

The Impact of COVID-19 on Individual's Mind and Body

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ABSTRACT:

This research examines the various ways COVID-19 impacted the mind and body of individuals at CU Boulder. Specifically, how it impacted sense of self, eating behaviors, and body image. Previous literature examines these topics in relation to COVID-19 but vastly in the context of those with eating disorders and looking at the negative impact.

The sample of this study consisted of 15 undergraduates from CU Boulder, who self-identified as women and had no diagnosis of an eating disorder. Participants completed an interview via Zoom. The results of the study highlight the positive impacts of breaking routine. The present study also suggests that the impact of COVID-19 on eating behaviors, body image, and the self may be dependent on one's social setting. Finally, the results of the study emphasize the impact of media on the mind and body through increased comparisons.

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INTRODUCTION:

COVID-19 and quarantine changed everyday life in some way for almost everyone. Quarantine, which was experienced globally, required many individuals to make major life changes. Some individuals were forced to leave their homes, this is what happened at CU Boulder for all the freshmen. Others were stuck in their homes with no access to outside resources or social support. These unprecedented changes to daily life surely resulted in unique impact for every individual. The start of COVID-19 was only two years ago, however; many of its effects will not be seen for years to come. The current study aims to build on the knowledge surrounding COVID-19's effect on individuals mind and body, specifically among college aged women without a diagnosis of an eating disorder.

Previous research highlights that psychological problems are a growing concern at many college counseling centers (Mistler et al., 2013). The literature suggests that eating disorders are increasing at college campuses among both genders (White et al., 2011). Literature on college-aged individuals found that undergraduate women had a higher prevalence of eating disorder symptoms compared to men (Eisenberg et al., 2011). Of the individuals in the previous study that did show eating disorder symptoms, only 20% had received mental health treatment in the past year. Not only are college students more likely to struggle with one of these mental health issues, but they are also not very likely to seek help. This leaves them further struggling during times like the COVID-19 pandemic. Furthermore, when you consider that college-aged individuals already face unique challenges that contribute to their mental and physical health, the mass social upheaval of COVID-19 has undoubtedly impacted every college student.

The present study focuses on the portion of the population not diagnosed with an eating disorder because much of the current literature on eating behaviors and body image in relation to COVID-19 is surrounding those with a previous diagnosis of an eating disorder. While it is important to focus on the vulnerable population, it is also important to see how those outside of the diagnosed population are affected in terms of body image, eating behaviors, and physical activity.

The goal of the present study is to examine the positive and negative effects of COVID-19 on the self. Specifically, I examined the research question of “How did COVID-19 impact eating behaviors, sense of self, and body image?”. Asking this question will help reveal why some of these changes occurred, and the potentially positive changes that did occur. The current study will fill the gap in the literature by providing information regarding eating behaviors, body image, and physical activity in the context of the non-disordered population and will provide more in-depth information on why participants felt these changes occurred.

LITERATURE REVIEW:

Eating Behaviors

Research on COVID-19 has shown that there was an increase in restricted eating among individuals during the COVID-19 lockdown (Phillipou, 2020; Robertson et al., 2021; Rodgers et al., 2020). A survey conducted by Robertson et al. (2021) in the UK on 264 individuals found that women were more likely than men to report struggles related to eating regulation and worsening body image. Rodgers et al. (2020) found that individuals pursued restrictive diets that were specifically focused on increasing immunity. They related this pursuit of restrictive diets to fear of possible infection from COVID-19. A survey in Australia by Phillipou et al. (2020) found a 28% increase in food restriction and 35% increase in binge eating behaviors since the pandemic began, even though this group reported no previous eating disorder history. The same study found that only 13% of the general population, those without an eating disorder diagnosis, experienced a decrease in restrictive eating and 5% experienced a decrease in binge eating.

Changes to eating behavior were prominent among the general population as mentioned above, but they posed a unique issue to those with past eating disorder symptoms. The study by Robertson et al. (2021) found a significant increase in difficulties controlling and regulating eating among individuals who had a current or past diagnosis of an eating disorder. Termorshuizen et al. (2020) also found an increase in eating disorder symptomatology among those with a previous diagnosis in a survey conducted in the US and Netherlands. Specifically, they found that those with a diagnosis of anorexia nervosa reported an increase in restrictions of 62% in the US and

69% in the Netherlands. Termorshuizen et al. (2020) also found an increase in binge eating episodes of 30% in the US and 15% in the Netherlands among individuals with a binge eating or bulimia nervosa diagnosis. Comparing this study to Phillipou et al. (2020), it is clear that there was a much more extreme effect of COVID on changes to eating behaviors among those with a past or current diagnosis. Negative eating behavior changes have also been associated with less adaptive coping, like COVID-19 over-information and disordered eating behaviors, in dealing with the COVID-19 lockdown (Baenas et al., 2020). They specifically examined patients in treatment prior to the lockdown. Within the Baenas et al. (2020) study 25% of the participants had an increase in eating disorder symptoms during lockdown. Pikoos et al. (2020) conducted a survey in Australia where participants rated their dysmorphic concern and level of appearance focused behaviors. It was found that individuals with high dysmorphic concern experienced greater distress and negative feelings related to the closure of many beauty services (Pikoos et al., 2020). Those with high dysmorphic concern also had higher levels of appearance focused behaviors. Individuals with low dysmorphic concern had a decrease in appearance focused behaviors, and perhaps saw lockdown as a break from the pressures of society (Pikoos et al., 2020). Pikoos et al. (2020) further highlights that the pandemic affected individuals in different ways based on their past experiences or beliefs.

One possible reason why individuals with a past diagnosis experienced more difficulty during the pandemic was explained by Touyz et al. (2020). Touyz et al. (2020) highlighted those individuals with a diagnosis have already experienced emotional and physical isolation prior to the pandemic in search for recovery. The food insecurity

experienced by the general public is enhanced for those with eating disorders because they already have a complicated relationship with food (Touyz et al., 2020). On top of that individuals with eating disorders are now forced to change their treatment plan, and many in-patient treatment facilities were forced to close (Touyz et al., 2020). Some eating disorders require that the individual is able to distance themselves from food; being locked in your home makes this extremely difficult. Binging can be especially problematic when the food supply is already limited, leading to more family conflict and negative emotionality (Touyz et al., 2020).

Change to Daily Activity

Many of the previous changes to eating behaviors mentioned above were attributed to a change in daily routine (Rodgers et al., 2020; Vuillier et al., 2021; Nutley et al., 2021). During the pandemic limitations were placed on physical and social activity (Rodgers et al., 2020). Many individuals were left without “friends for support” and some were “distressed by the loss of access to gyms” (Vuillier et al., 2021:2). These constraints were shown to lead to increased shape and weight concerns, as well as disordered eating through limiting physical activity and disruption to eating patterns (Rogers et al., 2020). Specifically, that lack of routine exercise led to anxiety regarding how the change in energy would affect their weight and shape (Vuillier et al., 2021). Disruptions to daily routine were found to result in decreased sense of control and the worsening of disordered eating behaviors (Nutley et al., 2021). They found that engaging in disordered eating behavior was a way of seeking comfort during the pandemic. In another study participants rated change in routine as having the most

significant impact on the worsening of their eating behaviors (Vuillier et al., 2021). Meal planning is one key way to support an individual with an eating disorder, when the routine is removed meal planning becomes extremely difficult (Rodgers et al., 2020). Vuillier et al. (2021) also noted that disruption to routine has jeopardized the recovery of many individuals with eating disorders. Individuals with past eating disorder symptoms relied heavily on disordered eating behaviors to cope with the changes in their daily routine (Nutley et al., 2021). Specifically, individuals who lost their university routines felt distress because of the lack of structure and purpose (Vuillier et al., 2021). Many individuals were found to lack motivation because of lacking routine (Vuillier et al., 2021).

There were many changes to daily life during quarantine, notably that there was a change in exercise during quarantine (Phillipou et al., 2020; Trott et al., 2020; Nutley et al., 2021; Vuillier et al., 2021). Nutley et al. (2021) found that 13.4% of participants reported difficulty with consistent exercise and building an exercise routine due to decreased motivation. Trott et al. (2020) surveyed members of a health club pre and post lockdown and found that exercise addiction was significantly lower and leisure time exercise was significantly higher post lockdown. Phillipou et al. (2020) also found a decrease in exercise compared to prior to the pandemic. Both the studies by Trott et al. and Phillipou et al. (2020) found there was a decrease in exercise and there was an increase in disordered eating. Conversely, Vuillier et al. (2021) found that constant availability of online workouts and social messages to better oneself during lockdown lead many people to over exercise.

