some difficulties in fully expressing themselves in a language they were not confident speaking. This could have limited the length and content of their statements, and prevented them from fully articulating their opinions and feelings when answering the interview questions. Furthermore, the language barrier prevented the researcher from contacting a more diverse sample of people and may have kept away a large group of people that could've had different characteristics from our final sample.

Another limitation that could be pointed out is the fact that the interviewer knew almost all of the participants to some extent prior to the interview process. This factor could have impacted some of the answers that were given, that could have been influenced the previously existing relationship with the interviewer.

5.3 Future Perspectives

Research on cultural variations in eating disorder presentation, development, and etiology is still taking its first steps; some cross cultural studies have been conducted, but the majority of attention is still given to Western populations (Burke et al., 2021; Jung et al., 2009; Kakar et al., 2023). The present study could represent an important cornerstone for cross-cultural research on eating disorders, as it highlights some important thematic that could be of interest for future research.

Upcoming studies should focus on expanding some of the outcomes of this study by using quantitative methods and larger samples, in order to produce more generalizable results.

For instance, researchers could include the use of questionnaires in order to assess eating behavior, eating disorder symptoms, body image, body appreciation, and other connected variables in a larger sample of the South Korean population.

Moreover, later research could be done by proposing interviews and questionnaire that have been validated in the Korean language for the Korean population, as the language

barrier proved to be a significant limitation both in the recruitment process and in the interview process for this study.

Researchers could also focus on comparing Korean cohorts to Western cohorts, in order to examine differences and similarities in eating behavior, body image, and related variables in such culturally different populations.

Studies could even include other East-Asian populations as, while East Asian countries have been often grouped together due to their history, they are also quite distinct and deserving of individual attention (Shim et al., 2008). For this reason, it could be interesting to examine how cultural similarities and cultural differences of East Asian countries correlate with ED presentation and development.

The data we have so far also points out the need for longitudinal studies in order to investigate the existence of culturally determined pathophysiological pathways towards the development of eating disorders.

Based on the narratives that emerged from this study, some interesting topics for future research were also identified. The extreme importance placed on appearance by South Korean people, that brought some of the participants to state that Koreans care more about appearance than other countries, should be further explored, as it has been shown that sociocultural pressures towards appearance represent a significant risk factors for the development of eating disorders (Kakar et al., 2023; Thompson et al., 1999).

Furthermore, future investigations should focus on young adults and unemployed people, as it has been stated that it is common for people in South Korea to diet in preparation for job interviews, because a thin figure is viewed as almost a requirement towards employment.

During the course of the interviews, two specific pressures towards fitting the thin beauty standard were identified: frequent explicit comments about eating behavior and body shape, and one-size clothing. Upcoming studies should focus on how these two peculiar pressures affect ED symptomatology in South Korean samples, as they could represent specific risk factors for the South Korean population.

Another interesting preliminary result of the present study that definitely deserves to be further explored is the rise of the muscularity beauty ideal as a new alternative to the thin beauty ideal that was prevalent in South Korean society. Many participants expressed relief over having a new beauty standard that they could emulate instead of

only a thin physique, but the effect of this new appearance ideal on eating behavior and ED symptomatology is still unknown.

An interesting topic that was raised during the analysis of the interviews concerns the fact that restriction and elevated levels of control over food intake and body shape and weight seemed to be not only extremely normalized, but also not associated with significant emotional distress.

From the participant's answers it almost looked like exerting great control over food intake and restricting energy intake through dieting were quite common, as they were described as typical and normal behaviors by most of the participants. One hypothesis could be that Korea has a prevalent "diet culture" that brings people to view dieting and controlling food intake as something that everyone does or should do, but this has still to be explored. Future studies should investigate the prevalence of restrictive eating behavior and eating disorder symptomatology in South Korea compared to other countries.

Studies should also analyze emotional distress connected to restrictive eating behavior and exerting high levels of control over body shape/weight, as participants of this study seemed to exhibit a poignant lack of distress connected to their behavior. As previously said, this could be due to the fact that expressing negative emotions is generally frowned upon in South Korean culture, but further research is definitely needed on this topic. Moreover, as the suppression of emotions has been consistently linked to ED development, future studies should focus on how this factor could influence ED symptomatology in the Korean population compared to other countries. Indeed, according to previous literature and our results, there is a possibility that Korean people might be more inclined to suppress their emotions compared to people from Western countries (G. Park et al., 2022; Robertson, 2019; S. Choi & Lee, 2002). This could influence ED development, but this hypothesis has yet to be explored.

