

**An exploratory study on the physical activity and dietary behaviours
of Iranian immigrant and refugee women in the United Kingdom**

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Abstract

This research considers the role of migration on the physical activity and dietary practices of Iranian migrant women in the United Kingdom. It takes into account previous studies that migration leads to poorer socio-economic status of women that limits their physical activity and food choices. Conversely, a study in Britain reveals that Iranians continue with their traditional Iranian food practices. This qualitative study was informed by social practice theory, which posits that practices depend on the integration of three key elements: materials, competences and meanings. The study participants were 22 first generation Iranian migrant women aged 24-64 residing in London. Data were collected through in-depth, semi-structured, individual interviews and were analyzed thematically. The findings show that for those women from traditional family backgrounds, migration corresponds with liberation from the social and cultural pressures in Iran and greater motivation (meanings) to adopt physically active lifestyles. Nonetheless, migration for the recent arrivals results in living with limited financial resources (materials) in the context of fragmented Iranian community in the UK. This leads to diminishing the women's motivation (meanings) to participate in physical activity (competence). Moreover, motherhood and childcare responsibilities (other priorities) limit their choices to use sports facilities and it prevents the women participating in moderate physical activity (lower competence). In relation to dietary practices, the multicultural food environment, affordable prices and widespread food stores (materials) coupled with the women's cooking skills and improved knowledge of healthy food (greater competences) result in practising a healthier traditional Iranian diet for the women. The application of social practice theory shows the dissimilar food infrastructure/resources compared with the resources for physical activity (materials). Moreover, the respondents attributed greater values (meanings) to food than physical activity that results in colonizing their energy, time, skills (competences) and budget to food especially amongst those living with family members.

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1. Iranian migrants in the West

1.1. Introduction

Desire for a better life, to gain more opportunities for oneself and for one's family often underscore the impetus for migration. However, migration is linked to many obstacles and often causes challenges for those who struggle to reconstruct their lives in the new environment. This thesis reveals how migration has both positive and negative impacts on Iranian women as they come to the United Kingdom (hereafter UK) seeking to create new lives for themselves. I initially began this study with a focus on obesity. This was due to the high prevalence of obesity and overweight in England with figures showing that approximately 57.2% adult women were affected (Department of Health, 2013). Obesity is a risk factor for some of the leading causes of morbidity and mortality including cardiovascular disease (CVD), stroke, type 2 diabetes, as well as some cancers such as bowel, breast and ovarian cancers (Gatineau and Mathrani, 2011; Bhopal, 2013; Bhopal, 2000). Obesity is a complex issue and related to individual, social, economic, and environmental factors (Department of Health, 2013). The prevalence of obesity related diseases including CVD, type 2 diabetes varies in each ethnic group. However, members of minority ethnic backgrounds are more likely to report ill health than the host population (Gatineau and Mathrani, 2011). They often have a lower socioeconomic status, which in turn put them at a greater risk of obesity and its associated diseases particularly in women and children (Gatineau and Mathrani, 2011). Within the UK ethnic categories, specifically members of South Asian communities present high prevalence of complications associated with obesity such as cardiovascular disease (CVD), type 2 diabetes, and hypertension (Patel et al., 2012; D'Costa et al., 2000; Whitty et al., 1999; Harding, and Maxwell, 1997; Nazroo, 1997).

Lack of physical activity and unhealthy diet are two key modifiable determinants of obesity (Stafford et al, 2007). In the absence of previous research on Iranian migrants' obesity rate and related practices - physical activity and diet, I relied on the evidence from other minority ethnic groups in Britain with reviews of literature indicating lower level of physical activity in black and ethnic minority (BME) groups compared with the White population (Gatineau and Mathrani, 2011). South Asians, in particular Bangladeshi and Pakistani women in the UK have been evidently showing lower level of engaging in physical activity and sport than their White British counterparts (Fischbacher, Hunt and Alexander, 2004; Williams et al., 2010). Research on the dietary practices of South

Asian people also suggest that the strong influence of cultural traditions and family expectations on food preparation and consumption play a major role in behaviour change in this group. Ludwig (2011) in understanding the cultural and social constructs of obesity among Pakistani women in Leicester found that they attribute weight gains to childbirth, stress, ageing and climate (Ludwig et al., 2011, p. 1842).

The above literature and the dearth of research on the health practices of Iranian migrants in the UK, women in particular, led the initial direction of this study which was centred on obesity and its determinants, physical activity and diet. I primarily sought to understand whether migration was a major driver on the occurrence of obesity and how the determinants of obesity, physical activity and diet, might be affected. Soon upon starting the data collection, I noticed that Iranian women participants were attentive to their body shape through food on their body weight with some who particularly controlled their weight through exercise. These perspectives are probably associated with Westernization of Iranian culture initiated prior to the 1979 revolution (Abdollahi and Mann, 2001). As such, I subsequently abandoned my research questions on obesity, still proceeded with my exploratory study on the physical activity and dietary practices of Iranian migrant women in the UK. These two practices, which I examined separately, were still relevant and important fields because of their relations to many aspects of individuals' life, including Iranian migrants, such as history, social, economic, culture, and health (Belasco, 1999; Salis et al., 2008) irrespective of obesity and body weight.

Physical activity improves individuals' health, well-being and life expectancy (WHO¹, 2011). Across the globe, however, adults do not perform sufficient level of physical activity (Bauman et al., 2012). Multiple interrelated personal, cultural, social, economic, community, environment and policy factors influence the physical activity of individuals (Sallis et al., 2008). To understand how migration affects the physical activity of first generation of Iranian women, the focus of my study, I need to contextualise their unique experiences prior to their migration to Britain, in particular the role of 1979 revolution on their physical activity. This is because after the revolution the country's laws were conformed to sharia law. As such, Iranian women have been obliged to wear hijab in public (Milani, 1992). To add to this complexity, all sports facilities have become gender segregated and have been mandated to be run by the same sex sports instructors, and

¹ World Health Organisation

coaches (Chehabi, 2003). Not only did these restricting policies but the involvement of the newly installed Islamic regime in an eight year war with Iraq, economic sanctions, and other political issues caused much more damage to the physical activity of women than did to men (Chehabi, 2003).

For many years after the revolution, the women's physical activity and participation in sport were affected by the shortage of neighbourhood sports resources (Arab-Moghadam et al., 2007). It does not come at surprise to come across many studies reporting low prevalence of participation in physical activity amongst women in Iran. The lack of interest of these studies in unpacking the underlying issue is evident, since they tend to lump the obstacles to engaging in physical activity of Iranian women under two generic categories of 'cultural' and 'infrastructure' issues (Arab Moghaddam et al., 2007; Ghafouri et al., 2012). Some qualitative researchers, however, have recently begun to give voice to Iranian women who identify the mandatory dress codes, hijab, as the main obstacle to their participation. The female participants stress that wearing hijab in summer make exercise an unbearable and unpleasant experience. This combines with the lack of availability of gyms dedicated to women negatively impact on women's exercise (Mirsafian et al., 2014).

Despite the sedentary lifestyle of women in Iran, they are still keen to have a slim body shape (Abdollahi and Mann, 2001) and tend to judge one another based on their body shape. This common phenomenon in Iranian society, is no longer an issue for those who left the country. The recollections of Iranian migrants in Australia indicated that migration not only liberated them from the social pressures for maintaining a slender body shape, in the absence of Iran government pressures on women's dress code and the availability of mixed gender gyms, they become much more motivated to engage in physical activity (Delavari et al., 2013). However, in another Australian study, Gholizadeh et al. (2011) in seeking to understand the reasons for the underused health services among some migrant women including Iranians find that excessive life pressures emanating from migration affect the migrant women's daily life. The focus group respondents in this study highlight that their poor English skills, lack of employment and financial insecurity are the causes for their marginalization with subsequent effects on their participation in leisure time physical activity. These two studies present contrasting themes that might be related to their methodological issues, in which the former only recruited highly educated Iranians and the latter only included migrant women from low socio-economic status.

Following on from these two studies, this dissertation aims to build a more robust picture around women and how migration might create more challenges for engaging in physical activity for some, while at the same time, release others to embrace exercise more fully.

Food practices, the other practice under investigation, are also important aspects to individuals' lives. It comprises a large industry, contributes to emotional and physical pleasure (Belasco, 1999), and represents cohesion and identity among groups and communities (Chehabi, 2003). At the same time, food can be the primary cause of illness and death (Belasco, 1999). Concerning the food practices of Iranian migrants in Britain, the only anthropological study, conducted nearly two decades ago in Manchester, recognizes Iranian women's aspiration to achieve continuity with their traditional cooking and domestic practices, which serves both men and women several benefits (Harbottle, 2000).

Historically, Iranians have consumed vegetables and fruits in abundance and had a very limited meat intake (Matthee, 2015). Since the 1950s, however, Westernization, urbanization, and advanced transportation led to major changes in the dietary patterns of Iranians (Esmailzadeh et al., 2007). Over the past decades, the accelerated dietary change gradually becomes a cause for concern among Iranian scholars (Ghassemi et al., 2002). They characterize the current dietary patterns of Iranians with high consumption of red meat, fast food, and soft drinks, as well as the high intake of oil, sugar, salt and carbohydrates from refined grains (Esmailzadeh and Azadbakht, 2008). Amongst very limited qualitative research on the dietary practice, Farahmand, et al. (2012) reveal the multifaceted issues surrounding the dietary patterns of Iranian women in the capital city, Tehran. The study underlines that the inadequate knowledge of healthy diet, lack of time especially among employed women, lack of availability of healthy foods and children's food preferences for fast food in shaping family diet as the major obstacles to eating a healthy diet in this group. Others draw on the other issues surrounding food in the post-revolutionary Iran society emphasizing the social aspects of food in Iranian families. For instance, Ghassemi et al. (2002) identify the frequency of family gatherings in the private spaces of people's homes with food at the center of the events as the major cause for concern given the widespread sedentary lifestyle of Iranian in particular amongst women. With the knowledge of the inadequate participation of women in physical activity, the drastic change in the food practices of Iranians after the 1979 revolution, and the dearth of research on the impact of migration on the physical activity and diet of Iranian migrant

women as the backdrop, it is important to open a new discussion on the dynamics within the Iranian community in Britain.

