ORIGINAL ARTICLE





The clash of culture and cuisine: A qualitative exploration of cultural tensions and attitudes toward food and body in Chinese young adult women

Stephanie Ng MA¹ | Yining Liu MS² | Sarah Gaither PhD¹ | Nancy Zucker PhD^{1,3} | Samuel Marsan MA¹

Correspondence

Stephanie Ng, Department of Clinical and Counseling Psychology, Teachers College, Columbia University, 525 W 120th Street, New York, NY 10027, USA. Email: sn2854@tc.columbia.edu

Action Editor: Jennifer Thomas

Abstract

Objective: Accumulating evidence suggests that the prevalence of eating disorders among Chinese women is a public health concern. Prior studies have drawn linkages between conflicting cultural values, identity confusion, and eating disorder symptomatology, which may be relevant for understanding the rise of eating disorders amidst China's rapid economic and sociocultural transformation. Here, we explore how women's experiences with traditional eating norms and modernizing norms of femininity may shape their food and body attitudes. **Method:** Chinese young adult women (N = 34; aged 18-22 years) participated in semi-structured interviews focusing on experiences with norms surrounding eating and ideal feminine appearance, perceived conflict between these norms, and their responses to perceived conflict. Interviews were conducted via email (n = 27) or via Skype (n = 7). Participants were not asked about past or present diagnoses of eating disorders. Analysis of responses was guided by the principles of thematic analysis. **Results:** Women reported encounters with cultural eating norms and feminine appear-

ance norms, and described factors that motivated continued or discontinued adherence to these norms. Women reported strategies of conflict resolution, which resulted in different emotional and behavioral outcomes including eating disorder symptoms.

Discussion: Women's experiences with norms surrounding eating and appearance indicate the centrality of these encounters in the formation of individual and interpersonal values. Our findings suggest the importance for clinicians to assist clients in exploring the meanings behind internalized attitudes toward food and body, and to help clients balance interpersonal and individual needs.

KEYWORDS

body dissatisfaction, body image, Chinese, cognitive dissonance, cultural expectations, disordered eating, eating disorders, qualitative, young adult women

1 | INTRODUCTION

The prevalence of eating disorders among Chinese women is a growing public health concern (Pike & Dunne, 2015). Reported estimates

of eating disorder prevalence have burgeoned from 0.46% in 1993 (Lee, 1993) to 17% in 2009 (Yi, Han, & Wenjun, 2009). While epidemiological studies of eating disorders in Chinese samples remain limited, existing evidence documents that prevalence in Chinese communities

Stephanie Ng is now at the Department of Clinical and Counseling Psychology, Teachers College, Columbia University but conducted this research while at Duke University.

¹Department of Psychology and Neuroscience, Duke University, Durham, North Carolina

²Department of Biomedical Engineering, Pratt School of Engineering, Duke University, Durham. North Carolina

³Department of Psychiatry and Behavioral Sciences, Duke University School of Medicine, Duke University, Durham, North Carolina

either equals or exceeds those reported in Western societies such as in the United States. In fact, a large-scale study by Tong et al. (2014) amongst a sample of 8,444 female university students in Wuhan reported point prevalence estimates of 1.05% for anorexia nervosa (AN), 2.98% for bulimia nervosa (BN), and 3.53% for binge-eating disorder (BED), which are remarkably similar to those reported in a study of 4,746 American high-school students by Ackard, Fulkerson, and Neumark-Sztainer (2007), where the prevalence of AN, BN, and BED were 0.04, 0.3, and 1.9%, respectively.

Notably, these trends have been evidenced in both urban and rural samples in China. While an earlier study found that students in Hong Kong scored higher on measures of eating pathology and body dissatisfaction compared to the less urbanized regions of Shenzhen and Hunan (Lee & Lee, 2000), recent work shows disordered eating prevalence of 30.5% amongst female adolescents in Dongfanghong, a rural region of China (Feng & Abebe, 2017). Thus, the proliferation of such disturbances indicates the possible role of culturally specific vulnerabilities to developing eating pathology that warrant increased exploration among women in China. Here, we address this gap by exploring how tensions between cultural values may influence the food and body attitudes of Chinese young adult women.

1.1 | Eating and body-image disturbances during adolescence

Rapid changes in both physical and psychological states during adolescence are associated with increased risks of the onset of disordered eating and body attitudes. Not only are individuals at this developmental stage experiencing noticeable changes in physical appearance (Tanner, 1981), they are also becoming increasingly concerned with how *others* are perceiving these changes. Thus, adolescents in both Western and nonWestern regions may be more likely to respond to unrealistic norms of physical attractiveness with body dissatisfaction and disordered eating behaviors (Jung & Forbes, 2007; Omori, Yamazaki, Aizawa, & de Zoysa, 2017; Xu et al., 2010).