Finally, social media has so far been considered as influential as traditional media in pressuring people towards the thin beauty ideal but, from the interviews, it emerged that many participants considered social media a positive influence compared to traditional media (Krug et al., 2020; Roberts et al., 2022). They stated that while traditional media, such as television, often made them want to obtain a thin, unrealistic, figure, social

media positively influenced them to think about their health and about how real, non photoshopped, bodies look like.

From these affirmations, it seems that for the South Korean people social media represent almost a protective influence over the development of disordered eating behavior, but this phenomenon certainly needs to be explored further by future research.

5.4 Potential Impact

This study was able to explore and shed light on a number of cultural issues specific to South Korea, which could make a significant difference in our understanding of how influences from Korean culture might shape the presentation and development of eating disorders. All of the themes that emerged during the current study are not generalizable to the entire Korean population, and due to the nature of our research, are somewhat speculative in terms of the correlational and causal relationships that were hypothesized. Nonetheless, our findings could represent a significant first step for cross-cultural research and more specifically, for the study of eating disorders in South Korea. From our results, several insights into South Korean's people eating behavior and body image issues were found, all of which could inspire future research to investigate more deeply how certain factors identified in this study influence the development and maintenance of ED symptomatology in the South Korean population. Thus, specific, culturally defined, risk factors for the development of eating disorders could be discovered, all of which could help identify populations that are at higher risk for the development of ED symptomatology. In addition to this, such findings could help implement better and more effective prevention and treatment practices for EDs in South Korea and for minorities worldwide (Agüera et al., 2017; Bhattacharya et al., 2020; Jackson et al., 2006; Kakar et al., 2023; Schaefer et al., 2018).

Furthermore, this study could contribute to raising awareness about how important considering culture and ethnicity is when taking on patients from a different cultures. Clinicians who know how cultural differences influence ED symptoms could develop more personalized treatments that take into account the cultural heritage of the patient and the social climate in which they spent most of their life.

Lastly, as previously mentioned, it seems that South Korea falls behind when it comes to spreading awareness about the importance of taking care of one's mental health, and about resources that people suffering from mental illnesses could use. This has been confirmed by multiple studies, in which it was shown that many people overlook their psychological problems and do not seek treatment for their mental health issues (J. Choi, 2023). Moreover, during the course of our interviews, it became apparent that many behaviors that are commonly considered dangerous or signs of ED symptomatology in the West, were overlooked or considered common by the participants. This could be due to the fact that South Korean people seem to be unaware about what most mental disorders entail, and how dangerous they are. This study could represent an important wake up call for mental health professionals in South Korea, as it could encourage them to spread awareness about how dangerous Eating Disorders can be.

Lastly, stigma surrounding psychiatric and psychological disorders also seems to represent a significant barrier to accessing mental health services in South Korea. Structural discrimination and public prejudice were identified as two of the main factors that prevented people from seeking help for their conditions (Seo et al., 2022). Hopefully, this study could contribute to spread awareness about mental health issues in the country and as such encourage institutions to put in place initiatives to reduce the stigma surrounding mental illnesses in the country.

5.5 Conclusions

The aim of this study was to explore how South Korean people think and feel about their eating behavior, their body image, and their culture. During this investigation, many insightful narratives and themes emerged, which helped better our understanding of how living in Korea has shaped our participant's views about their eating and their appearance. Several cultural characteristics specific to South Korea that could represent important influences on ED presentation and development in the Korean population were identified, all of which should be considered by future research.

All in all, this study helped gain deeper insights into how eating, body image, body dissatisfaction, and other ED related phenomena are perceived and experienced by

South Korean people, which could represent a powerful cornerstone for future cross-cultural research on eating disorders.

APPENDIX

Structured Interview

Many thanks for your time today. The reason why we have invited you to take part in this study is because we would like to understand more about the influence that culture and ethnicity might have on the way in which individuals perceive themselves, their eating, their body.

If it is OK with you, I will ask you some general questions about your identity, eating preferences and the way in which you perceive yourself, including your body image. If you find that a specific question makes you feel uncomfortable, please let me know and we can skip it. If you need any clarification during the interview, also please let me know.