Iranian community in Britain has been described as invisible (Spellman, 2004) yet growing very rapidly (Full Fact, 2016). In line with the global Iranian diaspora², the formation of the community in the United Kingdom dates back to 1950s. Three waves of migration shaped the composition of the community in Britain. Each wave was triggered by different motivations and socio-economic conditions both voluntary and forced departures (Hakimzadeh, 2006). Demographically, the first wave of migration was mostly comprised of affluent Iranians with majority who were students from upper middle class backgrounds coming to the UK on student visas (Spellman, 2004). Around the early stages and immediately after the revolution several groups associated with monarchy fled the country (Hakimzadeh, 2006). The royalists' sympathizers mostly settled in London in the areas of Knightsbridge and Kensington (Spellman, 2004). Also, during the initial stage of revolution, members of religious minority such as Bahai's, Armenians, Jews and Assyrians fled the country (Hakimzadeh, 2006).

The second phase of migration took place after the revolution and comprised a large number of Iranians from various layers of the society leaving the country. This wave included liberals, socialists, academics, professionals, entrepreneurs followed by the young men who escaped the military service during the Iraq-Iran war. At this stage, many women accompanied with their families left the country. This was due to the initiation of various gender restriction rules against women by the Islamic government such as mandatory veiling, enforced obedient to male kin in the face of poor provision of higher education during the temporary closure of the universities (Hakimzadeh, 2006). Britain was not the final destination of many Iranians in the 1980s who would see themselves as sojourners passing through (Spellman, 2004). However, Iran's economic downturn and an escalation in the Islamic government's persecutions of the citizens for the political and religious orientations not only initiated vast number of Iranians leaving Iran, the sojourners ceased to see themselves returning home so decided to settle (Spellman, 2004).

² Oxford dictionary defines diaspora as 'the dispersion or spread of any people from their original homeland (<https://en.oxforddictionaries.com/definition/diaspora>).

The third wave of migration beginning from 1995 to the present included two distinct populations. One is the highly skilled workers - demonstrating the continuation of the previous pattern - and the working class migrants and refugees who held lower levels of education and less transferable skills (Hakimzadeh, 2006). This wave was triggered by Iran's economic downturn, poor human rights record, diminished opportunities, and the persistent tension between 'conservative and reformist divisions' (Hakimzadeh, 2006). The upward migration pattern from Iran reflected in the continuous rise of Iranian populations in the UK. The 1991 census recorded 28,000 Iranian born nationals, whilst the next census in 2001, estimated that 40767 Iranians have settled in England and Wales (Spellman, 2004). Probably part of the rise related to the asylum applications as the statistics indicated that between 1995 and 2004, Iranians submitted over 22000 asylum applications to the Home office (UNHR, 2005 cited in Hakimzadeh, 2006), placing Iran as one of the top ten countries of origins of the asylum seekers in the UK (Refugee Council, 2013). The majority of the asylum applications to the Home Office are rejected. For instance, in 2016, of the 39000 asylum application, 21000 were turned down although after appealing half were successful (Full Fact, 2016).

Despite the latest figure reporting nearly 70000 Iran born nationals being resettled in Britain (Nomis, 2016), some argue that drawing the exact figures of Iranians in the UK is far more complicated when considering the ethnic and national identity. This is because Iranians place themselves in wide ethnic categories ranging from 'Other' to 'Asian' and even 'White', with just over 34,000 identifying their nationality as Iranian (Srebreny and Gholami, 2015). The largest concentration of the Iranians is in London (BBC, 2005; Communities and Local Government, 2009) with some taking up residence in other cities such as Manchester, Birmingham, Brighton, Sheffield and Leeds (Communities and Local Government, 2009).

A report by communities and local government indicated that Iranian community are very well- integrated into the British mainstream society. Iranians appear to be comfortable socializing in different aspects of British secular culture (Communities and Local Government, 2009). The report, however, do not provide any information about the position of Iranian women in the UK; only acknowledges that the lack of women's support networks has left them in disadvantaged positions (Communities and Local Government, 2009).

The underlying reason for only focusing on women in this study is because women are more likely to be in charge of food preparation, household and childcare duties while evidence also suggests that migration can potentially lead to disruption of many aspects of life especially foods practices (Weisberg-Shapiro and Devine, 2016), that it reveals to be the case for Iranian migrant women in Australia (Gholizadeh, et al., 2011). In the context of migration, women have limited social support and more likely to encounter stress in dealing with everyday life (Gholizadeh et al., 2011; Persson et al., 2014). These conditions impose constraints on the decisions and motivation for participating in social and physical activities (Persson et al., 2014). With no previous research on the physical activity of Iranian migrant women in the UK, this research will shed light on the impact of migration journey and resettlement in the UK on various aspects of physical activity including the women's attitudes to, motivation, previous experiences of participation in physical activity and access to the physical activity resources. Duncan (2007) calls for qualitative research on physical activity, due to its relevance to social and cultural norms. Likewise, studying food practices is important as it directly related to one's daily life. As an interdisciplinary subject, food is related to various fields from nutrition, to history and economy (Belasco, 1999). With social practices as the guiding theoretical framework of this thesis, it remains to be seen whether social practice theory offers a better approach for exploring these two, physical activity and diet as two disparate fields, rather than combining these two into the obesity framework. Through the application of social practice theory, I expand the domains of this exploratory study on physical activity and diet to understand the influences of encompassing historical development, social, cultural, religious, and political orientations on Iranian migrants' practices of physical activity and food in Britain. Furthermore, I take qualitative approach as the method of choice for embarking on this study, with the key research question: 'What is the role of migration on the perception and experiences of physical activity and dietary practices of Iranian migrant women in London?'

In the following sections, I start the literature review by defining physical activity before examining the impact of migration on women migrants' physical activity. It follows to consider the dietary practices of migrants centered on Iranian migrant women residing in countries, outside Britain, namely in Sweden and Australia, where previous research has been conducted. Prior to embarking on the literature review, it is worth noting that I use 'migrant' as a generic term to include all groups of foreign-born nationals who enter a

host country³ unless the particular condition of migration, being a refugee for example, has a particular impact as a result of this condition. Because of the increasing number of asylum seeking Iranians in Britain, in this thesis, I include asylum seekers and refugees into my category of ‘migrants’ and do not discriminate against including any Iranian adult woman based on her immigration status.

1.2. Defining physical activity

Physical activity is defined as ‘any bodily movement produced by skeletal muscles that requires energy expenditure’ (Caspersen et al., 1985). This definition is irrespective of individuals’ gender, race, ethnicity and levels of income. The WHO recommends adults aged between 18 and 64 to perform at least 150 minutes of moderate-intensity or 75 minutes of vigorous intensity of aerobic physical activity or a combination of both types each week (WHO, 2011). To obtain the health benefits of physical activity, adults are advised to increase their daily activities through regular walking in particular brisk walking, cycling as a form of active travel and to increase their activity during their daily routines through taking regular breaks from sitting whether at home or work, taking stairs rather than using lifts and reducing TV viewing time (National Institute for Clinical Excellence, 2012).

Physical activity has several health benefits as it improves fitness, bone and functional health; reduces the risks of mortality and morbidity associated with cardiovascular disease (CVD), hypertension, type 2 diabetes, breast and colon cancers, depression and increases life expectancy. Additionally, it contributes to negative energy balance (by using more energy than storing it) and weight control (WHO, 2011). Nonetheless, across the globe, individuals do not perform sufficient level of physical activity for maintaining good health (Bauman, et al., 2012). As I earlier in this chapter noted, members of minority ethnic groups in the UK have demonstrated lower level of physical activity than their non-

³It is worth defining the different terms associated with migration. To begin with, a migrant refers to a foreign-born person who primarily holds foreign citizenship, and intends to reside in the host country temporarily or for a longer term. An immigrant is also defined as a foreign-born national who anticipates settling in the new country permanently (The migration observatory, 2017). Refugee is defined as someone who ‘owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable to, or owing to such fear, is unwilling to avail himself of the protection of that country’ (UNHCR, 1951). A key difference between a refugee and an immigrant is the absence of voluntariness in immigration (Phillimore, 2011; Korac 2009).

minority counterparts (Long et al., 2009). With no information on Iranian women who have resettled in Britain regarding their attitudes to and patterns of physical activity, in the following I review the available literature on the migrant women's involvement in physical activity that Iranian women participated in.

1.3. Physical activity of Iranian migrant women

Since 2007, a few qualitative studies have identified the major obstacles to physical activity of migrant women in the Western countries (Gholizadeh et al., 2011; Persson, et al., 2014; Delvin et al., 2012; McEwen et al., 2007; Caperchione et al., 2011). Across a majority of these studies, the most common cited obstacle to performing physical activity is lack of time due to household commitments and child-care duties. These issues are not limited to migrant women, since the host and migrant women share the constraints (Persson, et al., 2014). Close inspection of studies among migrants from Africa and the Middle East shows that migrant women are more disadvantaged in attending to their daily routines and responsibilities due to limited social support in migration contexts. This is related to the loss of support from extended families, relatives and wider networks, which negatively impacts on the migrant women's abilities to partake in leisure time physical activity (Persson et al., 2014; Caperchione et al., 2011; Gholizadeh et al., 2011).

Stress has also been cited as one of contributing issues to physical inactivity of Iranian migrants in recent studies in Australia. Among highly educated Iranian migrants, Delavari, et al. (2013) find that stress at the initial stages of migration caused migrants to adopt sedentary lifestyles, however, upon assimilation into the new society they felt more motivated to exercise. Stress is not experienced as a temporary phenomenon, however, in another study involving Iranian migrants. For example, Iranian, Turkish and Arab migrant women in Australia reveal that experiences of multiple stressors stemming from lack of social support in doing household chores and child rearing on a daily basis affect various aspects of their life including physical activity (Gholizadeh et al., 2011). The participants who underused cardiovascular health services, highlight that their husbands and significant others tend to express discouraging messages because they do not see any value in their spouses in joining a gym, that contributes to a lack of leisure time physical activity (Gholizadeh et al., 2011). Furthermore, the respondents of this study, mostly from low socio-economic backgrounds, find that integration into the Australian society to be difficult and stressful. They believe that the cultural differences related to child

rearing and marital relationship would make it hard to negotiate their position and rights with their husbands. These issues are compounded with their English language deficiency skills hampers their communication with their children's teachers or ability to assist with their children's homework. Struggling with various obstacles on a daily basis, couple with the women's limited coping strategies, lead to the feelings of isolation, unhappiness and frustration (Gholizadeh et al., 2011).