1.2 | Challenges in value formation processes of Chinese young adult women

This increased body awareness may be particularly pronounced for adolescents growing up in Chinese cultures where collectivistic values are emphasized (Ma, 2005). For instance, the act of eating is intricately linked to the formation and maintenance of interpersonal relationships, and mealtimes are considered essential sites of family bonding (Getz, 2014). Moreover, traditional ethical principles of filial piety present the body as a "gift" from one's parents (Xiao Jing, 1960), meaning that food refusal could be interpreted as a direct expression of disrespect toward one's elders. Thus, relinquishing control over food and body (e.g., not refusing food cooked by family members) may represent the profile of an ideal, obedient child.

However, China's rapid economic growth has resulted in notable value shifts, particularly for women (Jung, 2018). Physical beauty ideals have long been considered integral to Chinese conceptions of feminine identity (Xu & Feiner, 2007) and social acceptance (Jung, 2018), but may also symbolize autonomy, particularly financial autonomy. Research suggests that the open-door policy enacted in 1978 (Chin, 1996) which led to increased exposure to Western ideals of individualism and consumerism, as well as increased financial opportunities accorded to women, may have resulted in manipulations of physical appearance taking on new meaning as assertions of independence (Lee, 1999). Combined, these findings suggest that there may be a potential conflict between cultural meanings of food (i.e., eating as a way of showing respect to elders) and societal representations of physical appearance (i.e., appearance manipulation to assert autonomy and achieve social acceptance).

1.3 | Cultural tensions and disordered eating

Past work supports the idea that cultural values, identity confusion, and eating disorder symptomatology may be linked. In fact, significant correlations between disordered eating behaviors and Asian values such as gaining familial recognition through achievement (Tsong & Smart, 2015) and conformity to norms (Han, 2020), in addition to difficulties in integrating multiple cultural identities, represent prominent risk factors for disordered eating (Brady et al., 2017). These studies imply that it is crucial to explore how these cultural tensions may influence the food and body attitudes of Chinese young adult women.

Here, we used semi-structured interviews to explore the following: (a) How do Chinese young adult women experience eating norms and norms of ideal feminine appearance? (b) What factors lead to a sense of pressure to adhere to either set of expectations? (c) If these expectations are perceived to be conflicting, how do these women navigate their sense of conflict?

2 | METHOD

2.1 | Participants

Chinese women (N=34; age range 18–22 years; $M_{Age}=20.7$, SD=1.06) were recruited through advertisements in Chinese and English on social media platforms, describing the study as an exploration of Chinese women's responses to cultural expectations about food and body image, and did not mention eating disorders or disordered eating. To be eligible, women were required to be between the ages 18 and 22 years, to identify as female, and to have parents of Chinese descent. Information about prior or current eating disorder diagnoses were not collected. All participants were either currently living in Mainland China or Hong Kong, or had lived in these places for the majority of their lives (≥ 10 years). After consent, participants indicated their preference for the interview to be conducted via Skype or email.

2.2 | Assessments and measures

This study was approved by the Duke Institutional Review Board (Protocol Number: 2018-0632). Participants were asked six questions about their perceived expectations surrounding mealtimes, sources of female appearance standards, and any perceived incompatibility between these two sets of expectations (see Brady et al., 2017 for similar methods). Sample items included, "What do food and the act of eating symbolize in your culture?"; "Do you ever feel that there is a conflict between cultural expectations around eating and expectations about body shape?" and "If you do perceive there to be a conflict, how do you manage/attempt to resolve this conflict?" (see Appendix A). None of the participants requested to skip any of the interview questions.

2.3 | Research team

Data coding and analysis were conducted by the first (Chinese female) and second authors (Chinese female). The first author was responsible for recruiting, scheduling and interviewing participants, identifying themes, and writing the final manuscript. The second author assisted with recruiting, scheduling and interviewing participants, refining the codebook, and helping to identify themes for reliability. Personal experiences with Chinese cultural expectations and values, and fluency in Chinese dialects ensured that interviews and data interpretation were carried out in a culturally-sensitive manner. The third and fourth authors (biracial and white females, respectively), assisted in literature reviews, provided feedback on study implementation, and assisted in editing the final manuscript. The fifth author (Latino male) assisted in editing the final manuscript.

2.4 | Procedures

A total of 34 interviews were conducted (27 via email; 23 in English, four in Chinese), and seven interviews were conducted via Skype (all in Chinese). The second author was responsible for transcribing and translating all interviews which were cross-checked with the first author, and another native Chinese speaker.

2.5 | Thematic analysis

Thematic analyses were adapted from Braun and Clarke (2006). The first and second authors independently read participants' responses. Next, they met to collaboratively generate initial codes to organize data into meaningful categories. They then completed a round of independent coding based on these generated coding labels. Intercoder reliability was calculated using the simple proportion method, which involved calculating the quotient of dividing the number of matching codes by the total number of codes for a given question (Miles & Huberman, 1994). The resulting quotient was 85–90%. Afterward, coders met to combine codes into overarching thematic

categories (see Appendix B for the codebook). Thematic analysis was conducted collaboratively across two coding meetings by inputting the responses into the qualitative analysis software, NVivo[®].