Feel free to answer my questions providing as many details as you wish to.

The interview will be video recorded but the correspondence between what you will say and your identity will only be known to the researchers involved in this study and will not be disclosed to anyone outside the research team.

Before we start, do you have any questions?

- 1) What gender do you identify with and how comfortable do you feel with it?
 - a. Have you always felt this way?
 - b. How would you describe your experience with your gender/sexual orientation?

- 2) What is your nationality?
 - a. Where were you born?
 - b. Where do you live now?
 - c. have you always lived in.....? or have you moved at all?
 - d. How strongly do you identify with your culture?
 - e. How close do you feel your family is to your culture of origin?

- 3) How do you feel about your eating behavior? Which thoughts do you have about it?

- a. How do you feel about what you eat/your daily choices?
- b. To what extent are you satisfied with the quantity and type of food that you eat on a daily basis?
- c. Have you ever made intentional changes to your eating behavior? (ex. calorie deficit, going on a diet in general, counting macros, eliminating carbs....). If yes, how did it go?
- d. To what extent do you worry about what you'll eat in a day?
- e. What kinds of preoccupations do you have (if any)? (for example how many calories you'll ingest during the day/how much you'll enjoy a food you like later or how many proteins you still need to consume or leftovers in the fridge, or a slice of cake that's left over that you want to eat but deny yourself)?

4) (A) Do you think your culture has impacted on how you feel and think about food and eating?

- a. if yes, how?

(B) Do you think your culture has impacted your behavior regarding food and eating?

- a. if yes, how?
- b. Have you ever felt any pressure to change your eating behavior?
- c. If so, to what extent?
- d. If so, from who (for example: family, friends, boyfriend/girlfriend, media, advertisements)?
- e. How/in what ways/could you describe an instance?
- f. How do you feel your behavior would be different if you didn't have any external pressure to behave in a certain way towards eating?

5) How does your relationship with food impact your wellbeing?

- a. Have your eating habits ever made you feel anxious?
- b. If so, how, and to what extent?
- c. Has your eating behavior ever made you feel sad or depressed?

- d. If so, how and to what extent?
- e. Have you ever felt sick because of your eating behavior? If yes, in what ways (you ate too much too little)?
- f. In what ways has your behavior regarding food and eating impacted your social life, if it has done so?
- g. In what ways have your thoughts and feelings regarding food and eating impacted your daily activities, if they have done so?
- h. In what ways has your behavior regarding food and eating impacted your daily activities, if it has done so?

6) How do you feel about your body (when you look in the mirror or at photos of yourself)?

- a. How much time do you spend thinking about your body shape and weight?
- b. In what way? (do you worry, do you spend time checking things to change etc.)
- c. To what extent do you monitor your weight and body shape, if you do so?
- d. Are you comfortable in your body or is there anything you would like to change?
- e. If yes, how and to what extent would you like to do so?
- f. What would the ideal body be for you?
- g. Would having your ideal body make you feel better about yourself/more comfortable or make your life easier in any way?
- h. Have you ever taken any measures to change your body shape or weight (ex. diet, exercising more, drinking protein shakes etc.) in order to be happier with them?
- i. If so, how did you go about it?
- j. How did it make you feel?

7) How do you think the culture you have been surrounded by, might have had an impact on how you feel and think about your body shape and weight?

- a. Have you ever felt any pressure to change your body shape and weight?
- b. To what extent?

- c. If so, from who (for example: family, friends, boyfriend/girlfriend, media, advertisements)?
- d. How/in what ways?
- e. Could you describe any instance where you have felt bad because you were discriminated because of your body shape/weight?
- f. How do you feel your satisfaction with your body and weight would be different if you did not have any external pressure to look a certain way?
- g. How much do you worry about others looking at your body?
- h. If others did not exist, how would you feel about your body shape and weight? Would anything change?

8) How does your relationship with your body impact your wellbeing?

- a. Has the way you feel about your body shape/weight ever made you feel anxious?
- b. If so, how, and to what extent?
- c. Has your body image ever made you feel sad or depressed?
- d. If so, how and to what extent?
- e. In what ways have your feelings about your body impacted your social life, if it has done so (for example you did not go to the beach with friends because you didn't want them to see your body in a bathing suit)?
- f. Has the way you feel about your body ever impacted your romantic relationships? If so, in what way?
- g. Has the way you feel about your body ever impacted your future (work) opportunities or daily activities?