Similarly, several studies on Iranian migrants in Western countries indicate that multiple stresses in dealing with language barriers impedes women's ability to integrate into the host culture resulting in social isolation and negatively affect their mental well-being (Jafari, et al., 2010; Lipson, 1992; Dastjerdi et al., 2012). Manifestations of mental health problems such as depression in general populations has shown to be a deterrent in engaging in physical activity of adults (Bauman et al., 2012). There is, however, a visible gap in the literature on how stress related to migration might affect the physical activity of Iranian women in Britain. This is specifically important since the composition and demographic of Iranian population in the UK, with large number of refugees, differ from those of Iranian migrants in Australia, who are mostly professionally qualified skilled or family reunion migrants (Adibi, 2008).

Financial constraint is another well-documented obstacle to participation in leisure time physical activity across migrant populations (Lawton et al., 2006; Caperchione et al., 2011; Persson et al., 2014; Gholizadeh et al., 2011). Migrant women are more likely to be financially disadvantaged due to their higher unemployment rate (Gatineau, and Mathrani, 2011). Consistent with this evidence, Middle Eastern migrant women including Iranians in Australia highlight that how their financial restrictions limit the decisions whether or not to join a gym. For some, their husbands as the primary decision makers do not find the cost of gym justifiable or a necessity to be added into their daily household expenditures unless there is an emergent health issue underpinning the need (Gholizadeh et al., 2011).

There have been frequent references to the low participation of women with religious adherence, because of the Islamic requirement for modesty in clothes for women and lack of access to the culturally suitable and segregated sports facilities in Western countries. (Lawton et al., 2006; Caperchione et al., 2011; Persson et al., 2014; Grace et al., 2008; Gholizadeh et al., 2011). Contrary to these studies, Delavari et al. (2013) found that

Iranian migrants in Australia are satisfied with the mixed gender gyms as they could exercise with their partner or members of the opposite sex; something which is impossible in Iran. The participants of this study also stress that in the absence of pressures of Iran government obliging women to wear hijab in public, they realize that they are more motivated to exercise. Amongst other positive outcomes of migration to Australia from the experience of this group are access to green spaces such as parks and being able to observe people exercising in public venues; this inspire them to be more physically active themselves.

1.4. Dietary practices of Iranian migrant women

Oxford dictionary defines diet as ‘the kinds of food that a person, animal, or community habitually eats’. Hence, throughout this thesis, I use diet and food interchangeably. In the context of migration, systematic reviews of literature identifies it as the underlying driver of initiation of and sometimes sustained negative changes in dietary practices of migrants (Popovic-Lipovac and Strasser, 2015). Multiple aspects such as lack of social relations, limited budget, busier lifestyle, stress and loneliness, children and husband’s food preferences, food insecurity, and lack of access to the migrants’ traditional foods have been cited as major contributors of adopting a diet with high consumption of fat and sugar as well as reduced intake of fruits and vegetables (Popovic-Lipovac and Strasser, 2015). Further to this, certain eating habits are also attributed to migration; for instance, larger portion size as well as higher consumption of convenient food and takeaways (Popovic-Lipovac and Strasser, 2015). Other reported food patterns among migrant families include combining their traditional diets with aspects of Western diets; for instance, the inclusion of processed food, which are usually consumed by younger generation (Gilbert and Khokhar, 2008) amid parents providing more traditional fare.

This thesis now moves from the themes arising from the systematic reviews to the empirical evidence on the dietary behaviours of Iranian migrants in Western countries. The limited studies, whether quantitative or qualitative, mostly undertaken in Sweden and Australia echo the negative effects of migration on food and eating practices of Iranian migrants. Shifting now to Sweden, this thesis now reviews the outcomes of more empirically focused studies on migrant diets. Daryani, et al. (2005) in their quantitative research conduct clinical examinations, anthropometric measurements and questionnaires regarding their daily food intakes and physical activity practices of Iranian and Turkish

migrant women between 35 and 64 years and compared the findings with the Swedish counterparts. The Turkish participants present significantly higher Body Mass Index (BMI), larger waist/hip ratio, and abdominal obesity compared with their Swedish counterparts. A similar pattern is observable among Iranian women in this study, with both migrant groups showing high levels of physical inactivity. Daryani, et al. (2006) also examine the food intakes of the same sample and reveal a significant underreporting of energy intake and higher total carbohydrate intake in comparison with the Swedish study subjects.

Statistically, Iranian migrants in Sweden constitute the largest migrant group in the country. Moreover, the proportion of over 50, comprising about 12,000 people (Statistics Sweden, 2006) pose a significant burden on the country's health system. As such, Iranian migrants aged over 60 are targeted by two population-based surveys. In the first one, Iranian elderly men and women aged 60-84 are measured for their height and weight then compared with the self-reported weight and height of the Swedish counterparts (Koochek et al, 2008). All participants also report their physical activity level. The results of comparison of BMI of each group with their Swedish reference group show that only Iranian women (not Iranian men) have the highest mean BMI of 29.2%. This difference is observed, while both groups have the same level of once a week leisure time physical activity. The authors argue that low socio-economic status of elderly Iranian women might be responsible for their high BMI, since they have arrived in Sweden at old age and currently living on low pension income, which might affect their dietary behaviours (Koocheck et al., 2008).

A follow up study is designed to understand whether the changes in the dietary intakes of Iranian elderly women in Sweden can be attributed to their migration or related to their past dietary habits. As such, the same population-based sample of elderly Iranians in Sweden is compared with Iranian representative counterparts in Tehran (Koochek et al 2011). Using food frequency questionnaire (FFQ) for assessing their dietary intakes, the results indicate that elderly Iranian women in Sweden have significantly higher consumption of total fat, protein, and fibre including vegetables and fruits and all food items, whereas their carbohydrate intake is lower than the elderly Iranians in Iran. The authors conclude that the respondents' migration showing a mixed dietary patterns in which the higher consumption of fruits and vegetables, dairy products, but lower carbohydrate intake. However, on negative side, Iranian migrants in Sweden have higher

levels of fat intake in which the authors raise concerns for the implications this holds for cardiovascular disease.

Understanding the perceptions of female migrants about the host country's food, the aspects of their original food they preserve and how they preserve it appear to be a matter of interest to a team of researchers in Norway (Garnweidner et al, 2012). As such, they design a qualitative study in which 21 volunteers from 11 African and Asian countries including Iran participate. The findings indicate that a majority tend to cook traditional dishes regardless of being housewives or working women. Participants describe the food from host country as watery, tasteless, and boring due to the lack of spices, which they find as essential ingredients to any dish. On the positive side, some identify the Norwegian food as simple, time saving, quick and convenient for busy women, while others note that it is healthy or healthier than their native food because of their less greasy recipes. Participants manage to maintain their traditional food due to a number of factors such as the taste preferences of family members i.e., husband and children, availability of the ethnic food stores, sense of pride and identity attached to the food, and religious adherence, such as Ramadan. Interestingly, neither cost of foods nor the length of residence in the host country break the continuity of practising ethnic foods procurement and consumption; since women with long residence in Norway continue to cook and eat their native cuisine (Garnweidner et al, 2012). The authors conclude that the respondents adopt healthy eating diet by preserving their own diet and adding some healthy foods, such as fish, adopted from the host country. By adding spices, the migrant women tend to preserve the favourite flavours and tastes that remind them of home and their senses of identity (Sutton, 2001).

Unlike the Garnweinder et al.'s study (2012) cost is a major barrier to purchasing healthy foods amongst migrant women in Australia with low socio-economic status and lack of financial independency (Gholizadeh et al., 2011). Moreover, the elderly migrant women, in Gholizadeh's study, highlight that they encounter difficulties in following the recommendations of health professionals in cooking a meal with reduced salt and oil, since other members of family do not wish to sacrifice the taste of the food. As a result, the women prefer to cook a separate dish for themselves, but find it time consuming and unsustainable in practice (Gholizadeh et al., 2011).

Furthermore, low health literacy of some migrant women and lack of available health information addressed to their health needs has driven them to obtain information from friends, whom they describe as unreliable sources (Gholizadeh et al., 2011). Meanwhile, the study participants express their needs in receiving health information from health professionals, i.e. medical doctors provide them with the recommendations on how to adopt a healthy lifestyle such as exercise and weight loss. They simultaneously emphasize the need for linguistically simple and clear information about cardio vascular risk factors that is understandable for the non-native English migrants (Gholizadeh et al., 2011). Lack of access to certain vegetables and spices migrants generally consume pre-migration might contribute to their poor dietary choices. The findings of Ahlqvist, and Wirfalt (2000) suggest that Iranian migrant women have limited access to the leafy vegetables or find them to be expensive in Sweden, whereas they would consume them readily in Iran at an easily affordable price. Therefore, these vegetables have now been excluded from their diets. Subsequently, the authors assumed that the post migration dietary change with the lack of consumption of certain vegetables rich in folic acid and iron might have predisposed them to anemia. The authors however, failed to explore further whether the participants had replaced those vegetables with other similar and available herbs and vegetables in Sweden.

1.5. Rationale, aims and research questions

As I noted earlier, within the very limited literature about Iranians' in the UK, the report by Communities and Local Government (2009) stress the disadvantaged situation of Iranian migrants and refugee women in accessing women's supports groups. Further, it pointed to other adversities recent Iranian migrants encountered, for instance, the challenges of finding the right career adds to their marginal status. The issue is due to their poor English language skills and unfamiliarity with the work environment in British society (Communities and Local Government, 2009). Gatineau and Mathrani (2011) argue that information on the lifestyle practices of some smaller ethnic groups is scarce or non-existent. The classification of Iranians within the 18 UK's ethnic groups, being categorized as 'other Asians' (Office for National Statistics, 2015) adds to their invisibility as a group with specific needs. In response, others stress that reducing health inequalities among minority ethnic groups need to become a higher priority for research, policy and practice (Bhopal, 2012). The importance of physical activity and diet on many aspects of everyday life and the likely positive and negative effects of migration has been

revealed through this literature review on physical activity and diet. Given the increasing number of asylum seeking Iranians in the UK combined with a paucity of sufficient knowledge about Iranian women's physical activity and diet in Britain provides the rationale for conducting this qualitative study. By embarking on this, I aim to explore the multiple elements impinging on the physical activity and dietary practices of Iranian migrant, refugee and asylum-seeking women in the UK. It is worth highlighting that by focusing on only women, I take the advices of some scholars that when studying minority ethnic groups, it is important not to consider each group as a homogeneous entity, but to separate men from women and track their respective changes that resulted from their individual migration experience (Bohpal et al., 2002).