3 | RESULTS

Thematic analyses are reported in response to the following: (a) How do Chinese young adult women experience eating norms and norms of ideal feminine appearance? (b) What factors lead to a sense of pressure to adhere to either set of expectations? (c) If these expectations are perceived to be conflicting, how do these women navigate their sense of conflict? (see Figure 1).

3.1 | Encounters with cultural eating norms

All women reported being taught from an early age that they should not waste food, nor refuse food offered by family members. Most women (n = 24) shared that they continued to adhere to these norms today, seven reported that they no longer felt pressured to adhere to these norms, and three reported that they were not expected to follow any eating norms.

3.1.1 | Continued adherence to eating norms

Women (n = 24) reported three main reasons for feeling continued pressure to adhere to cultural eating norms. First, women (n = 13)reported feeling pressured to finish all the food on their plates because they did not want to appear disrespectful. The reasons for which acts of food refusal and wastage could be interpreted as disrespectful were grouped into four main categories: (a) ungratefulness toward efforts involved in providing and preparing food ("I know how hard my parents work to provide for me"), (b) disregard for older family members' experiences with food scarcity ("My parents both grew up during the close of the Cultural Revolution in China, when food was scarce and rationed out...no scrap of food is wasted if my father is at the dinner table"), (c) disregard for people less fortunate than them ("My family members would respond to my complaints about being too full with the comment that 'there are people out there who are starving as we eat""), and (d) violation of cultural expectations of filial piety ("It is considered important for a 'good' child to eat well").

Second, women (n = 14) described fear surrounding two types of consequences they felt would result from wasting food. First, there were the *immediate* consequences of critique from family members ("I finish my food to avoid the snide comments that my grandmothers make when I don't eat enough"). There were also the *potential* consequences of not finishing their food ("There is an old saying I remember my grandma telling me as a kid—if I left pieces of rice in my bowl I would marry a man with many spots on his face"). Third, women

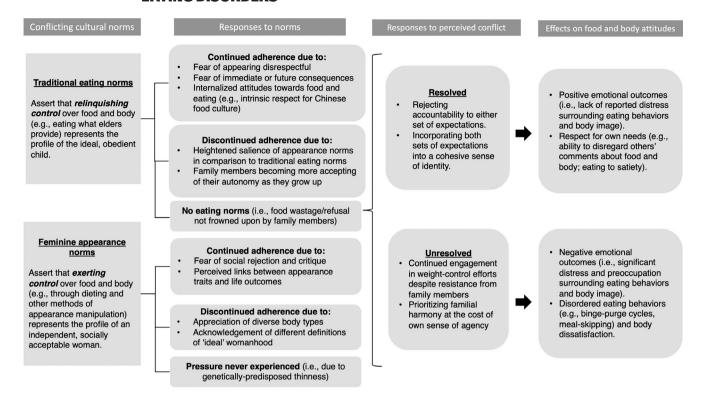


FIGURE 1 Flowchart detailing how women's responses to a perceived conflict between expectations surrounding cultural eating norms and feminine appearance norms may affect their eating and body-image attitudes

(*n* = 18) reported intrinsically-motivated desires to finish their food, such as an internalized understanding of food wastage as "shameful" or a sense of respect for Chinese food culture. One woman remarked that she was "happy to" eat more, because she enjoyed being praised by her elders when she did.

3.1.2 | Discontinued adherence to eating norms

Some women (*n* = 7) reported that despite lessons they learned in childhood to minimize instances of food wastage, they did not currently feel obliged to adhere to these norms. One reason for this was the heightened salience of appearance norms compared to eating norms at this life-stage (e.g., increasingly sedentary lifestyles due to the transition from school to work resulting in growing concerns about weight gain). A second reason was family members' greater respect for their autonomy as they grew up ("as we gradually grow older, they have begun to respect our decisions on what we like to eat").

3.1.3 | No eating norms

Three women reported that they were not expected to follow any rules in mealtime situations ("we typically don't take leftovers home"), and that they were not expected to finish food given to them by elders ("everyone just picks what they want").

3.2 | Encounters with feminine appearance norms

All women reported being exposed to messages from family members, friends, and the media that linked being thin to acquiring desirable individual and interpersonal outcomes as a woman. Most women (n = 24) reported feeling continued pressure to uphold thinness pressures, some (n = 6) reported ways that they overcame these pressures, and several (n = 4) reported never having experienced a sense of pressure.

3.2.1 | Continued adherence to appearance norms

Women (n = 24) reported two main reasons for feeling continued pressure to adhere to thinness norms. First, women (n = 18) reported feeling pressured to achieve or maintain thinness because they feared rejection from their social circles, or receiving derisive body-related comments. They shared the important role that appearance-related comments played in social interactions ("casual comments on weight are common, and are often used as greetings") and how it normalized their feelings of shame about their bodies ("I have received these comments since childhood...I don't remember a time when I didn't believe that being thinner was more socially acceptable"). One woman's response further emphasized this link, noting her "dark fear that her parents [would] not love [her]" if she was not thin enough. Second, women (n = 16) described perceived links between appearance traits and desirable individual life outcomes such as being

respected in work settings ("I have been told that if I look good, my future employer will have a better first impression of me") and finding a romantic partner ("I have observed that male friends prefer girls with a good figure, and as a single girl, I feel quite stressed"). Women often described this dissonance (e.g., homogeneous portrayals of attractive women in the media where "all famous actresses follow the model of 'thin, pale, big eyes"), while also perceiving positive consequences of achieving a thin body (e.g., receiving compliments from others; easily finding clothing that "look good" on them).