Social support has been shown to be key in managing and reducing eating disorder symptomatology (Rodgers et al., 2020). Since social distancing was one of the main characteristics of quarantine, many individuals were left without social support and were left even more vulnerable to the effects of these types of stress inducing circumstances (Rodgers et al., 2020). Nutley et al. (2021) found that participants commonly felt feelings of loneliness and isolation during quarantine. A study by Termorshuzien et al. (2020) found that participants attributed their changes in eating behaviors to lack of social support. However, Termorshuizen et al. (2020) found participants that reported greater difficulty with eating behaviors also reported a greater connection with family members and increased time for self-care, suggesting that family is just a portion of the social support an individual needs.

COVID-19 Anxiety and Body Image

COVID-19 not only changed individuals' eating behaviors and interactions, but also how individuals felt about their body. Fear caused by COVID created changes to individuals' body image as seen in numerous studies (Robertson et al., 2021; Swami et al., 2021; Vuillier et al., 2020; Castellini et al., 2020). Research among middle aged individuals in the UK found a significant association between body dissatisfaction and anxiety related to COVID (Swami et al, 2021). Another study by Vuillier et al. (2021) found that fear and uncertainty related to the pandemic were triggering for individuals trying to recover from eating disorders. Specifically, fear of loved ones' safety was triggering (Vuillier et al., 2021; Castellini et al., 2020), and was even a predictor of increased eating disorder symptomatology (Castellini et al., 2020).

Research has also found that lockdown could be a driving factor in the increase of body dissatisfaction (Robertson et al., 2020). This online survey in the UK found that women were more likely than men to report worsening body image after lockdown. Castellini et al. (2020) found that forced cohabitation during lockdown could contribute to the number of family conflicts an individual is exposed to, in turn increasing their eating disorder symptomatology. Individuals with past diagnosis of eating disorders had much higher levels of perceived changes in body image and eating (Robertson et al., 2021).

The key here is that COVID-19 impacted individuals body image not their body necessarily. A study by Keel et al. (2020) examined perceived versus observed changes to body weight among college students after lockdown. “The Quarantine 15” is well known among college aged individuals and conveys the societal idea that many individuals gained weight during lockdown (Keel et al., 2020). In this longitudinal study on female undergraduates, researchers found increases in perceived body weight and increased concerns about weight among participants at the end of the study, after lockdown. However, the participants were significantly more likely to have a higher BMI at the beginning of the study, before lockdown (Keel et al., 2020). Meaning that participants perceived that their BMI or body weight was increasing when it was decreasing. Robertson et al. (2021) examined this finding among individuals with past diagnoses; and found that individuals with past diagnosis of eating disorders had much higher levels of perceived changes in body image and eating.

Media and COVID-19

Researchers are currently trying to piece together what specific aspects of lockdown contributed to these changes in body image and eating habits among individuals. One commonly proposed culprit is the increase of social media during lockdown because greater exposure to media is already associated with greater feelings of worry and fear (Sasaki et al., 2020). There was found to be a statistically significant increase in the use of social media during lockdown in a survey on women in Spain (Vall-Roque et al., 2021). A meta-analysis that supports the previous findings found that many individuals experienced an increase in media consumption due to a lack of personal interaction (Cooper et al., 2020). Other researchers have found that this increase in screen time has been related to anxiety surrounding COVID and one's body image (Swami et al., 2021). Research has gone as far to suggest that limiting media exposure is a positive coping strategy in some instances (Vuillier et al., 2021).

Unhelpful social messages about COVID and eating disorders were seen as triggers rather than helpful information (Vuillier et al., 2021). In this study on individuals with self-reported eating disorders it was found that the movement of everyday interactions to an online format created a feeling of detachedness (Vuillier et al., 2021). In times of social isolation, the only way to connect is through the media and unfortunately isolation and increased media can increase the risk of eating disorders (Rodgers et al, 2020). The triggering nature of social media brings into question what these individuals are viewing on social media. A study by Vall-Roque et al. (2021) found that participants were following more appearance-focused accounts after the pandemic.

In a survey in the UK half of the participants reported higher appearance related concerns (Robertson et al., 2021).

Research found that this increase of social media use, specifically Instagram, was related to body dissatisfaction and drive for thinness among individuals 14-24 years old (Vall-Roque et al., 2021). This survey in Spain also found that higher usage of social media was associated with higher levels of drive for thinness (Vall-Roque et al., 2021). Rodgers et al. (2020) also determined that increased exposure to anxiety provoking media can increase eating disorder symptomatology. One example of the anxiety provoking media that resulted in increased risk for disordered eating was exposure to diet culture and ideal body content (Rodgers et al., 2020). "Quarantine 15" is another example of media that caused negative changes to body image, by increasing the pressure to engage in disordered eating (Cooper et al., 2020). In the beginning of lockdown reports surfaced that higher body weight was associated with higher hospitalization risk, resulting in increased restriction among higher weight individuals with disordered eating (Cooper et al., 2020).

However, social media is not the only media that was consumed during the peak of COVID-19. Video conferencing is meant to be our solution to social isolation, but it can be almost just as damaging. Researchers conducted an online survey in Australia to determine the effects of Zoom on individuals' dysmorphic concern (Pikoos et al., 2021). Researchers found that over a third of participants had new appearance concerns from being on video (Pikoos et al., 2021). Individuals who reported greater appearance concerns were also more likely to seek out appearance focused behaviors after lockdown, like waxing and Botox. Research also found that increase in video

conferencing can increase eating disorder symptomatology and risk factors (Rodgers et al., 2020). However, it is important to note that some research has found that for some participants telehealth greatly helped during these times (Termorshuizen et al., 2020).

Conclusion

Current literature regarding COVID-19 has shown how the conditions created during lockdown (increased isolation, change of routine, and increased media consumption) have negatively impacted eating behaviors and body image (Vuillier et al., 2021; Rodgers et al., 2020; Robertson et al., 2021; Phillipou et al., 2020; Nutley et al., 2021; Vall-Roque et al., 2021; Termorshuizen et al., 2020). Literature is primarily centered around individuals with current or past diagnosis but notes that all individuals regardless of diagnosis status experienced changes to their eating behaviors and body image during COVID-19 (Phillipou et al., 2020; Robertson et al., 2021; Pikoos et al., 2020). While there is some information regarding individuals without an eating disorder diagnosis, there is limited literature on how COVID-19 impacted eating behaviors on individuals with no previous diagnosis. Some studies include information on how women have been more severely impacted by COVID-19 in terms of eating behaviors and attitudes about self, but studies primarily focus on both genders (Robertson et al., 2021). Research has shown that COVID-19 impacted eating behaviors and body image, but limited research is done on how exactly COVID-19 has affected these. Following the literature I queried participants about social media exposure, perceptions of body image, how changes to routine impacted them, and various other topics that emerged during interviews. The current study adds to the literature by focusing on individuals with

no previous diagnosis of an eating disorder, and further examines the impact of Zoom on individuals.

METHODS:

I examined some of the vast effects COVID-19 has had on the minds and bodies of college-aged women, specifically by conducting semi-structured interviews addressing how living through the pandemic has influenced their body images, eating behaviors, and perceptions of self. As mentioned in the literature review there are numerous studies that focus on changes to eating disorder symptomatology for individuals who had previous diagnoses of eating disorders prior to the pandemic (Baenas et al., 2020; Termorshuizen et al., 2020; Castellini et al., 2020). The current study provides a unique contribution to the literature because it focused on individuals who had no previous diagnosis of an eating disorder. Previous literature highlights that changes to routine, media, and anxiety, caused by COVID-19, negatively impacted individuals mind and body (Phillipou et al., 2020; Rodgers et al., 2020; Vuillier et al., 2021; Nutley et al., 2021). The current study aims to expand previous research by examining both how these changes can produce negative and positive effects on the mind and body. The present study will expand previous literature by examining why or how these changes to eating behaviors and body have occurred and will provide more information about individuals without eating disorders in the context of body image and eating behaviors.

I conducted 15 semi-structured interviews on individuals who met the inclusion criteria: 18-22 years of age, an undergraduate student at CU Boulder, identified as

female, and having no previous diagnosis of an eating disorder. Those with a previous diagnosis were not included in the current study because of potential issues talking about sensitive matters without a trained professional and information on individuals without a previous diagnosis is a gap in the literature. The other inclusion criteria were chosen to ensure that participants did not have to disclose their diagnosis. Participants were able to simply say they did not meet the inclusion criteria. The age range was chosen based on the typical age range of a CU Boulder undergraduate student. CU Boulder students were sampled because of the convenience. The study focused on women because most individuals who agreed to participate identified as female. In the literature review some studies found that women were more likely than men to report struggles regarding eating regulation and worsening body image after lockdown (Robertson et al., 2021). However, this study focuses only on females because the sample size is on the smaller side making those comparisons more difficult and less reliable. If there were only one or two men in 15 interviews it would be difficult to have gender-based findings, as one or two men would be used to represent the entire male population within the inclusion criteria.