This chapter explained the importance of exploring physical activity and dietary practices in the 'invisible' community of Iranians with a focus on women. It began by explaining the role of the 1979 Islamic revolution on sedentary lifestyle of Iranians while explaining how Islamic dress code and lack of facilities, turned women to adopt sedentary lifestyles. It then presented the conflicting studies of physical activity of Iranian migrants in Australia referring to both the positive and negative roles of migration on the physical activity of Iranian migrants and especially women, which further complicates drawing the picture on the impact of migration for women's physical activity. It continued to focus on the food patterns of Iranians with drastic changes on food content towards increased consumption of meat, fat, sugar and fast foods with the underlying lack of knowledge and time, and through social pressures from children as drivers of the dietary shifts.

In the UK, the increasing number of asylum seeking Iranians and the disadvantaged situation of Iranian women in Britain, with the absence of adequate support networks further complicates understanding the impact of migration on Iranian women in particular. I reviewed the existing literature that revealed an array of obstacles to and facilitators for physical activity of migrant women in Western countries, in which Iranian women participated. The most important obstacles in the reviewed studies were lack of time due to childrearing and household duties, lack of social support, combined with other issues such as stress, financial constraints, and language barriers that further marginalize migrant women. The literature around food demonstrated the positive and negative changes and experiences in relation to diet among Iranian migrant women. The quantitative studies in Sweden indicated that Iranian middle age women had high BMI, low levels of physical activity and some underreporting energy consumption compared

to the Swedish counterparts. Some elderly Iranian women in Sweden presented higher fruit, vegetable and protein intake together with lower carbohydrate intake compared with their Iranian counterparts in Iran; this has been attributed to the differential effect of migration on their diet. Positive effects of migration on diet were revealed with migrant women (in Norway) combining their ethnic foods with some of healthy foods of the host country. Iranian migrant women encountered various barriers to maintaining healthy diet including limited access to some herbs and vegetables, financial constraints, taste preferences of family members and lack of knowledge of what constitute healthy foods. Drawing on the reviewed studies on physical activity and dietary behaviours of migrant Iranian women, I proposed a main research question and further five research questions to end this chapter. Consistent with the aims of my study, as mentioned earlier, my primary research question is: ‘What is the role of migration in the perception and experiences of physical activity and dietary behaviours of Iranian migrant women in London?’ Drawing on the significant aspects influencing the physical activity and dietary behaviours of Iranians in the Western countries, subsidiary research questions are as follows:

- What role does socio-economic status play on the physical activity and dietary behaviours of Iranian women in the UK?
- How do stress and other psychological consequences of migration shape Iranian women’s perceptions and experiences of physical activity and dietary behaviours?
- How important are English language skills for engaging in physical activity and in influencing dietary practices of Iranian women in the UK?
- How does the physical environmental shape experiences of physical activity and dietary practices of Iranian women?

It is to answering these questions that this thesis now turns.

2. Theoretical framework and methodology

2.1. Introduction

This chapter starts with introducing social practice theory; the guiding theory that informs the theoretical and methodological aspects of this study, in understanding the physical activity and dietary practices of Iranian migrant women in Britain. It follows to define other philosophical concepts, including individualism and communitarianism, as well as cultural constructs, such as collectivism and individualism and their applications to this study. The chapter then explains the details of the methodological aspects of this exploratory research including the study site, sampling methods and recruitment processes. In the next section, while emphasizing the importance of individual in depth interviews, the only data collection tool, I present the application of social practice theory to the interview guide. It continues to explain the data analysis method, thematic analysis, before describing the table of the participants' demographic. It ends with a brief guide on the upcoming chapters.

2.2. Theoretical orientation

In exploring the physical activity and diet of Iranian women in Britain, I have applied social practice theory and its dynamics, as I find it a useful theory for its encompassing and broad perspectives. Social practice, is a 'slim-line version of practice theory' (Shove et al. p. 82) and has roots in the works of Heidegger, Wittgenstein, Bourdieu, Foucault, and Giddens amongst others (Blue et al., 2016, p. 41). A common theme amongst all these theories is the assumption that 'practices are social as they are always shared' (Giddens, 1984, p. 2). Practices are not static, but emerge, transform, persist and disappear. One of the strengths of theories of practice is their attention to the historical development or the life course of any given practice. This is what I have applied in Chapter 3 by presenting the historical changes in the physical activity of women in Iran. Similarly, in Chapter 4, I demonstrated a historical review on the dietary practices of Iranians from the late seventeen century up to the present.

Practices have been defined as the interdependent relations between elements including forms of bodily activities, forms of mental activities, 'things' and their use, a background knowledge in the form of understanding, know-how, states of emotion and motivational

knowledge' (Reckwitz, 2002, p. 249). Shove et al. (2012) in an attempt to simplify this definition, propose that practices, such as cycling to work, walking as a means of commuting, eating dinner in the family context, depends on the ongoing integration of three key elements, including materials, competences, and meanings (Ibid). Materials, encompass objects, tools, hardware, consumer goods, infrastructures and the body itself (Shove et al., 2007). Competences: involves practical knowledge or know how of the situation, knowing where, when and how to perform a practice. Meanings, refer to the customs, norms, and embodied understandings of the social and cultural significance of the practice (Shove et al., 2012, p. 23).

In outlining the contributions of social practice theory to the existing body of knowledge, Shove et al. (2012) recognise the value and orientation of the behavioral theories that consider human's actions as the accumulation of millions of individual decisions. Moreover, they acknowledge the theories' emphasis on education and awareness of the consequences of human action as the necessary features for promoting health behaviours. Yet, they insist that these theories only emphasise on individuals without considering the complexity of social life (Shove et al., 2012). This is one of the strengths of theories of practice that moves beyond the individual levels of behaviour.

When it comes to individuals' choices, they support Giddens' structuration theory that emphasises two key elements: agency and structure. The latter, structure, is defined 'as recursively organized sets of rules and resources'. Whilst rules appear to create constraints, the social systems, at the same time, embed the activities of human agents (Giddens, 1984, p, 25). In 'analyzing the structuration of social systems' Giddens argues that human activities are not only shaped by their own efforts but also through the larger part of the processes that continue with the flow of routinized social life (Giddens, 1984, p. 25). This means forms of practical knowledge guided by structural features – rules and resources- of the social systems shape the daily human performances (Ibid). He believes within the structure, human agents, considered as social actors, exert their power 'upon rules and resources in the diversity of action contexts' (Giddens, 1984, p. 26). In spite of the support for the structuration theory of Giddens, Shove et al. argue that the theory demonstrates shortfalls such as the lack of objects and things. Furthermore, they believe Giddens has not clearly explained how the practices emerge, evolve, sustain and disappear (Shove et al., 2012, p. 23).

In addressing the above noted gaps, social practice theory seeks to bring to the fore three key elements organised within a thorough framework (Shove et al., 2012). It explains how the changing relationships between the elements lead to formation, transformation and continuation of the practices. Whilst the break in the links between the defining elements of any one practice, it disappears and that the changes are, in part, a consequence of integrative work involved (Blue et al., 2016; Shove et al., 2012). Social practice theory also postulates that practices evolve as the elements change. For instance, in the category of meaning, social practice is concerned with the way cultural norms, and images circulate, move, and whether the symbolic meanings of any practices remain stable over time (Shove et al., 2012, p. 24). This is particularly relevant to those participants who grew up with gender role expectations obliging them to spend most of their leisure time at home, owing to their gender.

One of the aspects of the theory is that practices do not exist in isolation but they interact, link together to form bundles of practices that are themselves routinely reproduced within the time - space of social life (Schatzki, 2002). Hence, it is important to pay attention to the ways in which bundles of practices develop (Shove et al., 2012). In applying this point to this thesis, in the following chapter, I will pursue to identify the time and spaces in which practices emerge, sustain or discontinue.

The other central point within theories of practice is the importance of individuals as hosts or 'carriers' who 'carry out' and sustain practices (Reckwitz, 2002, p. 256). More importantly, social practice theory seeks to understand the initial encounter of individuals with practices and how practices attract, recruit and expand through social networks and communities (Blue et al. 2016). On the essential role of social networks, Nick Crossley (2006) points to the size and the density of the circle of networks in allowing rapid interaction between members who establish patterns of mutual obligation and enable the concentration of energy and time required for performing the practice. This means that practice theory takes into account the variations within any given practice and how, where, how consistently, for how long, and on what scale it is produced. It assumes that a practice depends on changing populations of more and less committed carriers or practitioners (Shove et al., 2012, p. 66).

Allen Pred (1981) focuses on the life paths of individuals, the practices and 'dominant projects' they carry. From Pred's point of view, 'individuals' daily paths are structured

by projects and priorities that have consequences for the accumulation of competences and dispositions' (1981, p. 14). In outlining the adults' major projects, he emphasises that having children, changing occupations and migration all have a significant impact in setting the most important projects with implications for people's time, energy and efforts. Pred's analysis suggests that 'not all practices are equal, instead lives revolve around a handful of dominant projects' (Pred, 1980, p. 16). The dominant projects give rise to certain priorities that takes up the individuals' time and attention in some directions and not others. This has consequences for the skills and expectations they develop. As a result, 'individuals' lives are woven into the reproduction of dominant societal institutions' (Ibid, p. 16). Borrowing from Pred's points, Shove et al. (2012) also believe that practices compete with each other for time and effort. It remains to be seen whether there is any difference between the amount of time, energy, and resources the study participants dedicate to physical activity and the equivalent of diet. This thesis aims to understand whether social practice theory is a better framework to explore physical activity and diet as two disparate fields rather than combining them into the obesity framework. I will address this point in the discussion.

Social practice theory has been the subject of criticism. Welch (2017) posits that practice theories lack motivational and affective components required for performing a practice at individual level. He indicates that in the absence of a theory of motivation, practice theory has surrendered to social psychological theory for behaviour change based on motivation. In the importance of emotions and motivation in shaping everyday practices, Weenink and Spaargaren (2016) insist that emotions are energy-laden and embodied; at the same time practices produce and modulate emotional energy. Emotions both guide our practices in non-reflexive and implicit ways and simultaneously are intertwined with our evaluative capacities, which are themselves coordinated in practice. Welch (2017) explains that in terms of behaviour change programmes, practice theory is able to address 'social context' and 'material context' but not individual behaviour. Hence, he argues that social practice theory needs to engage with the motivational and emotional aspects of practices for social and behaviour change, not only material and engineering aspects of practices.