3.2.2 | Discontinued adherence to appearance norms

Women (n = 6) reported two main reasons that they no longer felt obliged to conform to thinness norms. First, some women (n = 4) described learning to appreciate diverse body types, thus reducing their sense of accountability to the thin ideal. One woman shared that starting a weight-lifting routine helped her appreciate that "bodies of all sizes can build strength," while another shared that realizing that "very few people actually have shapely legs" helped her overcome her shame for not being able to achieve this appearance standard. Second, some women (n = 2) described learning to acknowledge different definitions of 'ideal' womanhood, thus recognizing the futility of trying to live up to every person's standards. One woman shared: "Everyone is entitled to their own opinion. People are going to comment anyway, so I'm going to choose how I want to feel about and do with my body."

3.2.3 | Appearance pressures never experienced

Four women mentioned that they never experienced pressures from appearance norms, due to genetically-predisposed thinness. These women noted these pressures were counterbalanced by compliments from others, or were simply dismissed ("I have never taken these messages to heart because I know I will stay thin anyway").

3.3 | Experiences of conflict and strategies of conflict resolution

The majority of participants (*n* = 28) indicated that they experienced current or past distress resulting from the conflict between cultural eating norms, and feminine appearance standards emphasizing thinness. Women reported feelings of confusion ("I couldn't seem to understand why my grandmother would say I was 'fat', but then encourage me to eat more at dinner") and shame ("everyone else seemed to be able to uphold both sets of expectations while I couldn't no matter how desperately I tried").

Women who reported past or current distress shared strategies to address the perceived conflict, and were categorized into two subgroups: (a) resolved (n = 12), which included women that described

strategies successfully used to reduce or eliminate distress and (b) unresolved (n=16), which included women that described responses which exacerbated or were unsuccessful in reducing distress. The remaining women (n=6) reported that their emotions were minimally impacted by the two sets of expectations, due to factors including genetically predisposed thinness (e.g., leading to a lack of concern about weight gain even after eating large amounts), and relaxed attitudes toward upholding either or both sets of expectations held by family members ("they just don't really care what I do").

3.3.1 | Resolved

Women in this subgroup (*n* = 12) described strategies that they used to significantly reduce or eliminate emotional distress in response to the perceived conflict. Eight women described rejecting accountability to either set of expectations, by learning to accept the conflicting nature of the two sets of expectations, and recognizing the futility of trying to satisfy them simultaneously. These women described realizing that they would receive commentary on their bodies regardless of their efforts ("I know that I will receive the 'oh you've gotten fatter/skinnier' comments no matter what I do"), and that this realization prompted them to detach themselves from perceived pressures to uphold these expectations ("These conflicting expectations have actually caused me to continue living the eating and health lifestyle that I always have").

Four women described incorporating both sets of expectations into a cohesive sense of identity, by finding adaptive (i.e., not involving disordered eating behaviors) ways to incorporate both sets of expectations into an integrated sense of self. Women described eating the food cooked by family members while following the general principles of one's preferred diet plan (e.g., choosing more vegetable-heavy dishes), practicing the vocalization of fullness at mealtimes, and involving family members in exercise routines ("It was initially tough to convince my parents that I wanted to start weight-training. But once I started showing them the benefits that my routine had for my scoliosis condition, they even asked to join me!").

3.3.2 | Unresolved

Women in this subgroup (n = 16) reported responding to the perceived conflict in ways that either exacerbated or were unsuccessful in reducing the distress that they felt. Thirteen women described responding to the perceived conflict by continuing to engage in weight-control efforts despite resistance from family members, and despite experiences of negative emotionality (e.g., self-loathing, body dissatisfaction). A considerable proportion of these women (n = 10) explicitly reported current engagement in disordered behaviors, such as skipping meals, binge-eating, and binge-purge cycles; two women reported strongly considering plastic surgery. Two women reported prior struggles with diagnosed mental disorders related to eating and body-image (i.e., body dysmorphia and bulimia, respectively). A few

women (n = 3) also disclosed how they used disordered eating behaviors to express discontent in interpersonal situations ("it was my own sick way of rebelling against my parents' wishes").

Moreover, three women reported responding to the perceived conflict by prioritizing familial harmony, even if it meant relinquishing their own sense of agency. All women described eating past fullness for the sake of maintaining familial harmony even if it caused them significant distress, while one woman reported being scared to exercise because she feared becoming "too bulky to be loved." Despite expressing satisfaction that they were able to appease family members' expectations, all women shared feelings of fear and guilt for not simultaneously upholding norms of thinness ("I love food, so eating food, especially with family, makes me happy. However, the result of a lot of overeating and eating out in general makes me pretty self-conscious and upset").