Interviews were conducted between October 2021-January 2022. Interviews ranged from 20-60 minutes in length, with an average of about 30 minutes. The length of interviews varied greatly due to the nature of the interview, despite the level of rapport I had with participants. Some participants would require numerous additional questions to get the full picture, while others were quick and organized with their responses. Some of the longer interviews came from individuals I knew outside of the study; these interviews may have been longer because participants felt more

comfortable going in depth about sensitive topics with me. Participants received a Zoom link after the scheduling of the interview over email. Verbal informed consent was obtained prior to the beginning of the interview and recording to ensure confidentiality and that participants knew the potentially sensitive topics that would be discussed. Informed consent was both presented on the screen and read aloud by the researcher prior to obtaining consent (Appendix A). Handwritten notes were taken during the interview to supplement the transcription.

The interview included 5 open ended questions that served to ignite ideas within the participants (Appendix B). Questions were related to quarantine, and different changes they have experienced because of quarantine. Participants were asked to reflect on their body image, sense of self, and eating behaviors throughout the pandemic. Questions resonated with participants whether they were quick to answer and had been thinking about the topic a lot, or if they had not given the topic much thought and took their time reflecting. These 5 questions allowed me to ask further questions to get a more in depth understanding of the individual. Follow up questions targeted changes to social support, routine, physical activity, and media consumption. Follow up questions were based on findings in the literature and things that seemed to consistently arise across participants.

Participants were obtained via convenience and snowball sampling. One way convenience sampling was used was when I made announcements in my advisor's classes, undergraduate Sociology courses, about the key aspects of the study. After announcements were made individuals in the classes were able to fill out a link that indicated they met the inclusion criteria and were interested in participating. Another

way convenience sampling was used was through recruiting participants I knew from classes and had heard of the study and were interested in participating. Snowball sampling was used because some participants were eager to participate in the study, making them also eager to share the word. Therefore, some of my participants came from other participants in the study.

Interviews were conducted over Zoom for privacy and transcription purposes. The interview contained some sensitive topics, so it was important for the participants to be able to talk in a safe space of their choosing. Interviews were also conducted over Zoom as a COVID safety precaution. I was in the same room and environment for all interviews, a quiet office space. Confidentiality was ensured by using pseudonyms when discussing the findings of this study. Interviews were stored on my password protected computer during the study and deleted once transcription occurred.

Interviews were recorded on Zoom, and transcribed using Otter, an audio to text program. Once I obtained the transcriptions, I began to code my qualitative data in NVIVO. Data was coded for themes present. Some of the important codes that emerged were changes to routine, body image, social setting, media consumption, eating behaviors, and sense of self. I then examined how these concepts were related to one another. For example, changes to body image were connected to changes to social setting, routine, and media consumption.

The findings of this study are generalizable to undergraduate females at CU Boulder between the ages of 18 and 22 without a previous diagnosis of an eating disorder, however; the findings are not necessarily applicable to groups outside of the study population. In the future more research like the present study should be

conducted in other populations. By conducting this study with men and women, findings on gender specific effects of COVID-19 may emerge. Future research could examine these findings in the context of other universities, to see if the findings of this study are specific to CU Boulder. Another route to examine is other age ranges, for example adolescents or middle aged, to see if the findings of the current study are specific to college-aged individuals. Perhaps, even to examine college-aged individuals who are not at a university.

ANALYSIS:

Body Image Related to Social Setting

Routine: Transition Positives

Breaking routine is something that has been shown to have vast negative effects on individuals' eating behaviors and body image (Vuillier et al., 2021 and Rodgers et al., 2020). However, many participants in the current study felt stressed from school and used quarantine as a much-needed break. Many participants said returning home “felt like a break in routine”. For participants losing routine brought about many positive changes, one being that participants had more time to spend on self-reflection. Based on my research self-reflection included participants slowing down and reflecting on their sense of self, time during the pandemic, and how they physically treat their body or body image.

One participant, Lyanna, felt that quarantine was a time she felt most connected to herself. For Lyanna her sense of self greatly increased towards the end of quarantine before returning to school in Fall 2020. Lyanna described that she spent much of the week leading up to school “going through a lot of memories in [her] head” and the ways in which it “shaped [her] life”. For Lyanna this was possible only during a time like quarantine because there were “no distractions”, for Lyanna specifically these times where there was a “lack of social surroundings” occurred in the later hours when nobody was around. The week leading up to the return of school was one of the times where she had a “very good sense of self because [she] was really reflecting on it”. Lyanna felt that “in the end” quarantine made her feel more “confident in who [she] was and what [she] wanted”, specifically “what [she] wanted out of life and how [she]

would respond to things". Iyanna felt that overall quarantine was a "good experience". Without a time when there were "no distractions" Iyanna would not have had the chance to reflect and become more confident in how she feels about herself and decisions.

Another participant, Georgiana, also gained a stronger connection to self and body during quarantine through more time spent on self-reflection. Georgiana was able to spend considerable time with family members cooking and trying out new recipes, this was due to the flexibility allowed by quarantine. Georgiana feels that during the pandemic she "learned how to take better care of" herself. Specifically, Georgiana felt that she got better at "cooking", "taking care of [herself], and pausing". For Georgina the pandemic was a "silver lining" because she felt that "school was kind of stressful". Online school provided Georgiana with "a lot more flexibility in [her] time" and was able to find things that allowed her to "enjoy [herself]".

Sarah was another participant who prioritized her health during quarantine. Prior to the pandemic, Sarah was simply "going through the motions" without incorporating things like "self-care, self-priority, and being appreciative for the little things", examining how she was feeling about them or why she was doing them. For Sarah life consisted of tests, parties, working, and being "happy go lucky", but she rarely examined "why" she would do these things. Sarah felt that the pandemic "forced" her to "slow down and prioritize [her] mental health". For Sarah, slowing down or herself reflection consisted of meditating, doing yoga, journaling, and going on walks. These types of self-reflection also kept Sarah from "sitting on [her] phone for hours" and helped her to "be more in touch with [her] body". Sarah's routine was the thing inhibiting her from taking time to reflect on herself and examine where she was at mentally. One participant Isabella felt

that the pandemic was extremely “emotionally demanding” and felt like she couldn’t even “live a normal life”, but now feels “less stressed and worried” than prior to the pandemic. The pandemic taught Isabella “not to take life too seriously” and opened her mind up towards a lot of things. Isabella realized that she did not need to take everything “personally”, and now feels more connected to herself. For Isabella being able to take a step back from “normal life” and reflecting on it ended up helping her mentality.

As noted above, numerous participants felt that the break in routine from quarantine allowed for more self-reflection. One thing I found among individuals who noted using quarantine as a time to reflect and examine themselves, was that they exhibited more self-awareness. Self-awareness was characterized by participants ability to easily recall and examine their behaviors, and how these behaviors may have been negative. These individuals were more self-aware of their fluctuating body image or eating habits and recognized negative thought patterns quicker.

One participant, Bianca, used quarantine as a “self-check in”. Bianca used quarantine to reflect and realized that she needed to be taking better care of herself. Prior to the pandemic Bianca lived a very routine life, and quarantine felt like a “break in routine”. Bianca also exhibited more awareness of negative thought patterns when recalling past emotions about self. Bianca felt previously that she had spent much of her time obsessing over the “evolution of her body”, without realizing that the reason her body was changing was because she was “growing up”. Bianca did not reach this level of self-awareness specifically during quarantine but felt that the “evolution of mindfulness” over the last year is what allowed her to finally realize some of these

negative thought patterns. For Bianca this evolution of mindfulness began with quarantine and was only possible because she had the time to do it.

Another participant, Cara, spent most of quarantine “thinking”. Cara felt she was forced to sit at home and examine some of her past and future life choices. Cara also exhibited more self-awareness, but on current behaviors rather than past ones. When denoting her eating habits, she mentioned that she is “definitely not eating as much as” she should. While Cara does not necessarily act on these thoughts, she does display greater self-awareness for eating habits. Prior to the pandemic Sarah felt as though she was living her life “for others”, but through slowing down during the pandemic Sarah feels as though she now can prioritize herself. During the interview Sarah was very aware of how social media and the phone in general influences her body image. Sarah mentioned that her phone allowed her to “disassociate” rather than take time to “be more in touch with” her body. Sarah is now very aware of the negatives of the phone for her and is better at going on walks or meditating to take a break.