9) How do you think your use of social media and the content you see on there has influenced your views on your body shape, weight, and eating?

- a. To what extent do you compare yourself/and or what you eat with the people on social media?
- b. How does that make you feel?

- c. If you have ever seen content aimed towards weight loss or body modification (ex. muscle gain, body recomposition, fat loss etc.), how has it impacted you?
- d. If you have ever seen content aimed towards body positivity, how has it impacted you?

10) How do you think your use of social media and the content you see on there has influenced your behaviors and worries regarding food?

- a. Have you ever been influenced to change your eating behavior because of something you saw on social media (for example start a new diet, eliminate a food group, go into a calorie deficit etc.)?
- b. If yes, how was it?
- c. If you have ever seen content aimed towards food and eating trends or recipes (for example macro friendly cooking, food alternatives, wellness eating, fad diets etc.), how has it impacted you regarding your feelings about food and eating?

Is there anything else that you would like to add?

REFERENCES

Agüera, Z., Brewin, N., Chen, J., Granero, R., Kang, Q., Fernandez-Aranda, F., & Arcelus, J. (2017). Eating symptomatology and general psychopathology in patients with anorexia nervosa from China, UK and Spain: A cross-cultural study examining the role of social attitudes. *PLoS ONE*, *12*(3), e0173781. <https://doi.org/10.1371/journal.pone.0173781>

American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.).

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). <https://doi.org/10.1176/appi.books.9780890425596>

Anderson-Fye, E. (2017). Cultural influences on body image and eating disorders. In *Oxford University Press eBooks*. <https://doi.org/10.1093/oxfordhb/9780190620998.013.9>

Barakat, S., McLean, S. A., Bryant, E., Le, A., Marks, P., Aouad, P., Barakat, S., Boakes, R., Brennan, L., Bryant, E., Byrne, S., Caldwell, B., Calvert, S., Carroll, B., Castle, D., Caterson, I., Chelius, B., Chiem, L., Clarke, S., . . . Maguire, S. (2023). Risk factors for eating disorders: findings from a rapid review. *Journal of Eating Disorders*, *11*(1). <https://doi.org/10.1186/s40337-022-00717-4>

Bhattacharya, A., DeFilipp, L., & Timko, C. A. (2020). Feeding and eating disorders. *Handbook of Clinical Neurology*, 387–403. <https://doi.org/10.1016/b978-0-444-64123-6.00026-6>

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>

Braun, V., & Clarke, V. (2012). Thematic analysis. In *American Psychological Association eBooks* (pp. 57–71). <https://doi.org/10.1037/13620-004>

Burke, N. L., Schaefer, L. M., Karvay, Y. G., Bardone-Cone, A. M., Frederick, D. A., Schaumberg, K., Klump, K. L., Anderson, D. A., & Thompson, J. K. (2021). Does the tripartite influence model of body image and eating pathology function similarly across racial/ethnic groups of White, Black, Latina, and Asian women? *Eating Behaviors*, *42*, 101519. <https://doi.org/10.1016/j.eatbeh.2021.101519>

Carey, M., Kupeli, N., Knight, R., Troop, N. A., Jenkinson, P. M., & Preston, C. (2019). Eating Disorder Examination Questionnaire (EDE-Q): Norms and psychometric properties in U.K. females and males. *Psychological Assessment*, *31*(7), 839–850. <https://doi.org/10.1037/pas0000703>

Chen, J., Liu, K., Zhang, J., Liu, S., Wang, Y., Cao, R., Peng, X., Han, M., Han, H., Yao, R., & Fu, L. (2023). Parental Pressure on Child Body Image, BMI, Body Image Dissatisfaction Associated with Eating Disorders in School-Age Children in China: A Path Analysis. *Psychology Research and Behavior Management*, *Volume 16*, 3247–3258. <https://doi.org/10.2147/prbm.s418535>

Cho, N. J. (2009). Neoliberal governmentality at work: Post-IMF Korean society and the construction of Neoliberal women. *Korea Journal*, *49*(3), 15–43. <https://doi.org/10.25024/kj.2009.49.3.15>

Choi, J. (2023). Promoting mental health literacy at schools in South Korea. *Journal of Korean Academy of Child and Adolescent Psychiatry*, *34*(1), 15–20. <https://doi.org/10.5765/jkacap.220037>

Choi, S., & Lee, S. (2002). Two-Component model of Chemyon-Oriented behaviors in Korea. *Journal of Cross-Cultural Psychology*, *33*(3), 332–345. <https://doi.org/10.1177/0022022102033003008>

Davis, H. A., Smith, Z. R., & Smith, G. T. (2024). Longitudinal transactions between negative urgency and fasting predict binge eating. *Appetite*, *192*, 107113.