4 | DISCUSSION

The present study explored Chinese young adult women's experiences of navigating two sets of cultural expectations: traditional eating norms, which present the relinquishment of control over food and body as key characteristics of an ideal Chinese child, and feminine appearance norms, which present exertion of control over food and the body as integral to asserting autonomous identity and achieving social acceptance. The ways in which women resolve these conflicts have important implications for understanding the complex functions of disordered eating and body-image attitudes amongst women of Chinese descent. Past work elucidates the culturally-specific nature of rationales for self-starvation (Ma. 2005), and the role of different systems of oppression, such as racism and sexism, on body-image beliefs (Brady et al., 2017). Our study builds upon this literature, by providing a novel perspective on how Chinese young adult women may address the tensions between traditional eating norms and feminine appearance norms in adaptive and maladaptive ways, with the latter including the use of disordered eating behaviors.

4.1 | Food and body as symbols in processes of value formation

Collectively, existing research suggests that eating behaviors and appearance manipulation may carry particular symbolic significance in the value formation processes of Chinese young adult women. Specifically, the incompatibility between traditional eating norms and feminine appearance norms may symbolize the struggle to reconcile interpersonal and individual needs, which is considered to be a key developmental task during young adulthood (Erikson, 1968).

Importantly, all women reported being exposed to both sets of expectations throughout their lives. Women described moral lessons that were imparted to them from a young age through idioms of food and eating. They shared stories from family members that linked eating behaviors to life outcomes (e.g., leaving food on one's dish

resulting in marrying a man with pimples on his face), and teachings that linked food wastage to disrespectful character (e.g., disregard for the efforts of whoever prepared the meal) and ethical principles of Chinese culture (e.g., eating well as a representation of being a "good" child)

Women's encounters with feminine appearance norms were similarly connected with character-building and social acceptance. Women disclosed how the pervasiveness of appearance-related commentary in social interactions and repeated exposures to these comments led them to internalize the link between appearance and social acceptability. This internalized emphasis on appearance is in line with objectification theory, which asserts that women are conditioned to internalize an observer's view of themselves, leading to habitual bodymonitoring and increased instances of shame (Fredrickson & Roberts, 1997).

4.2 | Eating behaviors as expressions of discontent

Our findings are also consistent with prior research suggesting that Chinese individuals may use food to represent expressions of emotion that are considered culturally unacceptable (Leong & Lee, 2006), and as a cry for identity autonomy (Chan & Ma, 2002). Our findings imply that, for individuals living in a cultural context that often uses idioms of food and body to convey moral principles, and that stigmatizes explicit expressions of emotion, disordered eating behaviors and attempts to change the body may represent a convenient vehicle for expressing distress.

4.3 | Clinical implications

Clinicians may help Chinese young adult female clients explicitly identify conflicting expectations and the individual and interpersonal needs that underlie their sense of obligation to adhere to each set of expectations. Clients could also be encouraged to explore alternative ways to achieve these needs (e.g., recognizing that feelings of social integration can be achieved through improving communication patterns, instead of adhering to established norms at the cost of one's own wellbeing). This is consistent with prior clinical recommendations that clients be encouraged to explore the implicit cultural meanings behind eating behaviors (Caruso & Moulding, 2020; Cheney, 2013).

Our findings also suggest the importance for clinicians to recognize that the Chinese collectivistic culture prioritizes interpersonal needs over individual needs, so it is not always possible or appropriate for younger family members to openly express emotions of distress. As suggested by prior studies (Chan & Ma, 2002; Ma, 2005), Chinese individuals may use disordered eating behaviors to communicate culturally unacceptable expressions of emotion. While it may be valuable for therapists working with Western clients to emphasize individual desires, therapists who promote individualistic values while dismissing the need to appease close others may risk appearing culturally insensitive toward Chinese clients.

One strategy that clinicians could use to help clients balance their individual and interpersonal needs is guiding them toward developing a contextually informed sense of self. Women in our study who were able to accept the need to behave differently in different situations represented a subset of our sample that was able to establish a cohesive sense of identity, and adaptive emotional and behavioral outcomes. Thus, clinicians should validate clients' desires to satisfy both individual and interpersonal needs.

Finally, in light of studies suggesting that disordered eating may represent attempts to communicate suppressed emotions, clinicians should aim to normalize experiences and expressions of negative emotions throughout the course of treatment, helping the client develop skills to tolerate difficult feelings, and to explore coping mechanisms that do not involve maladaptive behaviors and attitudes toward food and their bodies.

4.4 | Limitations and future directions

Our sample size, while appropriate for qualitative research, cannot be assumed to capture the experiences of all Chinese women. Future studies should include a greater range of demographic variables (e.g., education level, income) to establish more robust conclusions about the relationship between cultural tensions and women's responses. Given that women in the present sample reported experiencing these pressures from an early age, future work should also use longitudinal methods to examine changes in women's experiences at different life stages.