During my analysis I also found that participants with higher levels of self-awareness also had higher Zoom percentages. At the end of the interview participants were asked what percentage of the time they were looking at themselves on the screen compared to the interviewer. So, individuals with higher Zoom percentages spent more time looking at themselves on the screen compared to the interviewer. Five out of the six participants that exhibited high levels of self-awareness had higher Zoom percentages. One participant, Anne, was extremely self-aware during the interviews. Anne expressed awareness for her current and previous negative thought patterns and is currently combating previous negative eating and exercise behaviors. Anne would

mention that she kept a food log during quarantine, while simultaneously explaining the irrationality of keeping said log. Anne also had a higher percentage of the interview spent looking at herself compared to me on Zoom. Another participant, Karen, exhibited self-awareness when talking about the content on her social media feeds. Karen recognized that “what I eat in a day” videos are damaging to one's mental health and that “everyone needs different” foods and amounts to fuel them. Karen also had a Zoom percentage on the higher side. Fay, another participant, was very aware when reflecting on past eating habits. Fay was clear not only with her behaviors, but how her behaviors were making her feel. Fay would often not eat during the day and then binge at night resulting in her having a relationship with food that revolves around guilt. Fay recounts that she “knows [she] shouldn't be doing these things”. She knows it is negative but feels as though it is a form of “self-sabotage”. Fay is still struggling with these thought and behavioral patterns but is clearly aware that they are negative. Fay also spent most of the interview looking at herself on Zoom. As previously mentioned, Cara experienced more self-awareness because of the pandemic. However, Cara had a Zoom percentage of 15, which was on the lower end. Cara attributed her lower Zoom percentage to being more comfortable with me, as we did know each other outside of the study. Cara mentioned that she would check herself occasionally, but most of the time was focused on the interviewer.

While having a break from routine has shown above that it can produce positive effects, so can gaining a routine. Routine often gives individuals something to look forward to. Isabella struggled with her mental health during quarantine and felt that the issues started to resolve itself when she had “something else that motivated” her. When

Isabella received a job offer abroad, she recalls that her “whole outlook changed”. She finally had “something new” and was “out of this terrible quarantine”. Isabella felt that having the opportunity to go to another country is what “pulled her out of [her] depression and also helped reorganize [her] self-esteem”. She recalled that she “finally did what [she] wanted” she had really wanted to travel and had “wanted to work in another country for a long time”.

Getting back into routine also forced some participants to reexamine their eating habits and behaviors. Participants realized that their current lifestyle may not be sustainable when quarantine ends and the demands of life increase. For example, one participant, Matilda, spent most of the summer “hanging out with a few friends” and “working in restaurants”, but didn’t feel that her time was spent “being that intellectual”. Matilda noticed a change in her body composition during this time, as she also was not eating as much as she should. When Matilda returned to school in the Fall, she quickly realized that her past diet was “not sustainable”. Over the summer Matilda felt that her diet was sustainable because she “had enough energy where [she] could function and operate”. When returning to school Matilda “learned [she] cannot eat that way in college” and that she “needs a lot of food to fuel [her] brain to think” and to “just talk to people”. She recalls thinking that “college is more draining, so [she] needs more food”, and that “in the summer that worked out” because she wasn’t consistently doing as many physically and mentally taxing things. Matilda increased her eating when returning to school and has found that food “is one of the things that keeps [her] motivated to study”. Bianca was another participant who realized her diet was unsustainable when gaining routine. Bianca got an internship over the summer which

required her to work 40 hours a week and felt as though it was “sink or swim”. Prior to her internship Bianca was in a “snacky habit”, she felt that this habit “dramatically changed” the summer her internship started. When reflecting on this change Bianca recalls that she “had to because [she] was working 40 hours a week”. This internship also came with set eating times so she felt she “had to eat a decent breakfast so [she] could make it to lunch”. Bianca also began to “pack a lunch” and eat a “real dinner” provided by her parents because she was home for the summer. The new routine for Bianca forced her to change her eating habits, and she has since continued with these. Bianca now finds it fun to cook for herself and puts her meals “down on a calendar and plans it out”.

Routine: Transition Negatives

Transition and changes to routine can bring about many positive changes in the self and body. However, changes to routine can also produce negative effects. Losing routine was a major stressor and highly impacted the ways in which many of the participants functioned. For many participants when quarantine began, they lost a routine that provided them with comfort, like social gatherings and exercise routines. One notable negative of losing a routine is a disconnect from self. Disconnect from self was characterized by a lack of connection or understanding of oneself and needs. For example, one participant noted that quarantine was a time where they didn’t “feel well connected to [their] own identity”, and another participant noted it was a time when they were “a little less connected to” themselves. One participant noted that during this time they weren’t “being super mindful” of where they “were at and how [they] were feeling”.

This disconnect from self also had vast impacts on eating behaviors and body image. Some participants felt that losing routine completely threw off how in tune they were with their body. This made it more difficult for participants to keep a balanced lifestyle. During quarantine Karen felt “just so bored”, she remembers that she “wasn’t working out” and that she “really didn’t have any motivation to be healthy with [her] body in any way”. Karen was not motivated to change her current lifestyle. During quarantine Karen would do what sounded interesting and not spend much time thinking about what was going to make her body feel good. Karen remembers “getting ice cream” and frequenting “the Dunkin drive thru like three times a week”. Karen was not the only one who experienced a lack of motivation during the pandemic. Chelsea also struggled with motivation to live a “balanced” or routine life. For Chelsea, “balancing also helps [her] keep motivation in each realm” of her life. Chelsea felt that “during quarantine” the balance she had created between exercise and eating had been completely “thrown off”. Chelsea felt that “when that balance gets thrown off...that motivation does too”. Chelsea's whole “mindset on” exercise “changed a lot” during quarantine. For Chelsea the balance she is describing is synonymous with routine. Bianca also felt as though the pandemic threw off her previous routine, “going home just felt like breaking routine”. Prior to the pandemic Bianca was eating in the dining hall, which consisted of “3 meals a day and a few snacks”. However, during the pandemic Bianca’s eating schedule moved to more of a “throughout the day eating schedule, which did not feel great”. Bianca attributed the negative change to her relationship with her body to this change in eating behaviors.

During this time of a high disconnect from self some participants noted that it was a time when they felt most connected to their family. Anne notes that during quarantine her relationship with others was “thriving” while her relationship with herself was still struggling. Even though Anne did not feel connected to herself she did feel connected to her friends and family. This is time she would not have gotten to spend with family and old friends otherwise. Georgiana also felt “more connected to [her] family” and “a little less connected to” herself. For Georgiana this was because she felt that her sense of self was different “at school” than “in family”. Georgiana felt that her sense of self returned to normal when she got back into “true college mode”. Georgiana felt that being in school helps her because of the “routine” it provides and the “consistency of seeing the same people” and “getting close with the same people”. Her sense of self is connected to school and the routine school provides. When quarantine began daily activities changed greatly, and the type of daily activities that went away were the ones that built a connection to self and peers.

Resources: Access to Activities

As mentioned previously, individuals' connection to self was negatively impacted by quarantine. Part of this is because individuals based their self-worth on things that they no longer had access to during quarantine. College towns like Boulder provide lots of social activities that all got taken away during the COVID pandemic. Mallory is on a sports team here at CU and is extremely connected to her teammates and the sport itself. For Mallory “her mental health and physical health are very connected”. When quarantine began Mallory found it difficult to continue being physically active without the

support or organization of a team sport. After a couple weeks of no routine, she noticed that her “mental health suffered”. When Mallory is training, she “feels really good about [herself]” and her “mental health is good”. Luckily for Mallory her family is very fitness and exercise oriented, so she was able to replicate the team environment at home after a few weeks. Noticing that Mallory’s mental health was beginning to suffer, the family began training for a triathlon that was later canceled due to COVID. In the time spent training for the triathlon Mallory noticed that her mental health began to improve, she felt that this was “maybe because she was just getting outside more”. However, when returning to school Mallory still felt that she had lost that “social life while being active” because her sport was not able to practice in the same way as prior to the pandemic. Mallory and her team were only able to practice “maybe once a week” and they all had to wear masks. Mallory was finally able to get back to regular practices in the Fall of 2021 and feels that practice “helps so much”. Mallory lost access to a sports team that caused her to stop her exercise completely, subsequently causing her mental health to suffer. It was only when Mallory had access to others that could help her stay motivated to exercise that her mental health improved.

lyanna also experienced a negative change in her mental health during quarantine. School provided a distraction from the outside world, and something to do when stuck in your home. Even though lyanna didn’t love school it gave her “something to do” which was better than nothing. For lyanna, “once school stopped and [she] was just sitting there” she remembers thinking “Okay, now what do I do?”. Once school ended lyanna didn’t know what to do with herself or her time and felt that she was “definitely pretty depressed”.