<https://doi.org/10.1016/j.appet.2023.107113>

Fairburn, C. G., & Beglin, S. J. (1994). Assessment of eating disorders: Interview or self-report questionnaire? *International Journal of Eating Disorders*, *16*(4), 363–370.

[https://doi.org/10.1002/1098-108x\(199412\)16:4](https://doi.org/10.1002/1098-108x(199412)16:4)

Fredrickson, B. L., & Roberts, T. (1997). Objectification Theory: toward understanding women's lived experiences and mental health risks. *Psychology of Women Quarterly*, *21*(2), 173–206. <https://doi.org/10.1111/j.1471-6402.1997.tb00108.x>

Girard, M., Chabrol, H., & Rodgers, R. F. (2017). Support for a modified tripartite dual pathway model of body image concerns and risky body change behaviors in French young men. *Sex Roles*, *78*(11–12), 799–809. <https://doi.org/10.1007/s11199-017-0850-z>

Han, M. (2003). Body image dissatisfaction and eating disturbance among Korean college female students: Relationships to media exposure, upward comparison, and perceived reality. *Communication Studies*, *54*(1), 65–78.

<https://doi.org/10.1080/10510970309363266>

Han, S., Brewis, A. A., & SturtzSreetharan, C. (2018). Employment and weight status: The extreme case of body concern in South Korea. *Economics & Human Biology*, *29*, 115–121. <https://doi.org/10.1016/j.ehb.2018.01.002>

He, J., & Barnhart, W. R. (2024). A Call for More Culture-Based Research to understand Body Dissatisfaction and Disordered Eating in Men: Commentary on Monocello et al. (2024). *International Journal of Eating Disorders*.

<https://doi.org/10.1002/eat.24249>

Hong, S., Bae, H. C., Kim, H. S., & Park, E. (2014). Variation in meal-skipping rates of Korean adolescents according to socio-economic status: Results of the Korea Youth

Risk Behavior Web-based Survey. *Journal of Preventive Medicine and Public Health*, 47(3), 158–168. <https://doi.org/10.3961/jpmph.2014.47.3.158>

Izydorczyk, B., Khanh, H. T. T., Lipowska, M., Sitnik-Warchulska, K., & Lizińczyk, S. (2021). Psychological risk factors for the development of restrictive and bulimic eating behaviors: A Polish and Vietnamese comparison. *Nutrients*, 13(3), 910. <https://doi.org/10.3390/nu13030910>

Izydorczyk, B., & Sitnik-Warchulska, K. (2018). Sociocultural appearance standards and risk factors for eating disorders in adolescents and women of various ages. *Frontiers in Psychology*, 9. <https://doi.org/10.3389/fpsyg.2018.00429>

Izydorczyk, B., Sitnik-Warchulska, K., Lizińczyk, S., & Lipowska, M. (2020). Socio-Cultural standards promoted by the mass media as predictors of restrictive and bulimic behavior. *Frontiers in Psychiatry*, 11. <https://doi.org/10.3389/fpsyg.2020.00506>

Izydorczyk, B., Sitnik-Warchulska, K., Wajda, Z., Lizińczyk, S., & Ściegienny, A. (2021). Bonding with parents, body image, and sociocultural attitudes toward appearance as predictors of eating disorders among young girls. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsyg.2021.590542>

Jackson, S. C., Keel, P. K., & Lee, Y. H. (2006). Trans-cultural comparison of disordered eating in Korean women. *International Journal of Eating Disorders*, 39(6), 498–502. <https://doi.org/10.1002/eat.20270>

Johnson, K. K. P., Kim, E., Lee, J. Y., & Kim, A. J. (2014). Identifying antecedents of risky appearance management behaviors. *Clothing and Textiles Research Journal*, 32(2), 107–123. <https://doi.org/10.1177/0887302x14522857>

Jung, J., & Lee, S. (2006). Cross-Cultural comparisons of appearance Self-Schema, body image, Self-Esteem, and dieting behavior between Korean and U.S. women.