Another limitation is the different levels of disclosure that could have resulted from the email versus Skype interview formats. Although we let participants choose their interview format for ethical reasons, we acknowledge that the interview format could have biased the collected responses in unforeseen ways.

Finally, mental health stigma in Chinese contexts may have prevented women from fully disclosing the extent of their eating pathology (Chung, 2010; Liu et al., 2017). Thus, it is possible that the number of women who developed eating pathology in response to their perceived cognitive conflict could have been much greater.

5 | CONCLUSION

In sum, our study explored Chinese young adult women's experiences with navigating expectations surrounding traditional eating norms and feminine appearance standards, and sought to characterize these women's responses to a perceived conflict between these sets of expectations. This study advances the literature by underlining the symbolic significance that eating behaviors and appearance manipulations may carry in the lives of Chinese women, and provides a framework for clinicians and researchers to better understand the possible effects of culturally specific stressors for this underserved population.

CONFLICT OF INTEREST

The authors have no conflicts of interest to declare. The authors received no specific funding for this work. All data are available on request from the corresponding author due to privacy or ethical restrictions. We wholeheartedly thank the brave young women who shared their stories for the present study.

DATA AVAILABILITY STATEMENT

All data are available on request from the corresponding author due to privacy or ethical restrictions.

ORCID

Stephanie Ng https://orcid.org/0000-0003-1508-4801

Nancy Zucker https://orcid.org/0000-0003-2278-5008

REFERENCES

- Ackard, D. M., Fulkerson, J. A., & Neumark-Sztainer, D. (2007). Prevalence and utility of DSM-IV eating disorder diagnostic criteria among youth. *International Journal of Eating Disorders*, 40(5), 409–417.
- Brady, J. L., Kaya, A., Iwamoto, D., Park, A., Fox, L., & Moorhead, M. (2017). Asian American Women's body image experiences: A qualitative Intersectionality study. *Psychology of Women Quarterly*, 41(4), 479-496. https://doi.org/10.1177/0361684317725311
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101.
- Caruso, M., & Moulding, N. (2020). "Devi Mangiare!" [You have to eat!]:
 Experiences of disordered eating among Italian-Australian women.

 Health Care for Women International, 1–24. https://doi.org/10.1080/07399332.2020.1802461
- Chan, Z. C., & Ma, J. L. (2002). Family themes of food refusal: Disciplining the body and punishing the family. *Health Care for Women International*, 23(1), 49–58.
- Cheney, A. M. (2013). Altering the social: An ethnography of disordered eating among southern Italian women. *Food and Foodways*, 21(2), 87–107.
- Chin, D. (1996). Setting up shop: Retailing in China. Hong Kong: FT Pitman.
- Chung, I. (2010). Changes in the sociocultural reality of Chinese immigrants: Challenges and opportunities in help-seeking behaviour. *International Journal of Social Psychiatry*, 56(4), 436–447.
- Erikson, E. H. (1968). Identity: Youth and crisis. New York, NY: Norton.
- Feng, T., & Abebe, D. S. (2017). Eating behaviour disorders among adolescents in a middle school in Dongfanghong, China. *Journal of Eating Disorders*, 5(1), 47. https://doi.org/10.1186/s40337-017-0175-x
- Fredrickson, B. L., & Roberts, T. A. (1997). Objectification theory: Toward understanding women's lived experiences and mental health risks. *Psychology of Women Quarterly*, 21(2), 173–206.
- Getz, M. J. (2014). The myth of Chinese Barbies: Eating disorders in China including Hong Kong. *Journal of Psychiatric and Mental Health Nursing*, 21(8), 746–754. https://doi.org/10.1111/jpm.12115
- Han, S. (2020). Asian values, intergenerational conflict, needs, and attachment in Asian/Asian American Women's disordered eating. The Counseling Psychologist, 48(4), 526–550.
- Jung, J. (2018). Young women's perceptions of traditional and contemporary female beauty ideals in China. Family and Consumer Sciences Research Journal, 47(1), 56–72.
- Jung, J., & Forbes, G. B. (2007). Body dissatisfaction and disordered eating among college women in China, South Korea, and the United States: Contrasting predictions from sociocultural and feminist theories. *Psy-chology of Women Quarterly*, 31(4), 381–393. https://doi.org/10. 1111/j.1471-6402.2007.00387.x