In addition to the central position of social practice theory to this thesis, there are other concepts related to the influence of community and culture on the daily practices of

Iranian women respondents. I begin with two social science terms, namely, Individualism and communitarianism (Dalacoura, 2002). Individualism represents ‘freedom from interference of any group or organization’ such as the state or government. In an individualistic society, individuals should be protected from obligations imposed by the state (Glass, et al., 2012). Individualists view outside influence as an intrusion and have a more inward-focused principle than those of liberals. Liberals, who place more emphasis on tolerance of others’ beliefs, values, and lifestyles, are critical of the individualistic ethos for too much emphasis on individual rights, simultaneously, have inadequate concern for social responsibilities (Glass, et al., 2012). Communitarianism, an opposing philosophy stands for the concept of community development. For instance, the promotion of the neighbourhood, the town, the village through fostering collaboration, assistance and help among its members. The unit of analysis within communitarianism is ‘small face to face community’, at the same time, it is suspicion of ‘big government’, nor is it concerned with promoting particular values (Dalacoura, 2002).

Culture, as one of the several components of a community, guides and dominates people’s behaviour, social norms, values and attitudes (Sinha, 2008). Two concepts ‘individualism and collectivism’, are the generic terms for characterizing cultural differences between nations (Schwartz, 2009). Hofstede (1980) as one of the influential figures in cross-cultural studies, over the past few decades, has endeavored to establish the cultural constructs of different nations (Sinha, 2008). As such, he asserts that collectivistic societies stress collective identity, emotional dependence, group solidarity, sharing duties and commitments, stable and predetermined friendship, group decision making and participation. Whereas, the individualistic societies promotes autonomy, emotional independence, individual initiative, right to privacy, pleasure seeking, and need to specific friendship (Hofstede, 1980). In his work reviewing ‘culture’s consequences’, Hofstede, (1991) proposes that in collectivist culture people are expected to be integrated into strong cohesive in-groups, and present unquestioning loyalty in exchange for lifelong and continuous support (pp. 260-261). In contrast, the individualistic culture features a society in which the relations between individuals are loose and everyone is expected to look after himself or herself and their immediate family. In testing his cultural constructs’ dimensions, Hofstede (2001) identified Iran as a collectivist culture but not in all dimensions. Iran ranks 41st amongst 76 countries for dimensions of self-direction and achievement that is often a representation of individualistic societies (Hofstede, 2001,

cited in Joshanloo & Ghaedi, 2009). In power distance, Iran ranks 58th of 76 countries indicating that the country reinforces status disparities that specifically links with social inequality. In another dimension, Iran demonstrates a high score for the ‘uncertainty avoidance’ (59 out of 76) signifying the country’s preference for clear rules and structure in interacting with others to avoid ambiguity and stress (Joshanloo & Ghaedi, 2009). The main theories and philosophical concepts, I have already explained, will be applied throughout this thesis in the interpretation of the data, the findings, and discussion.

2.3. Methodology

Methodology referred to the process of research (Creswell, 2013), ‘the principle of our inquiry and how inquiry should proceed’ (Creswell, 2013, p. 22), ‘the way we seek out new knowledge’ (Schwandt, 2007, p. 190). Methodology requires the researcher to make a number of decisions concerning different process of the research including recruiting the participants, selecting the sites, the data collection, and analysis methods, writing up findings and the role of the researcher. Methods are specifics, they are tools we use them to collect and analyze the data (Braun and Clarke, 2013).

Shove (2017) insist that there is no distinctive practice theory methodologies. She clarifies that it is the research questions that inspire the methodology. In other words, social practice theory is not bound to certain methodology, but it is the research question (s) that determines what methods can answer them. Blue et al. particularly advocate for capturing the detailed accounts of subjective experiences and narratives of the practitioners of a practice (Kohrman and Benson, 2011 cited in Blue et al., 2016). Given the limited knowledge about the physical activity and dietary practices of Iranian women in the UK, qualitative research is the method of choice for conducting this study as it consistent with the aims of the study, exploring the Iranian women’s lives in Britain with an emphasis on their physical activity and diet. Qualitative research is a suitable method of inquiry when little or no research has been previously undertaken in a group of people (Bryman, 2016). Of other strengths of a qualitative inquiry is providing a deeper understanding of social phenomenon, capacity to use naturally occurring data for uncovering the sequence in which participants’ experiences and practices happen (Silverman and Marvasti, 2008). It is exploratory, open-ended, rich, and gives voice to a group of people (Creswell, 2013; Braun and Clarke, 2013).

2.4. Sampling, site and recruitment

Having received an Ethical approval from the UEL research ethics committee in June 2015, I began recruiting Iranian adult women from September 2015 onwards. The study inclusion criteria was being female, born in Iran from Iranian parents, immigrated to the United Kingdom at the age 17 and older and currently aged between 24 and 64. The choice of age range was to ensure that the participants are able to recollect their memories and experiences in Iran, and compare them with that of the UK. Furthermore, it aimed to 'focus on prime-age adult since young adults typically have not established their post-adolescence residence' (Wen and Maloney, 2014, p. 125).

The study site was limited to London because of the concentration of Iranians in the capital for decades (Harbottle, 2000; BBC, 2005; Communities and Local Government, 2009). I initially began the data collection process by applying snowball sampling or networking. The first interviewee was a friend of mine who I interviewed in a local café in North West London, where high proportions of Iranians were recorded (Barnet Joint Strategic Needs Assessment, 2011). She then introduced me to other fellow Iranians within her network. This resulted in interviewing three Iranian women, one very recent asylum seeker who got refugee status. The other two were refugees with one who was naturalised. They were in their 30s and 40s whom all were residents of the London borough of Barnet. Over this period, I noticed that my friends' interpretation of my research aims, the interview questions, and my background could influence the potential candidates' response to the interview questions with the subsequent possibility of skewing my findings.

Hence, I decided to diversify my study sample's characteristics by applying maximum variation sampling, or heterogeneity. It aims to capture the common patterns across a wide range of variation within data (Patton, 2015). It begins by creating a sample of participants with diverse demographics from various geographical sites, age, different stages in career, institutional memberships, and public visibility (Patton 2015). To achieve this the researcher is required to identify and select sites, and participants that are different in characteristics (Creswell, 2013) to understand how a phenomenon is seen and understood among different people, in different settings and at different times (Patton 2015). To apply maximum variation sampling, I first created a database comprised the

most active Iranian charities, a number of Iranian schools, mosques, and began to visit them. I communicated with the stakeholders about my study, distributed the study flyers also placed the study adverts in the locations with high population of Iranians. This stage took three months and ended by interviewing six participants mostly well-established Iranians in their 30s, 40s and 50s with a wide range of residence in the UK from 10 to 40 years.

In the third stage, my recruitment strategy focused on filling the gaps in my study sample. That means I recognized that the views of Iranian women in their 20s, and 60s, those with very young child, and practicing Muslims were still absent in my exploratory study. To find suitable participants, I visited some Iranian schools, charities I had not visited in the previous stages and a Farsi speaking mosque. With regards to the participants geographical locations, they were scattered across 12 London boroughs including Barnet, Brent, Ealing, Kensington and Chelsea, Hammersmith and Fulham, Islington, Enfield, Hillingdon, Lewisham, Merton, Havering, and Wandsworth.

2.5. Data collection

Interviewing is a suitable data collection method within interpretive methodology that involves in a dialogue between the researcher and those with whom s/he interacts with the aim of constructing meaningful realities collaboratively (Angen, 2000). In keeping with social practice theory in capturing the details of the practices of physical activity and various aspects of food among the study participants, semi-structured interviews were the main vehicles for data collection. Interview is the most appropriate research technique where the aims of the research is largely exploratory, involving the examination of feelings and attitudes (Gray, 2009; Kvale, 2007). It is also the most favoured technique where respondents are not fluent in the language of host country or have difficulty with the written language (Ludwig et al., 2011; Gray, 2009).

The interview guide used drew from the literature review and research questions. I used open-ended questions asking the broad context of migration, with the aim of putting the participants at ease with the topic, giving them time to reflect on their daily routinized life in Iran. I also paid a great deal of attention to their life in Britain. During the course of interviews, I noticed that the legal status played a role in the respondent's level of disclosure especially about the purpose of their migration to Britain. For instance, those

who initially applied for an asylum to the UK government would usually skip answering this question – How did it happen to come to the UK? This was observed specifically for three respondent who remained silent for a while, also two other participants changed the subject to their life history, explaining their personal experiences in the early months/years of migration. Whereas, the participants who came from legal routes - student, work or spouse visa – were willing to talk about the purpose of their migration in details.

The application of social practice theory to the interview questions was to explore a wide range of related practices and contexts to physical activity and food. As the interview guide indicated, I began with broad and non-specific questions about everyday routines seeking to understand the meaning they attached to physical activity both in Iran and in Britain (meaning). For physical activity, I primarily paid a particular attention to the respondents' social context to understand whether and to what extent their social network in Iran played a role (meaning related to social significance of physical activity). Focusing on their life in the UK, I invited the participants to express their perception and experiences of communications with the members of Iranian community and host society and whether this aspect had any impact on their physical activity or in wider circumstances. In keeping with social practices, I pursued to understand whether migration broke, continued the previous practices or initiated new practices, also sought to understand why and how it happened.

Within the interview guide, I included a number of questions regarding the Iranian women participants' viewpoints of their neighbourhood characteristics as the representations of their physical environment (materials), both in Iran and the UK, and how it influenced their daily practices of food and participation in physical activity. These aspects took a lengthy time during the discussions where some new arrivals spoke of their differing access to the sports leisure centers in both countries. Several other neighbourhood characteristics such as safety, street's pavements, and public transport and the role of climate in Iran and the UK on the study respondents' physical activity occupied a significant time of the interviews. Although during the interviews many had already identified the obstacles to their physical activity in both Iran and Britain, I encouraged them to suggest solutions for improving physical activity of women.

I followed similar pattern when exploring the daily food practices by covering variety of contexts. For instance, I made several questions about their daily food routines, eating habits, food preparation and the frequency of daily meals. Negotiating food within the context of family was a detailed part of the discussions. Similar to physical activity, the food physical environment, for instance, access to the variety of foodstuff and the participants' shopping practices were also the matters of my interest. I encouraged the participants to draw on different factors by comparing their socio-economic status in Iran and in the UK and whether it influenced their daily food practices. I particularly intended to understand how migration might affect the participants' current patterns of food-preparation and shopping. I also explored the participants' view of the role of migration on their knowledge of a healthy diet, the presence any obstacles and facilitators of maintaining a healthy diet since their resettlement in Britain (see Appendix E).