Family and Consumer Sciences Research Journal, 34(4), 350–365.

<https://doi.org/10.1177/1077727x06286419>

Jung, J., Forbes, G. B., & Lee, Y. (2009). Body dissatisfaction and disordered eating among early adolescents from Korea and the US. *Sex Roles*, 61(1–2), 42–54.

<https://doi.org/10.1007/s11199-009-9609-5>

Kakar, V., Fardouly, J., Rapee, R. M., Guo, M., Arman, S., & Niazi, E. (2023).

Exploring the tripartite influence model of body image and disordered eating among adolescent girls living in Australia, China, India, and Iran. *Body Image*, 47, 101633.

<https://doi.org/10.1016/j.bodyim.2023.101633>

Kidd, C., Loxton, N. J., Uhlmann, L. R., Seeto, C., & Donovan, C. L. (2023). Thin Ideal Internalization Assessment (THIINA): development and psychometric validation of a new measure of female body image. *Body Image*, 46, 395–405.

<https://doi.org/10.1016/j.bodyim.2023.07.007>

Kim, H. J., Oh, S. Y., Choi, D., & Park, E. (2019). The Association between Eating-Out Rate and BMI in Korea. *International Journal of Environmental Research and Public Health*, 16(17), 3186. <https://doi.org/10.3390/ijerph16173186>

Kim, K. B. (2014). Narratives about the Media, Diet, and Body Image: A Cross-Cultural Comparison between Young Female Adults in the Midwestern United States and South Korea. *Journal of Intercultural Communication Research*, 43(4), 283–303.

<https://doi.org/10.1080/17475759.2014.952768>

Kim, S. (2018). Eating disorders, body dissatisfaction, and self-esteem among South Korean women. *Social Behavior and Personality an International Journal*, 46(9),

1537–1546. <https://doi.org/10.2224/sbp.6801>

Kim, S. Y., Seo, Y. S., & Baek, K. Y. (2014). Face consciousness among South Korean women: A culture-specific extension of objectification theory. *Journal of Counseling Psychology, 61*(1), 24–36. <https://doi.org/10.1037/a0034433>

Kim, T. (2003). Neo-Confucian body Techniques: Women's bodies in Korea's consumer society. *Body & Society, 9*(2), 97–113. <https://doi.org/10.1177/1357034x030092005>

Krug, I., Selvaraja, P., Fuller-Tyszkiewicz, M., Hughes, E. K., Slater, A., Griffiths, S., Yee, Z. W., Richardson, B., & Blake, K. (2020). The effects of fitspiration images on body attributes, mood and eating behaviors: An experimental Ecological Momentary Assessment study in females. *Body Image, 35*, 279–287.

<https://doi.org/10.1016/j.bodyim.2020.09.011>

Kwon, O. Y. (1998). The Korean financial crisis: Diagnosis, remedies and prospects. *Journal of the Asia Pacific Economy, 3*(3), 331–357.
<https://doi.org/10.1080/13547869808724656>

Lee, H., Lee, H. E., Choi, J., Kim, J. H., & Han, H. L. (2014). Social Media Use, Body Image, and Psychological Well-Being: A Cross-Cultural Comparison of Korea and the United States. *Journal of Health Communication, 19*(12), 1343–1358.

<https://doi.org/10.1080/10810730.2014.904022>

Lee, H., Son, I., Yoon, J., & Kim, S. (2017). Lookism hurts: appearance discrimination and self-rated health in South Korea. *International Journal for Equity in Health, 16*(1).
<https://doi.org/10.1186/s12939-017-0678-8>

McClelland, J., Robinson, L., Potterton, R., Mountford, V., & Schmidt, U. (2020). Symptom trajectories into eating disorders: A systematic review of longitudinal, nonclinical studies in children/adolescents. *European Psychiatry, 63*(1).