- Lee, S. (1993). How abnormal is the desire for slimness? A survey of eating attitudes and behaviour among Chinese undergraduates in Hong Kong. *Psychological Medicine*, 23(2), 437–451.
- Lee, S. (1999). Fat, fatigue and the feminine: The changing cultural experience of women in Hong Kong. *Culture, Medicine and Psychiatry, 23*(1), 51–73. https://doi.org/10.1023/A:1005451614729
- Lee, S., & Lee, A. M. (2000). Disordered eating in three communities of China: A comparative study of female high school students in Hong Kong, Shenzhen, and rural Hunan. *International Journal of Eating Disor*ders, 27(3), 317–327.
- Leong, F. T., & Lee, S.-H. (2006). A cultural accommodation model for cross-cultural psychotherapy: Illustrated with the case of Asian Americans. *Psychotherapy: Theory, Research, Practice, Training*, 43(4), 410–423. https://doi.org/10.1037/0033-3204.43.4.410
- Liu, F., Zhou, N., Cao, H., Fang, X., Deng, L., Chen, W., ... Zhao, H. (2017). Chinese college freshmen's mental health problems and their subsequent help-seeking behaviors: A cohort design (2005–2011). PLoS One, 12(10), e0185531.
- Ma, J. L. (2005). Family treatment for a Chinese family with an adolescent suffering from anorexia nervosa: A case study. *The Family Journal*, 13 (1), 19–26. https://doi.org/10.1177/1066480704269178
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook* (2nd ed.). Thousand Oaks, CA: Sage.
- Omori, M., Yamazaki, Y., Aizawa, N., & de Zoysa, P. (2017). Thin-ideal internalization and body dissatisfaction in Sri Lankan adolescents. *Journal of Health Psychology*, 22(14), 1830–1840. https://doi.org/10.1177/ 1359105316637665
- Pike, K. M., & Dunne, P. E. (2015). The rise of eating disorders in Asia: A review. *Journal of Eating Disorders*, 3(1), 33. https://doi.org/10.1186/ s40337-015-0070-2
- Tanner, J. M. (1981). Growth and maturation during adolescence. *Nutrition Reviews*, 39(2), 43–55. https://doi.org/10.1111/j.1753-4887.1981. tb06734.x
- Tong, J., Miao, S., Wang, J., Yang, F., Lai, H., Zhang, C., ... Hsu, L. K. G. (2014). A two-stage epidemiologic study on prevalence of eating disorders in female university students in Wuhan, China. Social Psychiatry and Psychiatric Epidemiology, 49(3), 499–505. https://doi.org/10.1007/s00127-013-0694-y
- Tsong, Y., & Smart, R. (2015). The role of cultural beliefs in disordered eating among Asian-American women. Asian American Journal of Psychology, 6(4), 342–349.
- Xiao Jing [The classic of filial piety]]. (1960). In J. Legge (Trans.), *The Chinese classics* (Vols. 1–5 1). Hong Kong: Hong Kong University Press.
- Xu, G., & Feiner, S. (2007). Meinu Jingii/China's beauty economy: Buying looks, shifting value, and changing place. Feminist Economics, 13, 307–323.

- Xu, X., Mellor, D., Kiehne, M., Ricciardelli, L. A., McCabe, M. P., & Xu, Y. (2010). Body dissatisfaction, engagement in body change behaviors and sociocultural influences on body image among Chinese adolescents. Body Image, 7(2), 156–164.
- Yi, S., Han, L., & Wenjun, L. (2009). Atypical nervosa among female college students in Shanghai. China Journal of Health Psychology, (4), 12. Retrieved from https://en.cnki.com.cn/Article_en/CJFDTotal-JKXL200904012.htm

How to cite this article: Ng S, Liu Y, Gaither S, Zucker N, Marsan S. The clash of culture and cuisine: A qualitative exploration of cultural tensions and attitudes toward food and body in Chinese young adult women. *Int J Eat Disord*. 2020; 1–10. https://doi.org/10.1002/eat.23459

APPENDIX A.: INTERVIEW QUESTIONS

- 1. Describe a typical mealtime situation with your family. What are some cultural rules that you need to follow (e.g., are you allowed to decline food from your elders)?
- 2. What do food and the act of eating symbolize in your culture? How is food wastage viewed?
- 3. Do you feel the pressure to be thin? If so, what sources does this pressure come from?
- 4. Describe what the ideal female in your culture looks and behaves like. What features or behaviors are considered "perfect" or "acceptable"? What features or behaviors are considered deviant?
- 5. Do you ever feel that there is a conflict between cultural expectations around eating and expectations about body shape? Why or why not? If you do perceive there to be a conflict, how do you manage/attempt to resolve this conflict?
- 6. How do these conflicting expectations influence your emotions? How do these conflicting expectations influence how you perceive your body? Are you satisfied with your body? Why or why not?

APPENDIX B.: FINAL VERSION OF CODEBOOK

Line of inquiry

- (1). How do Chinese young adult women experience eating norms and norms of ideal feminine appearance?
- (2). What factors lead to a sense of pressure to adhere to either or both sets of expectations?

Thematic categories and descriptions

Encounters with cultural eating norms: Participant describes their experiences with messages (e.g., source of messages, content of messages, perceived pressure to uphold the norms conveyed in these messages) that they have received surrounding expected behaviors at mealtime settings.

Choose 1:

1. Continued adherence to eating norms: Participant indicates that she continues to follow cultural eating norms (i.e., accepting all food offered by family members; finishing all food on her plate to prevent food wastage) at the time of the interview.