Georgiana also felt more disconnected from herself when the pandemic began. Georgiana is someone who has always valued her success in school, and during quarantine felt that she “wasn’t necessarily focusing as much as [she] probably could have”. For Georgiana “once [she] does well in school [she] feels more confident”. For Georgiana returning home felt like being brought “back to an old place” and that is part of why her “confidence diminished”. For Georgiana “a new setting kind of helps [her] confidence at least”. Not having access to this new setting negatively impacted Georgiana’s confidence.

Resources: Access to in person interactions/social support

During the pandemic many participants were left feeling isolated because so many of the participants activities centered around college. When quarantine began Cara “spent all [her] time at home” and felt that it was “very isolated”. Cara felt that her “mental health” was “more down than anything else just because you don’t have that same social interaction with your friends and going out to do things”. Cara mentioned this was especially hard “coming from Boulder where you go out and party every weekend”. When quarantine began Cara felt like it was “a really big change going from everyone to no one”. School had previously provided Cara with a social circle and social aspect of life leaving her very isolated when returning home. Sarah also felt socially isolated during quarantine, but it wasn’t as much of going from everyone to no one. Sarah recalls that quarantine was “a weird time, a lonely time”. When quarantine began Sarah was at a point where she was “struggling with college friends”, she was still nourishing and solidifying friendships with new college peers. She remembers feeling

“so lonely, like [she] had no friends, like [she] was so anxious”. Sarah had essentially been cut off from her social support as many of her friends “helped build [her] up more and support [her] more”.

This social isolation led to a decrease in social confidence for many individuals when social gatherings became acceptable again. Chelsea remembered her “freshman year [she] grew so much socially” and then she was “immediately sent home and blocked off from all social interaction”, or socially isolated. Chelsea remembers feeling as if she “took so many steps backwards”. This decrease in social confidence was clear among her first social distance hangout during quarantine. Chelsea remembers “sitting in this circle with [her] friends” and feeling like she, “couldn’t even get words out”. For other participants they didn’t necessarily feel as though their social confidence had decreased, but that they had found the more introverted side of themselves. Valentina felt that during the pandemic she did not lose “that kind of sense of self” in reference to her “identity as a student and as a friend” but “socially comfortable wise” experienced a great change. Valentina felt after the pandemic she was “still very much an extrovert” but felt that she had “introverted a little bit”. She felt that much of this change stemmed from “literally just not seeing people”. Upon returning to Boulder Valentina felt like she couldn’t “manage the social scene” because she felt like she “doesn’t fit in”. Sarah, who felt “lonely” during quarantine, also felt that she “found much more of like an introvert self” or an “introvert side of” herself.

For some individuals social support was a way of keeping intrusive thoughts in check. Valentina’s intrusive thoughts were able to circle during quarantine because there was nobody to reassure her. For Valentina her friends would boost her telling her

she is “beautiful and wonderful”. Not being surrounded by supportive friends, who “reassured [her] [she] was doing okay” is part of what caused Valentina to “introvert a little bit”. Friends served as a buffer to these negative thoughts for Isabella as well. For Valentina, friends telling you to “stop worrying” helped her realize that those thoughts indeed were negative. Without these types of social interaction participants body image and thoughts about self-suffered.

As seen above, social support decreased greatly for many individuals when quarantine began. However, for some participants quarantine simply changed the type of social support they were receiving. The workplace became a new area of social support. Fay, whose family was extremely cautious during quarantine, did not have access to her typical social support. Fay’s interactions with friends were limited to social distancing hangouts or instances when a mask could be worn. Fay, who must pay for her own groceries during school, needed a job during quarantine despite the risks. Work became Fay’s only source of social support, other than online interactions. Fay found herself forming much closer relationships with her coworkers than previously.

Many participants also took quarantine as an opportunity to bond with their family, that they never would have gotten before. This caused many individuals to feel closer to their family and more supported. Lyanna and her family found a way to keep quarantine interesting by instilling a “mandatory happy hour” and alternating who cooked meals. This allowed for Lyanna to grow closer to her family and gave all her family members something to look forward to. Becky also used quarantine as a time to strengthen the bond with family members. Becky went as far as to say she had “a lot of fun during quarantine”. Becky has a lot of siblings and they spent quarantine days doing

fun activities and learning new things together. Becky and her siblings got “a lot closer” during quarantine, simply because they had the time to. Mallory also used this time to form a stronger bond with her siblings. All of Mallory's siblings have graduated college and she felt that they would never have gotten the “chance otherwise”. If the pandemic had not occurred Mallory's family would not have been forced to move back home, and they would have never gotten this bonding experience.

Resources: Access to food choices

For many individuals returning home produced positive changes to eating and exercise behaviors. These individuals had more access to healthy eating, planned and prepared meals, and exercise routines. Georgiana and her family would cook together during quarantine. Not only did this help Georgiana to “feel taken care of” and supported, but she was also “learned how to take care of [herself]”. This “pause” allowed Georgiana to take many of “those habits and good exercise and eating habits with [her]” when leaving home. Fay’s family is very health focused when it comes to food, she is surrounded by clean and healthy eating. Fay recounts that the family would often buy “a bunch of healthy stuff and fruits and vegetables”. The idea of healthy eating has continued past the pandemic as she still is concerned with how healthy she is eating.

Despite regaining access to many of the social activities participants had been missing during the pandemic, some individuals reported having more difficulty with eating choices and exercise behaviors when they returned to Boulder. Some individuals had less funds at school than home and attributed that to their decrease in overall or

healthy eating. While Fay does have access to “healthy” foods at home, she does not have the same access when returning to Boulder. Since Fay must pay for all her own groceries, she is not able to spend the extra money on fruits and vegetables that her family can. Fay feels that grocery shopping is much “harder to manage” upon returning to Boulder. So even though Fay has an idea of what she should be eating, she does not always have access to them. Valentina also must pay for her own groceries and struggles to justify spending “four dollars on a box of strawberries”. When Valentina is home, she is not restricted in what she eats because her food is being provided by her family. Even if the participants want to change their eating habits, it is not always possible based on the resources.

Who the person is around

Participants reported changes in their body image and eating habits specifically in relation to who they were surrounded by. Some individuals were surrounded with individuals with negative self-talk or a heavy focus on their body image and had negative changes to their own body image. For some participants these individuals with negative impacts on their body image or eating behaviors were present when returning home, while for others they were present when returning to Boulder. This was a huge reason that some individuals felt that returning to Boulder was extremely negative towards their mental health. Mallory noted that in Boulder she feels as though she needs to “keep up” because there are a bunch of “fit people” in Boulder. Mallory was comparing Boulder to her hometown where exercise is not a priority. As a result, Mallory feels more confident in her body image when home. When Mallory is in Boulder, on a

CU sports team, she is surrounded by others who value fitness and therefore she is less confident in her body.

These negative impacts on body image were especially prevalent among individuals who spent high volumes of time surrounded by other women. Matilda moved into a sorority house the fall following quarantine. Matilda was thrust into an environment of individuals who followed strict diets and was also forced to eat around these people in the communal dining room. The simple act of viewing others with extremely restrictive diets led Matilda to question if she should be on as well. Matilda felt constantly viewing and talking about food and diet whilst comparing it to others body compositions negatively impacted her own body image. Fay also moved into a sorority house following quarantine, and not only did she examine others eating behaviors, but she felt hers were being examined. Fay felt as though she was being compared to the “60 other women who are tiny and beautiful”. However, Fay’s intrigue to disordered eating began with a roommate who had eating issues of their own. When Fay first arrived at college, she saw that other people were dieting and wondered if she should be too. Fay also attributes this comparison to others eating behaviors as a source of guilt surrounding food and in turn body image issues. Another participant, Taya, went to an all-girls school and felt similar “weird” feelings when comparing herself to her peers. While Taya does not feel it directly impacted her body image in a negative way, she did feel that body image was very prevalent in her life.