<https://doi.org/10.1192/j.eurpsy.2020.55>

Monocello, L. (2022). “Guys with Big Muscles Have Misplaced Priorities”: Masculinities and Muscularities in Young South Korean Men’s Body Image. *Culture Medicine and Psychiatry*, 47(2), 443–465. <https://doi.org/10.1007/s11013-022-09784-3>

Monocello, L. T. (2019). Cultural models of male body image, fat, and acceptable personhood among Euro-Americans and South Koreans. *Journal of Cultural Cognitive Science*, 4(1), 73–86. <https://doi.org/10.1007/s41809-019-00042-4>

Monocello, L. T., & Dressler, W. W. (2020). Flower boys and muscled men: comparing South Korean and American male body ideals using cultural domain analysis. *Anthropology and Medicine*, 27(2), 176–191. <https://doi.org/10.1080/13648470.2020.1742575>

Monocello, L. T., Lavender, J. M., Fowler, L. A., Fitzsimmons-Craft, E. E., & Wilfley, D. E. (2024). A cultural models approach to understanding body fatness perceptions and disordered eating in young South Korean men. *International Journal of Eating Disorders*. <https://doi.org/10.1002/eat.24200>

Park, G., Kim, J. H., & Lee, D. H. (2022). Validation of the South Korean Version of the Beliefs about Emotions Scale. *BMC Psychology*, 10(1). <https://doi.org/10.1186/s40359-021-00713-4>

Park, H., Shin, D., & Lee, K. W. (2023). Association of main meal frequency and skipping with metabolic syndrome in Korean adults: a cross-sectional study. *Nutrition Journal*, 22(1). <https://doi.org/10.1186/s12937-023-00852-x>

Park, S., Min, K., Chang, S., Kim, H., & Min, J. (2008). Job stress and depressive symptoms among Korean employees: the effects of culture on work. *International Archives of Occupational and Environmental Health*, 82(3), 397–405. <https://doi.org/10.1007/s00420-008-0347-8>

Park, S., Sung, E., Choi, Y., Ryu, S., Chang, Y., & Gittelsohn, J. (2017). Sociocultural factors influencing eating practices among office workers in urban South Korea.

Journal of Nutrition Education and Behavior, 49(6), 466-474.e1.

<https://doi.org/10.1016/j.jneb.2017.02.005>

Qian, J., Wu, Y., Liu, F., Zhu, Y., Jin, H., Zhang, H., Wan, Y., Li, C., & Yu, D. (2021).

An update on the prevalence of eating disorders in the general population: a systematic review and meta-analysis. *Eating and Weight Disorders - Studies on Anorexia Bulimia and Obesity*, 27(2), 415–428. <https://doi.org/10.1007/s40519-021-01162-z>

Roberts, S. R., Maheux, A. J., Hunt, R. A., Ladd, B. A., & Choukas-Bradley, S. (2022).

Incorporating social media and muscular ideal internalization into the tripartite influence model of body image: Towards a modern understanding of adolescent girls' body dissatisfaction. *Body Image*, 41, 239–247.

<https://doi.org/10.1016/j.bodyim.2022.03.002>

Robertson, S. (2019). Korean Nunchi and Well-Being. *Science Religion and Culture*,

6(1). <https://doi.org/10.17582/journal.src/2019.6.1.103.109>

Schaefer, L. M., Burke, N. L., Calogero, R. M., Menzel, J. E., Krawczyk, R., &

Thompson, J. K. (2018). Self-objectification, body shame, and disordered eating: Testing a core mediational model of objectification theory among White, Black, and

Hispanic women. *Body Image*, 24, 5–12. <https://doi.org/10.1016/j.bodyim.2017.10.005>

Schaefer, L. M., Burke, N. L., Thompson, J. K., Dedrick, R. F., Heinberg, L. J.,

Calogero, R. M., Bardone-Cone, A. M., Higgins, M. K., Frederick, D. A., Kelly, M., Anderson, D. A., Schaumberg, K., Nerini, A., Stefanile, C., Dittmar, H., Clark, E.,

Adams, Z., Macwana, S., Klump, K. L., . . . Swami, V. (2015). Development and validation of the Sociocultural Attitudes Towards Appearance Questionnaire-4 (SATAQ-4). *Psychological Assessment*, 27(1), 54–67. <https://doi.org/10.1037/a0037917>

Seo, H. Y., Song, G. Y., Ku, J. W., Park, H. Y., Myung, W., Kim, H. J., Baek, C. H., Lee, N., Sohn, J. H., Yoo, H. J., & Park, J. E. (2022). Perceived barriers to psychiatric help-seeking in South Korea by age groups: text mining analyses of social media big data. *BMC Psychiatry*, 22(1). <https://doi.org/10.1186/s12888-022-03969-1>

Shahnawaz, M. G., & Rehman, U. (2020). Social Networking Addiction scale. *Cogent Psychology*, 7(1). <https://doi.org/10.1080/23311908.2020.1832032>

Shim, T. Y., Kim, M., & Martin, J. N. (2008). *Changing Korea: Understanding Culture and Communication*. Peter Lang.