Indicate reason(s) for continued adherence:

Fear of appearing disrespectful: participant reports feeling pressured to finish/accept food provided by family members due to fear of appearing disrespectful (e.g., ungratefulness for the efforts of family members).

Fear of consequences: participant describes consequences that she fears will happen if she wastes or refuses food (e.g., stories that family members tell about consequences of food wastage). **Internalization of eating norms:** Participant describes intrinsically-motivated reasons for accepting and finishing food from family members.

2. Discontinued adherence to eating norms: Participant indicates that despite receiving messages and/or following cultural eating norms to prevent instances of food refusal and/or wastage in the past, she does not feel obliged to continue adhering to these norms at the time of the interview.

Indicate reason(s) for discontinued adherence:

Heightened salience of appearance norms: participant indicates that she no longer adheres to eating norms, because she currently feels a greater sense of obligation to adhere to feminine appearance norms (compared to eating norms), which are perceived as inconsistent with eating norms (e.g., due to weight gain that is expected to result from finishing all the food that family

Family members respecting autonomy: Participant indicates that she no longer feels pressured to adhere to eating norms, because family members have become more accommodating of her eating-related decisions in the present (as compared to when she was younger).

3. No eating norms: Participant indicates that she has never felt obliged to adhere to cultural eating norms to minimize instances of food refusal and wastage, in the past or in the present.

Encounters with feminine appearance norms: Participant describes their experiences with messages (e.g., source of messages, content of messages, perceived pressure to uphold the norms conveyed in these messages) that they have received surrounding the linkage between appearance traits and idealized notions of womanhood.

1. Continued adherence to feminine appearance norms: Participant indicates that she continues to feel pressured to conform to norms of feminine appearance (e.g., surrounding body shape and facial features) at the time of the interview.

Indicate reason(s) for continued adherence:

Fear of social rejection and critique: Participant reports feeling pressured to achieve or maintain thinness because she fears rejection from their social circles or receiving derisive body-related comments.

Linkage between appearance and individual life outcomes: participant describes perceived linkages between appearance traits and desirable individual life outcomes (e.g., being respected in

2. Discontinued adherence to feminine appearance norms: Participant indicates that despite receiving messages and/or following feminine appearance norms in the past, she no longer feels pressure to conform to these norms at the time of the interview.

Indicate reason(s) for discontinued adherence:

Acknowledgement of body diversity: Participant describes learning to reduce her sense of accountability to the thin ideal by acknowledging that bodies are supposed to be diverse in size and shape.

Appreciation of different opinions. Participant describes recognizing that every person has a different definition of what an 'ideal' woman is, and therefore, that it is futile to try to live up to every person's expectations.

3. Appearance pressured never experienced: Participant indicates that she has never experienced pressures to conform to feminine appearance norms, in the past or in the present (e.g., due to genetically-predisposed thinness).

Line of inquiry

If these expectations are perceived to be conflicting, how do these women navigate their sense of conflict?

Thematic categories and descriptions

Experiences of conflict: Participant describes her experiences with navigating the two sets of expectations surrounding cultural eating norms and norms of ideal feminine appearance, and whether these experiences have resulted in significant emotional and/or behavioral changes.

Choose 1

- Yes: Participant indicates that she <u>has</u> experienced significant emotional distress (e.g., guilt, shame, confusion) in response to the two sets of cultural expectations surrounding cultural eating norms and norms of ideal feminine appearance.
- 2. No: Participant indicates that she <u>has not</u> experienced emotional distress (e.g., indicates that her emotions and behaviors have not been significantly impacted) in response to the two sets of cultural expectations surrounding cultural eating norms and feminine appearance norms.

Strategies used to address expectations (*only code here if "yes" is selected above)

Choose 1

- Resolved: Participant describes strategies used to successfully resolve (i.e., significantly reduce or eliminate emotional distress) the perceived conflict between expectations.
 - Rejecting accountability to either set of expectations: Participant describes accepting the
 inherently conflicting nature of the two sets of expectations, thus realizing the futility of
 trying to satisfy them simultaneously (e.g., realizing that she will receive body-related
 comments regardless of her decisions).
 - Incorporating both sets of expectations into a cohesive sense of identity: Participant
 describes finding adaptive (i.e., not involving disordered eating behaviors) ways to
 incorporate both sets of expectations into an integrated sense of self (e.g., choosing
 preferred dishes amongst dishes prepared by family members, thus honoring own and
 interpersonal needs).
- Unresolved: Participant describes responses that were exacerbated or were unsuccessful in reducing the distress that she felt surrounding the perceived conflict between expectations. Chaose 1:
 - Prioritizing adherence to thinness norms: Participant describes attempts to resolve her sense of perceived conflict by continuing to engage in dieting/weight-control practices, even if this choice is perceived to be against the wishes of family members (e.g., refusing food as a form of rebellion against family members).
 - Prioritizing familial harmony: Participant describes attempts to resolve her sense of perceived conflict by prioritizing adherence to cultural eating norms, even if it means relinquishing her sense of agency and autonomy (e.g., eating past fullness to appease family members).