Although the Iranian women participants were from a Muslim majority country, I purposefully avoided including any religious-related questions in my interview guide. This was due to the Iran post-revolutionary authoritarian regime, in which an ideology, i.e. 'Islam' has absolute supremacy over the public life (Chehabi, 2001) that resulted in politicizing religion in Iran, as I explained previously (see pp. 6-8) and made a vast number of Iranians flee the country (Hakimzadeh, 2006). Hence, I avoided asking any questions hinting the respondents' religiosity assuming that it potentially could provoke anxiety and a sense of distrust to my purely academic exploratory study. To address the issue, I recruited four participants from one of the London's mosques to ensure that the voices of this group was presented in my study. With this approach, I simultaneously included the Iranian practising Muslim women specifically those wearing hijab, although in minority (Gholami, 2017), about any aspects of life in the UK that could influence their participation in physical activity, the mainstream mixed gender sports facilities and access or lack of access to the certain foods; halal.

The length of the initial interviews varied from 21 (for two interviewees who agreed to be interviewed in their lunch breaks at work) to 95 minutes with the average of 56 minutes. Of 22 initial interviews, 17 were conducted face to face within the participants' locality at various cafés, schools, charities and a park and five were carried out over the phone upon the participants' request.

To increase the validity of the data, I sent four transcripts to the interviewees who agreed to read them and comment. They subsequently did so and sent them back with three who were satisfied with the transcripts but one requested to delete the repeated words/phrases, which I did so. Moreover, I conducted follow up interviews with those who could add more descriptions, explanations and interpretations to their previous account (Salkind, 2012). Those who took part in repeated interviews were willing to be contacted more than once, share their views, and had some ambiguity in their initial interview I might have missed to probe. Follow-ups included nine brief interviews with six participants (see table 1) conducted over the phone in Farsi. Prior to the telephone calls, I texted them, got the permission to make a phone call, then over the phone, I explained the purpose of contact and that I would be making notes of their comments. As such, they tended to speak slowly, that would allow me to write down what they were saying. The lengths of the follow ups were between 10 and 25 minutes. Comparing the initial interviews with the follow ups, although the participants added more explanations and interpretations to their previous account(s), it was the case, at times, to give contrasting accounts with what previously said.

As I was conducting the interviews, I would simultaneously transcribe them verbatim. With ten interviews in English, the remaining twelve participants chose to speak in Farsi, despite they had studied and obtained a university degree in the UK or worked here for some years. They were allowed to choose the language for the interview to ensure that the interviewees were comfortable articulating their viewpoints, and experiences that added to the richness of the data. As a native Farsi speaking Iranian, I personally took the responsibility of transcribing and translations of the Farsi interview recordings. In doing so, I initially transcribed the Farsi interviews verbatim, then I analysed and interpreted the data from the Farsi transcripts, before personally translating them to English. Translation of the Farsi transcripts was not without its challenges. As with any other language translating words and common phrases which would carry the same meaning in another language was difficult. In some occasions, finding the right translation required me to use several sources. For instance, during the interview, I asked one of the participants, Shayeste, 'Do you find any barriers to the physical activity of women in this country?' She laughed and answered 'No, you have to have 'gheirat' and set some time to do it'. To find the equivalent word for 'gheirat' I consulted Farsi to English dictionaries, which showed several meanings such as 'jealous, envy, and brave'. However, none of these accurately conveyed what Shayeste meant in this context. I then enquired from my

fellow Iranians in Iran without much help in reaching a conclusion but eventually after listening to the interview recording several times, and taking into account her body language I used the word ‘willpower’. This is one of the examples of the work required for finding the right word choice or phrase as close as possible to what they said in Farsi. Had I handed the transcripts to the commercial translators, I doubt they would have paid such a meticulous attention to the choices of words and contexts as I did.

2.6. Data analysis method

I employed thematic analysis as the data analysis method since it fits with different theoretical frameworks including social practice theory. The flexibility, clear instruction, and wide use of thematic analysis in the body of qualitative research (Flick, 2014) were the underlying reasons for choosing this method. Thematic analysis aims to identify patterns of meaning which provides a rich description and analyzes the subjective meanings (Flick, 2014). Hence, it is an appropriate method for my study methodology.

With thematic analysis, the study’s data analysis method, I followed the recommended stages developed by Braun and Clarke (2006) for interpreting the interview transcripts. They include familiarisation, ‘generating initial codes’, ‘searching for themes’, integrating them to make broader themes, defining themes, and producing the report (Braun and Clarke, 2006, pp.16-20). I began analyzing the data once I conducted the first interview by transcribing it verbatim that was the case for the following interviews. Since most of them were conducted in Farsi, considering they had choices to be interviewed either in Farsi or English. Transcribing the individual in depth interviews word by word or verbatim, I listened to each interview recording back and forth several times. Through this process, I was gradually familiarized with the content of the data and began to notice some patterns.

Familiarization is the first stage of data analysis that entails reading and re-reading the transcripts several times to understand the general views of the participants’ comments. During the course of repeated readings, the analyst will start noticing some patterns (Braun and Clarke, 2013). One of the frequent patterns I noticed about physical activity was the impact of a company in boosting the participants’ motivation and how the loss of social network as a result of migration subsequently diminished the level of participants’ physical activity in the UK. Familiarisation described as an active stage achieved not only

through repeated readings we endeavor to understand the participants' views and practices, it moves beyond the face value meaning of each words. To achieve this goal, the analyst needs to ask a number of questions while reading the data. For instance; 'How does a participant make sense of their experience?' Why does the participants make sense of this topic in this way and no other ways? How would I feel, and react if I was in this situation? 'What kind of world revealed through this account?' (Braun and Clarke, 2013, p. 205).

Having familiarized with the content of the data, the next stage is coding. Coding means attaching name to a segment or chunk of data that can simultaneously categorizes or summarizes that piece of data (Bowker and Star, 1999). Coding provide the first level of construction or assembling units of analysis. In this study, I used 'complete coding' that refers to coding or searching for anything and everything relevant to the research question(s) within the entire data set without concerns over the number of codes as I could later discard those irrelevant to answering the research questions. Following the thematic analysis guidelines, I tended to apply selective coding towards the later stage of the analytic process (Braun and Clarke, 2013). Having developed a number of codes, the analyst merge codes for constructing the broader patterns within data into meaningful themes (Fereday and Muir-Cochrane, 2006). Examining the codes and coded data and constant interaction with the potential patterns in the data means that the researcher does not 'discover' the themes but construct them (Charmaz, 2006; Creswell, 2013). The shape of work and final results can be different from researcher to researcher depending on their experience, history, and previous training that leads them producing different piece of work from the same data, hence, the final data analysis can vary in quality (Charmaz, 2006; Braun and Clarke, 2013).

The theoretical and knowledge frameworks the analyst brings to the analysis allow her or him to 'see' particular things in the data, interpret and code them in certain ways, this is why no two analysts will code in similar manner (Braun and Clarke, 2013). The other important point to follow in qualitative research is the role of researcher, and how their previous experiences and biases they bring to the processes of research might shape the findings and the final work (Creswell, 2013). In practice, the researcher is required to get as close as possible to the study participants, spend sufficient time in the field, and to generate a report based on a wide range of participants' perspectives and experiences. The researcher is not objective, but is part of the research and present one amongst other

perspectives to the research (Norman, 2008). Qualitative researchers bring their beliefs, experiences and assumptions into their studies. Hence, they are required to position themselves in the research by disclosing their own background, biases and how they might influence the research (Norman, 2008). They are also advised to constantly reflect upon their position, how their role, personal history, cultural membership, and ideological orientation might impact upon their data collection, interpretation, report and writings (Creswell, 2013). As such, I acknowledge that my position as an insider and outsider may affect the findings and final work. As an insider, I have been aware of various characteristics I shared with my participants. We shared a common language, having the same gender (woman) and we were born and brought up in the same country (Iran) and now all of us have been Iranian migrants in Britain. These common features between me (interviewer) and the interviewees have enhanced my understanding of the participants' physical activity, diet and daily practices in diaspora and in Iran. The other characteristics I have not shared with the respondents; for instance, my role as a researcher asking questions and their role as the respondents. These might have implications for the data collection process, approach to recruiting participants, conducting the interviews, data analysis, interpretation, and writing up the results (Creswell, 2013). Yet, I have been aware that I must, during the period of conducting the study, treat the participants with respect, follow the ethical principles outlined in my research ethical approval, taking into account their version of reality based on the social, cultural, financial and familial contexts they lived in.

Lincoln and Guba (1985) use the term 'trustworthiness' that advocates for sustained engagement in the field to establish credibility, to make sure that the findings are transferable between the researcher and the researched participants by producing a thick transcription of the data. Following Guba and Lincoln's advice, about transferability and as Creswell (2013) insist, I recognise that my role, as the analyst, and the biases I bring to the data. As such, to increase the trustworthiness of the data, I, not only conducted individual in depth interviews, but also conducted repeated interviews with six participants who were willing to be followed up. As I already explained in detail, I sent four transcripts to the participants and requested their feedback. Moreover, I frequently used my field notes while interpreting the participants' points, taking into consideration their body language, paying attention to a variety of changes happened in their daily life as a result of migration and their implications for the practices of physical activity and diet. I also often updated the findings upon conducting the follow up interviews.

Returning to the data analysis method, thematic analysis that despite its wide use and flexible guidelines has been also criticized for its shortfalls. Some qualitative researchers have labelled it as ‘something and nothing’ for its lack of theoretical foundation. The pattern based focus of thematic analysis limits its ability to show the continuity and contradiction within individual accounts. Furthermore, the constraints of thematic analysis in presenting individual voices become more visible when the datasets is very large. Thematic analysis is not a suitable method for the role of language in the data. Limited interpretative power is another constraint of thematic analysis that is more noticeable if the study was not theoretically based (Braun and Clark, 2013). With my moderate sample size and theoretically based study, I endeavored to reduce the shortcomings of thematic analysis.