Since many individuals felt or feel that Boulder negatively contributes to their body image, many individuals also felt that leaving Boulder positively impacted their body image and concept of self. These participants felt that no longer being surrounded

by a “bunch of girls with eating disorders” allowed them to decrease their comparisons. Participants felt that if nobody was seeing them then it didn’t matter what they looked like. Fay felt as though she wasn’t even thinking about what she looked like because there was nobody to see her. Fay spent quarantine not heavily focused on her appearance. Becky was another participant who felt that she learned a lot about herself during the pandemic. Becky also was able to take a step back during quarantine and realize “probably no one else cares” what you look like. She also learned what she needs in a day to keep herself “happy, motivated, and positive”. Quarantine taught Becky that she has “to do what makes [her] happy and find the little things in life that makes [her] happy”. Becky got very close with her family during quarantine and felt if they didn’t care how she looked then nobody else probably does. Prior to the pandemic Becky felt that she was “mean to [herself]” and “would really pick out the little things that [she] saw were wrong”. Becky felt that “during the pandemic it almost made [her] feel more confident in [herself]”. While Chelsea did experience an increase in weight, her body image was not affected until returning to social interactions. Chelsea didn’t feel the need to change her exercise or eating habits during quarantine because she didn’t “even know when the next time” she was going to see people. Leaving Boulder provided Chelsea with an environment in which she didn’t have to constantly compare herself to her peers, improving her self-image, however; upon returning to Boulder Chelsea has adopted a new exercise and eating routine that has caused a decrease in her weight. For Chelsea, returning to Boulder meant returning to the constant comparisons. Chelsea's lifestyle is now based on what she values in her “day to day life” and is all about “finding the balance”.

Returning to Boulder put many participants into negative settings when it came to body image and eating behaviors. However, other participants' "negative setting" was returning home to disordered family members. Fay's mother has struggled with body image and eating behaviors throughout her life but were heightened during quarantine. Fay described her as someone who doesn't like how she looks and would eat an "apple for dinner". Fay would notice these behaviors and talk to her mother about them telling her she needs to eat more and not talk negatively about herself. This awareness did not prevent Fay from adopting some of these characteristics, as she often finds herself not eating much throughout the day. Chelsea also returned home to a negative setting regarding body image and eating behaviors. Chelsea experienced an increase in weight at the start of the pandemic, and this weight increase received many comments from her mother. Her mother would suggest helpful tips like "eating more protein" and some unhelpful tips like going on a "juice cleanse". Chelsea was aware that she had gained weight, but the comments from her mother did not motivate her to lose weight. These were especially difficult comments given Chelsea had previously struggled with eating behaviors and doing a "juice cleanse" was a triggering idea.

While some individuals' home environments during the pandemic were negative, some individuals returned home to receive positive influences on body image and eating behaviors. Isabella was fortunate to have a family that is hyper aware of disordered eating. So, when Isabella started displaying changes to her eating her parents took charge to help her. Matilda's grandmother had an eating disorder, so her mother is very cautious regarding eating behaviors. Matilda's mother was careful never to comment on "second helpings" or diets because she knew the effect they could have

on children. Matilda felt at times she was “censored” from eating disorders, which could contribute to her being highly influenced by her peers’ eating disorders when moving into a sorority house.

Body Image Related to Weight and Appearance

Body image is heavily influenced by an individual's social setting, but it is also influenced by the physical changes to the body. For example, some participants would speak about their body image only in terms of physical changes to weight and appearance. These participants would explain times of poor body image as it relates to an increase in weight. Then when they would explain times of good body image, they would attribute it to finally reaching their goal weight. For Valentina her body image was very connected to her actual weight. Prior to the pandemic Valentina had gained weight since high school, “like the freshman 15”. Valentina’s body image was suffering at this time, but she hadn’t thought much of it because she had “so much else going on”. When returning home at the beginning of quarantine Valentina was “the heaviest” she has “ever been”. Valentina remembers thinking “I don’t like my body; I feel gross and just bloated”. As a result, during quarantine Valentina started a diet and started “working out every single day” because she didn’t have anything else to do. At times during quarantine, she got “slightly obsessed with working out” and monitoring her eating. However, this was also a time when Valentina was confident and happy with her body, she was “super fit”. Valentina, who noted fluctuations in her body image, also noted fluctuation in her exercise habits from “lolls to go hard and go a lot”. Valentina had the goal to lose the weight that had accumulated before returning to school after quarantine,

once she met that goal, she had finally reached her “normal weight” which was the weight she was in high school. For Valentina changes to her body image were caused by actual changes to her weight, exercise and eating behaviors. Chelsea also experienced changes in her body image in relation to changes in her physical weight, rather than just perceived changes. Chelsea felt that “not seeing anyone during the pandemic made [her] put on the extra ten pounds”. It was a time where she “didn’t necessarily feel good about [herself]”. While Chelsea’s body image did not immediately change with weight gain, they did change with weight loss. Chelsea also notes that she has a “better relationship with food now” and has learned to “love eating” and “love cooking”. This change in weight was attributed to living a more balanced and healthier lifestyle which made it, so she lost “30 pounds the summer after quarantine”. Chelsea is an example of not only how body image is directly tied to physical appearance or weight, but also how weight and appearance was changed during the pandemic. Cara was another participant who experienced an influx in weight during quarantine, emphasizing how the pandemic and quarantine caused physical rather than perceived changes to the body. Cara felt that prior to the pandemic she was “really proud of where [she] was at ” and “walking a lot”. This shifted for Cara during the pandemic as she went to “no physical activity” and everything went “downhill”. The change in activity and “tendency of baking when [she’s] bored” contributed to her gaining “some weight throughout the pandemic”.

Matilda’s experience during COVID-19 highlights how physical changes to the body can occur and in turn cause changes to body image. Matilda notes times of negative body image in relation to how she looks, whether it is a pimple or a rash.

Matilda recalls times where she would cancel Zoom calls because she did not want the other person to see her pimple. Matilda often hyper focuses on these minute details and causes negative feelings by the self, but she is working to recognize when they matter as much. Matilda experienced a decrease in weight at a time when her eating was also low, but that did not stop Matilda from feeling good about her body. She felt as though she was back to her “body type in high school” and could be happy with it. Returning to her past body type felt “natural” and “normal”. Matilda has an extremely positive relationship with her body image but notes this is because she works out frequently and then can eat what she wishes.

Increase in Media Comparisons related to Body Image

COVID-19 produced vast changes in daily life, specifically vast changes to media consumption (Vall-Roque et al., 2020; Cooper et al., 2020). During this study every participant noted an increase in media consumption at the beginning of quarantine. Participants most noted increases in TV time, Instagram, and TikTok, none of which are typically used as communication platforms. Many participants also noted that the “ideal body” would frequent their social media platforms. Within the increase in social media usage there was also an increase in comparisons over social media, and this increase in comparisons had negative effects for the participants body image, eating habits, and self-esteem. One participant felt that a “huge” part of her social media consumption during quarantine involved “looking at other people’s posts and comparing [herself] to them all the time, even subconsciously”. These kinds of comparisons caused peoples body images to go “downhill” and feel bad about themselves. Many participants felt

“triggered” viewing social media and led them to think that they should “start doing that and stop eating this”

For many individuals social media became the only connection to the outside world. One participant, Lyanna, noted that her increase in comparisons on social media led to more comparisons after the pandemic. During quarantine Lyanna looked at others through social media rather than “being surrounded by them in person”. This led her to “compare [herself] a lot more after the pandemic”.

One participant, Isabella, noticed just how big of an effect social media had when her therapist recommended, she stop looking at it as much. Isabella recognized that a huge part of her “media consumption was looking at other people's posts and comparing [herself] to them all the time, even subconsciously”. This is part of why the type of media an individual is viewing is extremely important. One individual, Anne, struggled greatly with disordered eating and exercise behaviors during quarantine, as her past symptoms were exacerbated when quarantine began. Anne recalls that “if anything the pandemic made [her] get to a worse place” in her “obsessive” habits. Anne was extremely self-aware during the interview when reflecting on negative thought patterns. When reflecting on what type of media she was viewing she felt her feed “emulated” what she was thinking and doing. In Anne's case she was thinking heavily about her body, how she was moving her body, and what she was putting into her body. So, Anne's feed was made up of workout videos, yoga videos, and what I eat in a day video. Anne noted that during this media consumption she would be intrigued by some videos, while others were extremely triggering and made her “feel bad about” herself. Anne also participated in some of these media challenges. Her and her family members

would share images of themselves after workouts through an app called “Sweat”. While the app was meant to encourage each other, it had the opposite effect. Anne felt that this endorsed a competitive mindset when it came to working out, not only competitive against her family members but against herself. Anne felt as though she couldn't do enough, which is part of why most of the quarantine she spent doing hours and hours of exercise. Another participant, Cara, felt that their body image had gone “downhill” during the pandemic as it directly relates to increased media usage. Cara noted that she experienced an increase in comparisons and questioning if she should be losing weight like the individuals she saw on her social media. While Cara compared herself to others on social media heavily during quarantine, she also recognized that the individuals she was comparing herself to were not “real”. Rather these individuals were strategically created by photoshop and editing.