Shroff, H., & Thompson, J. K. (2006). The tripartite influence model of body image and eating disturbance: A replication with adolescent girls. *Body Image*, 3(1), 17–23. <https://doi.org/10.1016/j.bodyim.2005.10.004>

Silén, Y., & Keski-Rahkonen, A. (2022). Worldwide prevalence of DSM-5 eating disorders among young people. *Current Opinion in Psychiatry*, 35(6), 362–371. <https://doi.org/10.1097/ycp.0000000000000818>

Springmann, M., Svaldi, J., & Kiegelmann, M. (2020). Theoretical and methodological considerations for research on eating disorders and gender. *Frontiers in Psychology*, 11. <https://doi.org/10.3389/fpsyg.2020.586196>

Stice, E., Gau, J. M., Rohde, P., & Shaw, H. (2017). Risk factors that predict future onset of each DSM–5 eating disorder: Predictive specificity in high-risk adolescent females. *Journal of Abnormal Psychology*, 126(1), 38–51. <https://doi.org/10.1037/abn0000219>

Thompson, J. K., Heinberg, L. J., Altabe, M., & Tantleff-Dunn, S. (1999). *Exacting beauty: Theory, assessment, and treatment of body image disturbance*. American Psychological Association. <https://doi.org/10.1037/10312-000>

- Treasure, J., Duarte, T. A., & Schmidt, U. (2020). Eating disorders. *The Lancet*, 395(10227), 899–911. [https://doi.org/10.1016/s0140-6736\(20\)30059-3](https://doi.org/10.1016/s0140-6736(20)30059-3)
- Udo, T., & Grilo, C. M. (2018). Prevalence and correlates of DSM-5–Defined Eating Disorders in a nationally representative sample of U.S. adults. *Biological Psychiatry*, 84(5), 345–354. <https://doi.org/10.1016/j.biopsych.2018.03.014>
- Van Den Berg, P., Thompson, J., Obremski-Brandon, K., & Covert, M. (2002). The tripartite influence model of body image and eating disturbance a covariance structure modeling investigation testing the mediational role of appearance comparison. *Journal of Psychosomatic Research*, 53(5), 1007–1020. [https://doi.org/10.1016/s0022-3999\(02\)00499-3](https://doi.org/10.1016/s0022-3999(02)00499-3)
- Van Eeden, A. E., Van Hoeken, D., & Hoek, H. W. (2021). Incidence, prevalence and mortality of anorexia nervosa and bulimia nervosa. *Current Opinion in Psychiatry*, 34(6), 515–524. <https://doi.org/10.1097/ycp.0000000000000739>
- Varnagirytė, E., & Perminas, A. (2021). The impact of appearance comments by parents, peers and romantic partners on eating behaviour in a sample of young women. *Health Psychology Report*, 10(2), 93–102. <https://doi.org/10.5114/hpr.2021.111294>
- White, H. J., Sharpe, H., & Plateau, C. R. (2023). Family body culture, disordered eating and mental health among young adult females during COVID-19. *Eating Behaviors*, 51, 101792. <https://doi.org/10.1016/j.eatbeh.2023.101792>
- Yamamiya, Y., Desjardins, C. D., & Stice, E. (2022). Sequencing of symptom emergence in anorexia nervosa, bulimia nervosa, binge eating disorder, and purging disorder in adolescent girls and relations of prodromal symptoms to future onset of these eating disorders. *Psychological Medicine*, 53(10), 4657–4665. <https://doi.org/10.1017/s0033291722001568>

You, S., Shin, K., & Kim, E. K. (2017). The effects of sociocultural pressures and exercise frequency on the body esteem of adolescent girls in Korea. *Journal of Child and Family Studies*, 27(1), 26–33. <https://doi.org/10.1007/s10826-017-0866-6>