2.7. Demographic profile of the participants

2.8. Table 1- Participants' demographics

Name	Age	Marital status	No children	Legal status	Education	Occupation	No years in UK	Annual family income	No interviews
Pantea	24	single	None	Student visa	Student	Student	4	?	1
Atousa	28	Married	One	British	Bachelor	Housewife	11	£30-45 K	2
Aida	29	Married	One	Spouse visa	Bachelor	Housewife	3	£15-29 K	2
Ellahe	30	Single	None	British	Masters	Charity worker	12	£15-29 K	1
Farzane	34	Separated	One	Refugee	High school diploma	Apprentice	<1	< £15 K	1
Zahra	35	Married	Two	Refugee	Associate degree	Apprentice	6	?	1
Farnaz	37	Married	One	British	Bachelor	Housewife	9	£15-29 K	1
Ghazal	37	Divorced	One	Refugee	High school diploma	Apprentice	5	<£ 15 K	4
Shiva	37	Single	None	Refugee	Masters' student	Student	11	<£ 15 K	3
Nastaran	38	Married	Two	Refugee	Bachelor	Apprentice	4	£15-29 K	1
Shayeste	38	Married	Three	British	Bachelor	Housewife	12	£30-45 K	1

Table 1. cont'

Name	Age	Marital status	No children	Legal status	Education	Occupation	No years in UK	Annual family income	No interviews
Parvin	44	Married	Two	Refugee/ British	High school diploma	Apprentice	11	< £ 15 K	1
Fateme	46	Married	Three	British	College leaver	Housewife	28	< £ 15 K	1
Nazanin	46	Married	Two	Refugee/ British	Bachelor	Apprentice	6	< £ 15 K	1
Samira	46	Married	Two	British	Bachelor	Voluntary worker	13	?	1
Tarane	50	Married	Three	Refugee/ British	High school diploma	Housewife	15	£15 - 29 K	2
Mahin	52	Married	Four	Asylum seeker	Middle school	Housewife	4	< £ 15 K	1
Mahvash	52	Married	Three	Refugee/ British	Bachelor	Recent graduate	10	£15- 29 K	2
Shahnaz	55	Single	None	British	Bachelor	Office worker	38	£15 – 29 K	1
Tahere	55	Widow/ divorced ?	None	British	Bachelor	Teacher	18	£15-29 K	1
Mitra	59	Married	One	British	Bachelor	Accountant	40	> £ 45 K	1
Rohi	64	Married	One	Refugee/ British	Bachelor	Retired nurse	15	£15-29 K	1

The participants' demographics have been introduced in Table 1. In the first column pseudonyms were used just to ensure the respondents' anonymity. The demographic information as shown in the table includes self-reported age, marital status, number of children, legal status, education, occupation, number of years in the UK, and annual family income. The data were gathered by administering a questionnaire (see appendix

D) filled by the participants at the end of the interviews. For those interviewed over the phone, I, on behalf of the participants, filled the questionnaire over the phone.

Age wise, eight women in their 30s constituted the largest group in this sample. The remaining were four in their 40s and six in their 50s, three in their 20s and only one in her 60s. The sixteen married women and one single mother had between one to four children, with seven women who had one child, five participants with two children, and four with three children provided a wealth of information and experiences of raising children in Britain. Four participants did not have any children.

With regard to the legal status, nine participants moved to the UK with student or spouse visa. This group seemingly encountered less difficulty adjusting with life in the British society nor did face financial hardships indicating that immigration status can shape the experience of migration in the host country. This might be due to their either pre-migration preparation or the support provided by their spouse or university that safeguarded them against the transition issues. Further, the migrants falling in this category had moved to the UK under or in their early 20s without children. Majority were young and interested in learning and speaking English and tended to adapt themselves with the host society. Of thirteen participants who applied for asylum in the UK, twelve were granted refugee status, and six were British citizens. Although not all faced enormous life adversities, some endured stressful events at the initial stage of arrival or over the course of resettlement. The magnitude of the emotional and psychological pressures was to the extent that some required long term psychological and medical supports.

In relation to education, twelve participants held university degrees or professional qualifications from Iran, whilst six others entered the UK universities regardless of any previous higher educational qualification from Iran. Four had high school diploma from Iran- British A-level equivalent. While two participants were high school leavers in Iran, one of them succeeded to continue her education in the UK. Despite the high educational level of the study sample, only five women were economically active. Whereas four women currently categorized as housewives, noted that they had given work to raise their very young child. Four participants were apprenticeship students in beauty or childcare courses. The family annual incomes of most of the participants fell either under £15 K or between £15-29 K demonstrating their limited income in particular those with young

children. However, not all appeared to encounter financial problems, as for some small families, £15-29 K annual family income would be sufficient for leading a normal lifestyle. Only three participants earned more than £30 K family annual income. Meanwhile three participants opted to skip this question.

The respondents had a wide variety of length of residence in the UK. They presented different experiences of migration as either an asylum seeker, refugees or well-established migrants. As far as the respondents' length of stay in the UK were concerned, they varied from 10 months to 40 years, with seven participants living under 10 years and ten who had between 10-15 years of residence in Britain suggesting that most of the study sample had less than 16 years of residence in the Britain. There were four participants who lived in the UK between 18 and 40 years, with three who appeared to be well integrated into the British culture, secured a job, fluent in speaking English, yet they tended to eat Iranian food, and often socialize with many fellow Iranians.

This chapter initially provided a detail of theoretical and methodological approaches of the study. I then explained the study approaches to sampling, snowball and maximum variation samplings. In applying these two sampling methods over three stages of recruitment in the only study site, London, I aimed to achieve diverse viewpoints and experiences from multiple participants. Then, I demonstrated the application of social practice theory in designing the interview guide including open-ended questions for conducting the semi-structured individual interviews. This study was comprised of 22 participants from diverse demographics coming from various locations in London. I explained the different steps in data analysis using thematic analysis from Braun and Clarkes (2006). I then drew on the characteristics of the study participants' demographics that was organized in Table 1. It highlighted the key features of the respondents such as age, education, length of residence in the UK and the annual family income. In the following, I have briefly described the structure of the upcoming chapters.

2.9. Chapter synopses

Chapter 3, examines the historical developments of physical activity in Iran from the 19th century up to the present. Through reviewed studies, I have shown the ambiguity within studies conducted in Iran, reluctant to provide a clear picture of the detail the obstacles to the physical activity of women. The study respondents, on the other hand, unpack the

complex interplay in the participation in physical activity that resonated with their socio economic backgrounds and the time of departure from Iran. The differing accounts of well-established and recent migrants are the representations of the country's developments towards establishing public and private resources for physical activity that subsequently diluted the social norms and gender role expectations stigmatizing women's participation in physical activity. It carried on by highlighting how Westernization of Iranians continued to influence the lifestyle practices of women in spite of the wearing hijab. The remainder is a comparison between the study findings and the relevant literature and ends with a summary of contribution of social practice and its dynamics into the chapter.

Chapter Four, follows similar pattern with the previous chapter, commencing with food patterns and consumption of Iranians from the late 18th century onwards. It detailed the food habits and meal contents of Iranians prior to Pahlavi and the role of Westernisation on staple food of Iranians. Drawing on the participants' reflection on the dietary habits and practices prior to migration or current practices of their family members there is a stark contrast between the accounts of recent migrants and some well-established participants who reminisced about the abundance of fresh fruits and vegetables in Iran. As with the previous chapter, comparing and contrasting the data with similar literature informed by social practice theory ends the chapter.

Chapter Five portrays the current dietary practices of Iranian women participants in Britain. The chapters focus on the role of migration in the continuity and changes of some food practices amongst the respondents living in the family context. The women's negotiation styles with their children about the types of food prepared and consumed and the division of food work at home between couples are discussed. The impact of migration on Iranian recipes among the participants is explained. The findings then are compared with the literature. The chapter ends with the contribution to the food practices of Iranian women in Britain.

Chapter Six covers varying domains in relation to the physical activity of Iranian women in Britain from perception to practices. It details the dynamics interplay with the practices of physical activity structured on the role of personal characteristics, family members and wider social context of observing British exercisers, and Iranian community in improving or prohibiting physical activity of Iranian migrant women. The chapter portrays the

detrimental impact of lack of sense of community cohesion within the community of Iranians in London on the physical activity of women. It ends with a comparison between the findings and the literature and the contribution of social practice theory to the chapter.

Chapter Seven explores the neighbourhood characteristics on the everyday practices of physical activity and diet among the study participants. It examines the roles of area's safety and street infrastructures; smooth pavements to the access to the physical activity resources. The chapter reveals the information seeking behaviours of Iranian women and its implications for awareness of Iranian women migrants of the available physical activity resources in the local neighbourhood. In examining the food context, I demonstrate the access to the chain supermarkets and ethnic food stores whether in the participants' locality or in other neighborhoods. As with other chapters, it ends with comparison of the findings with the literature, to present the contribution of social practice theory to the chapter.

In chapter Eight, I portray the role of respondents' demographic in particular: differing age in setting priorities in their daily life. It also highlight the importance of foods for some of midlife women in controlling ageing consequences. The focus of women suffering mental health, and health problems are discussed. I present the discrepancy between the findings and the literature before citing the contribution of social practice to the chapter.

Chapter 9 represents the detail of the discussion in which I answered the research questions in the light of the theoretical orientation and the philosophical concepts explained in this chapter. I then moved on to provide the contributions of this study to the body of academic knowledge when I compare the major themes from this study with the previous studies on Iranian migrants in other Western countries and/or other ethnic groups. This chapter values the application of social practice theory in revealing several nuanced themes on the physical activity and dietary practices of Iranian migrants rather than forcing the findings to fit into the preconceived themes discussed by other studies. I ends this thesis with outlining further agenda for the future research.

3. Mixed memories of physical activity in Iran

3.1. Introduction

This chapter begins with an overview on the historical development of physical activity in Iran with focus on women's participation in different types of physical activity and sports that dates back to centuries ago. The review highlights the role of Pahlavi dynasty's⁴ (1925-1979) Westernization plan in institutionalization of physical education in Iran in the twentieth century. The overview will then focus on the permutations related to the physical activity of Iranian women from the 1979 revolution up to the present. The chapter then presents the participants' testimony of the experiences of physical activity in Iran, which is a reflection of their social class and context, cultural norms, financial status, the time of departure from Iran. The narratives are also the representations of the absence or availability of state and private physical activity and sports facilities for women in Iran society. It also demonstrates the influence of Westernisation of Iranians' lifestyle after the revolution among urban educated Iranians. At the end, I bring the reviewed literature and the testimony of the Iranian women participants together to present the contribution of social practice theory and the role of community in understanding the variant elements shaping the physical activity of the women.