Another participant, Matilda, who struggled with body image during quarantine was viewing media that aligned with what she wanted. Matilda previously used social media as a form of creativity and inspiration, viewing fashion, art, and food. However, Matilda said that this changed during the pandemic and was no longer “encouraging growth”. Matilda felt that she began focusing too much on the material things. Matilda’s feed was also filled with individuals who fit the “ideal body”, a body that is little and toned.

One form of media that flaunted the “ideal body” were media challenges spread over social media and television. Media challenges became increasingly popular over the course of quarantine, and it was easy for participants to compare themselves to the millions of people participating. These challenges consisted of workout regiments,

journaling routines, and other ways to “better oneself” during the quarantine. One participant, Sarah, used quarantine as a time to reflect and get in tune with her body. For Sarah, this meant not spending time doing media challenges like workout regiments. Sarah, who also had increased media usage, began to question herself when she viewed these challenges. She began to think badly of herself and question why she herself was not doing said challenges. Sarah also was heavily comparing herself to popular influencers doing the challenges at the time and wondering why she didn't look the way they did.

Social media challenges excelled at making individuals feel like they weren't doing enough during quarantine. One participant, Taya, had a big increase in media consumption at the beginning of quarantine, and minimal changes to her eating and exercise habits. Taya mentioned that the individuals who were posting on social media were “romanticizing their lives' ' when there wasn't anything to be romanticizing. Taya is talking about the media challenges like the 75 HARD, where individuals would have to follow an extreme eating and workout regimen. Taya greatly questioned if she “should be doing that” in reference to the 75 HARD, thus causing a negative body image. Taya felt as though this was “triggered” by social media posts around July 2020. She felt that social media was now presenting “completely new people” and could not help but feel as though she should change herself too. During this time Taya was about to enter the college world and her social media had posts about the “freshman 15”. These thought patterns arising from viewing media challenges not only negatively influenced participant's body image but their self-image as well. Many of the participants who

compared themselves to media challenges also mentioned that they felt unmotivated and lazy during the pandemic.

However, it is important to keep in mind that some individuals greatly benefitted from these media challenges and interacted with social media in a positive way. Some participants used the media challenges to engage with their family members and other members of society. Numerous participants highlighted the trendy foods and recipes at the time to spark creativity in an otherwise dull time. One participant, Becky, happily recalled TikTok teaching her how to make “healthy brownies”. Social media taught Becky “that you can have these treats, and then make them healthy”. For Becky this was a positive interaction with social media, but it is important to keep in mind that Becky was not experiencing major difficulties with her relationship to herself during quarantine.

Some individuals noted that shifting their feeds to more body positive content improved their relationship with the self and body. Sarah and Anne struggled greatly with media comparisons and how they relate to their self-concept. However, social media was also one of the things that helped improve their relationship to self. Sarah and Anne noted that shifting to more body positive and self-love content helped them. Both individuals noted that this was a conscious thing that needed to occur, and it took work changing their social media feeds. Bianca was another participant who noted “using social media in a different way and following more body positive people”. This change in content on social media has helped Bianca to be more “mindful” and “take care of [herself]”. Another participant used social media to “spark [her] creativity”.

Of the nine individuals who experienced positive media consumption, four also experienced an increase in confidence during the pandemic. The other five who experienced positive media consumption did not necessarily experience a decrease in confidence. Instead, the majority are still working on their relationship with themselves and describe their confidence as coming in “waves”. One participant who experienced an increase in confidence, Becky, noted that the “pandemic made her feel more confident in [herself]”. Becky also tried many of the “new TikTok recipes and challenges” during quarantine. During the pandemic Becky realized just how much power she was giving to other people’s opinions of herself and was able to step back and realize her opinion is the only one that matters. It brings up the question of would these women have been able to make strides in their relationship to self if they had been bombarded by negative media. For some of the participants who gained confidence, positive media consumption helped increase confidence. Lyanna was another participant who experienced an increase in confidence after the pandemic, she felt she had a “good sense of self”. Lyanna used social media mainly as a means of “distraction” from the stressors of the outside world. Another participant, Georgiana, experienced an increase in self confidence after the pandemic even though she was in a dark place during quarantine. Georgiana used the media to find new recipes and things to do in an otherwise boring setting. However, Georgina did feel that a “new setting helps [her] confidence”. These participants who experienced an increase in confidence experienced an increase in media consumption, but the consumption was positive and that is the difference. Of the five individuals with an increase in confidence after the pandemic only one participant did not also have positive media consumption. The only

participant who experienced an increase in confidence during the pandemic, but had no positive social media usage, attributed their confidence to weight and appearance.

DISCUSSION:

COVID-19 caused disruption to daily life, which caused negative changes to participants' lives. One way this happened was through breaking routine. The current study found that lack of routine resulted in decreased motivation which is supported by the literature (Vuillier et al., 2021). Specifically, this lack of motivation was more extreme for college aged individuals due to changes in university routines (Vuillier et al., 2021). The current study echoed these findings through numerous participants reporting decreased motivation to maintain a “balanced” lifestyle due to change in routine, and some participants specifically feeling as though they had nothing to do when classes ended over Zoom. Break in routine was also found to result in an increased disconnect from self, which supported previous findings of disruptions to daily life resulting in decreased sense of control (Nutley et al., 2021). This disconnect from self further impacted the motivation to maintain a healthy lifestyle during the pandemic.

Change in routine has been shown to have major impacts on eating habits (Rodgers et al., 2020). Previous research has found an increase in restrictive diets and weight and shape concerns through limiting physical activity and disrupting eating patterns (Rodgers et al., 2020). The current study agrees with some of the previous research, I found changes to body image and eating behaviors due to changes in participants' daily life and routine. In the current study meal planning was found to be difficult for some participants when losing routine. This finding is supported by previous research, which found that meal planning is difficult when routine is removed even among the non-disordered population (Rodgers et al., 2020). When meal planning was possible it was found to be helpful when trying to establish a balanced lifestyle, which is

supported by research that suggests meal planning is key to support those with an eating disorder (Rodgers et al., 2020). However, there were also some contradictions, I did not necessarily find this change in eating behaviors to be an increase in restrictive dieting, or the change in body image to be an increase in shape concerns. Instead, I found that some participants had an increase in restrictive dieting, while others experienced increased snacking. I also found that some participants had increases in shape concerns while others had a decrease in shape concerns. One reason for this discrepancy is because the population is among individuals without eating disorders. When participants did have an increase in weight and shape concerns, they were not necessarily attributed to change in routine, but rather to change in social setting or media consumption.

COVID-19 greatly impacted the resources that participants had access to, which in turn had unique effects on their body image, sense of self, and eating behaviors. Some participants within the study felt that lack of routine exercise led to anxiety regarding their body image, which is supported by previous research (Vuillier et al., 2021). However, this finding differed from the literature as it was not present among all participants, and exercise played a big role in their body image for only a few participants. In the current study most participants reported feelings of isolation or a decrease in social support during the pandemic. The literature supports this finding, as previous research has found that during quarantine many individuals were left feeling isolated (Vuillier et al., 2021; Nutley et al., 2021). The current study found that social support can positively impact eating behaviors, as some participants felt that returning home was extremely beneficial and felt more supported. This finding supported previous

research which found that social support is key in managing and reducing eating disorders, and that many changes to eating behaviors are due to changes in social support (Rodgers et al., 2020; Termorshuizen et al., 2020). However, the current study added to the literature because some participants noted that social support can also have a negative effect. Specifically, participants felt that returning to Boulder, or social support, had a bad impact on their body image and eating behaviors. This further highlights how one's social setting can have the opposite effect of what is discussed in previous research. The current study also differed from the literature by suggesting that a change to one's social setting is what causes a change to eating behaviors. This is contrary to the idea that decreased social support causes a change to eating behaviors, as was found in the literature (Termorshuizen et al., 2020).

Research is somewhat split in terms of the impact of quarantines' social setting. As previously mentioned, participants' social setting changed greatly throughout the course of the pandemic, some noting positive and others noting negative changes. A finding supported by the literature was that some participants established a greater emotional connection to family members (Termorshuizen et al., 2020). While some participants grew closer to family members, others felt that family and being home was a triggering place. Literature supported these findings as some studies have found that forced cohabitation is bad and results in more fights among family members (Castellini et al., 2020). Some participants noted negative comments from family members contributing to their body image. The present study supported the contrasting findings already present in the literature, highlighting that more research is needed to determine the effect of social setting on one's body image and eating behaviors.

Little information regarding the positive effects of COVID, like improvement to body image or sense of self, is included in the literature. Termorshuizen (et al., 2020) found that among participants with greater difficulty eating behaviors there was also a greater connection with family members and increased self-care. The current study supports these findings, as many participants were grateful for the time they were able to spend with their families and form stronger relationships. While participants did note some increased instances of self-care, the majority of these were not related to one's physical appearance. Most participants "self-care" came in the form of self-reflection: meditating, journaling, doing more yoga. Specifically, participants felt that this increase in self-reflection was directly due to a break in routine, a positive to breaking routine that is overlooked in literature. One participant felt they "had a really good sense of self" because they "were really reflecting on it". Another participant "learned how to take better care of [herself]". The pandemic "forced" another participant to "slow down and prioritize [her] mental health". So, not only did participants make changes to their eating and exercise habits, but made overall changes to their mindset on life.

In the current study participants reported actual changes to body shape. However, the literature suggests that there were greater perceived changes to the body rather than actual changes to body shape (Keel et al., 2020; Robertson et al., 2021). Research even found that participants perceived their BMI or body weight to be increasing, but in actuality it was decreasing (Keel et al., 2020). Previous research on change to body weight is important to keep in mind when examining the results of the current study. The current study relied on self-reported data, so it is unclear if these changes were perceived changes or actual changes to body weight. Robertson (et al.,

2021) found that individuals with past diagnoses of eating disorders had much higher levels of perceived changes to the body. Since the current study does not include participants with past diagnoses, Robertson's finding should be less of a concern. If the changes noted in the current study are indeed perceived and not actual changes, then Robertson's finding would also apply to individuals without a diagnosis. However, if the participants' accounts were accurate, the current study is adding to the literature to show that some individuals in fact did experience a change in their body composition during COVID-19.

The current study noted numerous participants having negative feelings toward Zoom, but they did not express that it directly changed their eating behaviors. This adds to previous research which found that increased video conferencing can lead to an increase in eating disorder symptomatology (Rodgers et al., 2020). For participants, a change to eating behaviors and body image was more related to change in media consumption and social setting. However, some participants did note higher appearance concerns directly related to Zoom. At the end of the interview participants were asked the percent of time they spent looking at themselves on the screen compared to the interviewer, these were recorded as Zoom percentages. Participants who reported higher Zoom percentages also reported not liking the way they look on Zoom or not liking that they must have their camera on during Zoom calls.

In the current study, every participant noted an increase in media consumption at the beginning of quarantine. Previous literature supports this finding, noting a statistically significant increase in media consumption during quarantine (Vall-Roque et al., 2021). Numerous participants noted that social media was now one of the only ways

to connect with peers. This finding is supported by research which found that increased media consumption was one of the only ways to socially connect and was due to a lack of personal interaction (Cooper et al., 2020; Rodgers et al., 2020). The current study found that this can create feelings of detachment and is supported by the literature (Vuillier et al., 2021).

In the present study participants noted an increase in “influencers” and “fit” people on their social media pages during quarantine, with some having negative feelings regarding media challenges meant to promote fitness. Rodgers (et al., 2020) supports this finding by noting that exposure to diet culture and ideal body content can have a negative impact on individuals. Participants in the current study specifically noted negative feelings because of “Quarantine 15”. This finding is echoed in research, as “Quarantine 15” caused many negative changes to body image (Cooper et al., 2020). In the current study participants noted an increase in appearance focused accounts during the pandemic and is supported by previous research which found that individuals were following more appearance focused accounts after the pandemic (Vall-Roque et al., 2021). However, the current study adds to the literature by finding an increase in positive social media use after the pandemic for numerous participants. A reason for this difference could be that these interviews were conducted in the Fall of 2021 when participants could have had more time to change or reevaluate their relationship with social media.

In the current study, some participants noted that social media had a negative effect on their body image and mental health. The participants who felt these negative effects from social media were more likely to change the type of media they were

consuming. For some participants this involved limiting time spent on social media, which is supported by previous research which found that limiting media exposure is a positive coping strategy (Vuillier et al., 2021). However, the current study adds to the literature because other participants started following more body positive content instead of limiting exposure when noticing the negative effect of social media on one's health. While research has suggested that telehealth can be helpful during quarantine, there is limited information regarding how following body positive accounts can produce positive effects for body image as suggested in the current study (Termorshuizen et al., 2020). The literature suggests that increased media consumption led to an increase in body dissatisfaction and appearance concerns (Robertson et al., 2021; Vall-Roque et al., 2021). The current study explained this through the increase in comparison caused by an increase in media consumption. Participants felt that the increase in comparisons was what caused negative changes to their body image or eating behaviors.

In the current study, participants reported an increase in self-reflection due to a break in routine, highlighting one of the positive effects of breaking routine that is often not accounted for in the literature. However, break in routine was also found to relate to an increased disconnect from self in the current study. Disconnect from self is an important concept because it can influence motivation and ability to maintain a "healthy" lifestyle. The present study found a change in body image and eating behaviors based on change to social settings. The varying effect of social setting is important to consider because previous literature focused on how social setting and social support can be beneficial to one's eating behavior and body image (Termorshuizen et al., 2020). The findings further highlight that the effects of social setting on eating behaviors and body

image is dependent on the social setting the individual is in. In the current study increased social media use was related to an increase in comparisons. Previous research highlights how increased social media use can contribute to issues with body image and eating behaviors. The current study explains these issues with body image and eating behaviors through increased comparisons and highlights that appearance focused accounts were found to have adverse effects.

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APPENDIX:

A: Informed Consent

Title of research study: Sociology Honors Thesis

IRB Protocol Number: 21-0438

Investigator: Samantha Fikes

Purpose of the Study

The purpose of the study is to see how COVID-19 impacted individuals in various aspects of their life. We are looking to see how COVID-19 has impacted anxiety, perceptions of self, appearance focused behaviors, and changes to eating habits. The interview will be over Zoom and recorded for transcription purposes. In this interview participants will be asked questions regarding COVID-19, social media, social support, eating behaviors, and body image. Participants will be asked to reflect on various topics and how they relate to the COVID-19 pandemic.

We expect that you will be in this research study for 1 hour.

We expect about 15 to 20 people will be in this research study.

Explanation of Procedures

You will be asked to complete a semi-structured interview over Zoom, that is expected to take no more than one hour. The interview will be recorded for transcription purposes and destroyed after transcription.

Voluntary Participation and Withdrawal

Whether or not you take part in this research is your choice. You can leave the research at any time, and it will not be held against you. If you are a CU Boulder student or employee, taking part in this research is not part of your class work or duties. You can refuse to enroll, or withdraw after enrolling at any time, with no effect on your class standing, grades, or job at CU Boulder. You will not be offered or receive any special consideration if you take part in this research.

Risks and Discomfort

There is a risk that individuals will feel psychological discomfort when asked to reflect on their time when the pandemic began and quarantine. There is also a risk that participants will experience discomfort when asked about eating behaviors, body image, and social support during the pandemic.

Confidentiality

Information obtained about you for this study will be kept confidential to the extent allowed by law. Research information that identifies you may be shared with the University of Colorado Boulder Institutional Review Board (IRB) and others who are responsible for ensuring compliance with laws and regulations related to research, including people on behalf of the Office for Human Research Protections. The information from this research may be published for scientific purposes; however, your identity will not be given out.

There are some things that you might tell us that we CANNOT promise to keep confidential, as we are required to report information like:

- ***Child abuse or neglect***
- ***A crime you or others plan to commit***
- ***Harm that may come to you or others***

Questions

If you have questions, concerns, or complaints, or think the research has hurt you, talk to the research team at 512-944-3563, or safi0854@colorado.edu.

This research has been reviewed and approved by an IRB. You may talk to them at (303) 735-3702 or irbadmin@colorado.edu if:

- Your questions, concerns, or complaints are not being answered by the research team.
- You cannot reach the research team.
- You want to talk to someone besides the research team.
- You have questions about your rights as a research subject.
- You want to get information or provide input about this research.

Signatures

Please verbally indicate if you give permission to take part in this research.

B: Interview Guide

What did quarantine look like for you?

How would you describe your sense of self? What influenced this and why?

How connected do you feel to your body?

Before pandemic?

After a pandemic?

How would you describe your body image before the pandemic? What influenced this and why?

Before the pandemic?

During the pandemic?

After the pandemic?

How would you describe your eating behaviors during the pandemic? What influenced these and why?

Before the pandemic?

During the pandemic?

After the pandemic?

What percentage of this interview were you looking at yourself on the screen, compared to me? How do you typically feel on Zoom?