3.2. History of early development of physical activity in Iran

The geopolitical situation of previously Persia, currently Iran protected the country against many invaders. This was due to the geographical location of Persia in the junction of Asia and Europe through Iranian plains and in the South through Persian Gulf and Oman Sea to free waters (Gireshman, 2004, as cited in Afsari, and Sattar, 2012). In spite of its geographical situation, due to the presence of pathways within the mountains, Iran was still vulnerable to the attackers and suffered from innumerable invasions from all directions by so many tribes and foreign forces (Afsari, and Sattar, 2012). This reinforced

⁴ Pahlavi dynasty (1925-1979) were the last monarchical family ruling Iran. The Pahlavi regime was first founded by Reza Pahlavi (king/Shah in Persian) whose ruling took 16 years from 1925 to 1941. His son Muhammad Reza Pahlavi substitute him who came to throne from 1941- 1978 he left Iran shortly before the victory of the 1979 revolution. The revolution ended the long-lasting 2500 years of Persian monarchy in Iran (Haddad Adel, Elmi & Taromi-Rad 2012).

militarism, martial exercises and sports into the life of Iranians as defense strategies. Historically, Persian women's involvement in sports and physical activity faced many complications that partly related to the dominant religion and the ruling government's attitude to the women's movements (Afsari, and Sattar, 2012) beyond their everyday domestic activities within the home spheres.

Before Islam, Zoroastrianism was the primary religion in Iran. During this era, women had more freedom and presence in various movements, epics, and martial camps enabling them to participate in wars, hunting, sports, sport training and games (Brosios, 2002 as cited in Afsari and Sattar, 2012). With the invasion of Arabs, in the seventh century, who held negative attitudes towards women's movements, Iranian women's physical activity, specifically, involvement in martial skills and sport activities were restricted. Iranian women, however, regained their freedom in participation in martial and military epics and physical skills in Mongol's (Bayani, 1973), Safavid and Pahlavi's era (Afari, 1998).

The long-held traditional sports of Iranians, prior to the 1850s, were wrestling, horse riding, and strengthening practised in the 'Zurkhane' (House of strength) that resonated an intersection of war and sport but they were all male dominated sports (Chehabi, 2003, p. 276). In the mid-19th century due to the increased travelling and international labour migration, Iran began to adopt new ideas related to modern sport and physical activity. It was not until the early twentieth century when physical education was institutionalised (Chehabi, 2003). Initially, the major influences stemmed from the European schools of education in Germany through establishing gymnasium system⁵ in 1915. In the following year, Swedes developed similar system by focusing on physical education for its health benefit. In 1919, Iran officially adopted the same model of school of physical education. The rising Iranian middle class supported education in particular physical education for girls with the ethos of achieving healthy bodies for motherhood (Jahromi, 2011).

During the rulings of Reza Pahlavi (1924-41), the king or 'shah' in Persian, who founded the Pahlavi monarchy physical education and sport became a centre point of his

⁵ Gymnasium, in Germany, state-maintained secondary school that prepares pupils for higher academic education. This type of nine-year school originated in Strassburg in 1537. Although the usual leaving age is 19 or 20, a pupil may terminate his studies at the age of 16 and enter a vocational school (www.Britanica.com).

modernising agenda (Chehabi, 2003). Pahlavi dynasty introduced physical activity and education to women and girls whilst it was initially a male-dominated field. In 1927, Iran Majlis (parliament) passed the law that incorporated physical education into the compulsory schools' curriculum (Chehabi, 2003). The legal mandatory physical education for women faced major issues associated with poor infrastructures such as shortage of qualified physical education trainers, teachers and facilities (Paidar cited in Jahromi, 2011, p. 115). To address the issue, the first physical education training specialists began in 1935 as a one-year course run by military that led to the subsequent establishment of specialist teacher training school of physical education in Tehran, the capital of Iran (Kashef, 1999 cited in Jahromi, 2011, p. 114).

Reza shah - the king - with his focus on westernization of Iran and women, would see veil as a deterrent for the women's progress. As such, in 1934, he declared mandatory unveiling for Iranian women. Soon after the ruling, the state sponsored 'Kanoon-e Banovan' (Ladies Centre) took the responsibility of women's sport. These movements did not satisfy all classes of Iran traditional society. Conservative families opposed to the women and girl's physical education and sport mainly finding wearing sportswear in public violating the Islamic dress code. On the contrary, women from 'non-devout upper and middle class backgrounds' became increasingly involved in a range of sports (Chehabi, 2003, p. 286). Participation in competitive sports resulted in Iranian women athletes' presence in several international events beginning with the 1958 Asian Games followed by competing in the subsequent Asian Games in 1962, 1974, and 1976. They also participated in two Olympic Games of the 1964 Tokyo and the 1976 Montreal (Pfister, 2002).

As I noted, this was the history of Iranian urban middle class women's involvement in formal physical activity and competitive sport and not a representative of the ordinary working class women's physical activities that were performed inside the home sphere, attending to household chores and gardening. Further, it did not take into account the women's daily physical activities outside the home, for instance, walking for accomplishing daily routines such as food shopping, visiting relatives. Moreover, the above historical review also excluded Iranian women in rural areas where agricultural activities was a norm, however, the statistical measures in this population and for such activities are very limited. For instance, Guy Standing (1977) in a report on female participation in agricultural activities in selected rural areas in Iran between 1966 to 1973

in west Iran, Sanandaj, Rezaiyeh, Rhabad-Gharb recorded only 3-4 percent of women as economically active. Whereas, in the same area, in the semi-busy seasons or the peak time, the survey showed 43-47 percent agricultural activity (1977, p. 30). Although this report was for measuring the share of agricultural activities in women's employment, it also a representation of Iranian women's occupational physical activity. Nonetheless, as I noted earlier, reports of this type in rural populations especially after the 1979 revolution was rare or non-existence.

The other reason for ignoring the rural population including women in many studies measuring the physical activity of Iranians at national level after the revolution, perhaps was due to the rural-urban migration that dated back to the decades before the revolution, that triggered by the Reza Shah's modernization plan. The plan, that continued by Reza Shah's son, Mohammad Reza Shah, during 1962-1978 caused the influx of cheap rural labour force to the urban areas (Shaditalab, 2005). The wide-scale migration to cities led to the expansion of Iran urban society from the early 1970s onward. Rural poverty was also emanated from water scarcity, areas of poor soil, low quality seeds and outdated farming techniques (Britanica, 1999; Mahmoudian, 2015). With the rising population of Iran from 22 million to 35 million and the oil revenues, the urbanization grew from 22 to 47 percent. This group included mostly disadvantaged rural populations who lived in low socio-economic urban neighbourhoods with poor social and welfare services that mostly affected women (Shaditalab, 2005).

A wide range of factors that is beyond the scope of this research, gave rise to the widespread dissatisfaction of various layers of the Iranian society with Pahlavi regime that was eventually overthrown in 1979. This event changed so many aspects of the Iranians' lives; one was the beginning of the discontinuation of women's sports (Chehabi, 2003). More importantly, the everyday life of women was hugely affected by the legal mandatory hijab for women who were obliged to cover their head and body in public (Milani, 1992).

Soon after the revolution, the newly installed Islamic regime was involved in a war with Iraq (1980-1988) resulting in more damage to the Iranian women's physical activity and sport than to the male counterparts (Chehabi, 2003). Islamic rules for women did not limit to hijab, sports facilities were also segregated and required to be run by the same sex coaches (Chehabi, 2003). The lack of resources such as historical shortage of sports

coaches and lack of segregated sports facilities negatively affected the women's competitive sports along with other types of formal physical activity. Years after the end of Iran-Iraq war, the government began to initiate training programmes for the roles of coaches, sports' organisers and administrators with the aim of facilitating women's sport and physical activity participation (Jahromi, 2011, p. 116). This review suggest that the limited availability of physical activity and sports resources combined with the legal segregation, diminished the women's opportunities to engage in physical activity. The implications of this change was for the competence of women to participate in physical activity that was reflected on significantly lower participation of women in physical activity than men in Iran that I will present in the following section.

Some pro-government sports' scholars, however, defended the Iran Islamic government rules on mandatory hijab and the gender segregated policies. They justify them as the promoters of physical activity of women from traditional backgrounds. They argue that Pahlavi regime only promoted physical activity and sports for a handful of sportswomen attending international competitions at the price of ignoring the majority traditional society's ideological values (Jahromi, 2011). The justification was true for some of the study respondents with religious affiliation who found that the segregating sports facilities paved a route to participation in various types of physical activity; nonetheless as the following studies demonstrate after the revolution Iranians, especially women, became increasingly sedentary (Ghassemi et al., 2002; Esteghamati, et al., 2011; Arab Moghaddam et al., 2007; Ghafouri et al., 2011; Mirsafian et al., 2014).

With this historical review, I open a new topic on the prevalence of participation of Iranian women in physical activity from the 1979 revolution up to the present. It demonstrate lots of facts on the prevalence of participation in formal physical activity among women in Iran along with a brief explanation of the underlying issues for the low participation in this population.

3.3. Participation in physical activity

Iranians, in line with the global trends have been identified as physically inactive people (Ghassemi et al., 2002). As I previously noted, the occurrence of Islamic revolution, and the war between Iran and Iraq coupled with the political issues resulted in the economic downturn in Iran (Ghassemi et al., 2002). As the regime gradually was stabilized, the

Islamic government began to invest on research in public health domains. One was the secondary analysis of the third national surveillance of risk factors of non-communicable diseases (SuRFNCD-2007) examining the prevalence of diabetes, high blood pressure, physical activity, diet, and obesity. The initial national survey used the Global Physical Activity Questionnaire (GPAQ) to assess the physical activity of Iranians in three domains of work including household chores, transport (based on the number of days in a week and daily minutes of walking and cycling to and from work). The results indicated that lack of physical activity was a common behaviour, specifically more prevalent among females and older Iranians (Esteghamati et al., 2011). The findings show that 48.6% of Iranian women perform low levels of physical activity, whereas 15% of the study population equivalent with 4.7 million of Iranians do not engage in any type of physical activity (Esteghamati, et al., 2011).

The updated version of this population based survey conducted in 2011; consisting of 10,356 adults, reveal that 58.1% of women achieve the WHO's recommendation for physical activity (600 MET-minutes or more) compare with 71% of men who do so. Evidently, compared with the previous survey (SuRFNCD-2007) the level of physical activity of Iranian women has been significantly improved. The considerable gender gap was attributed to the men's occupational physical activity, whereas amongst women being housewife, having low educational attainments and suffering from chronic disease were associated with lower level of physical activity (Rahimi et al., 2017).

Examining various studies conducted in different Iran's cities, there is a huge variation in the prevalence of physical activity of women. For instance, Arab Moghaddam et al. (2007) in a cross sectional study, explore the leisure time activities and constraints experienced by female Iranians in Shiraz, one of the largest cities in Iran. Handing randomly 555 questionnaires to women of 25-40, the study seek to examine leisure time activities ranging from reading books and magazines, participation in sports, TV viewing, listening to the radio and music, going to the cinema, going out for a meal or tea, and family gatherings, visiting elderly or sick family members and/or relatives, participation in religious events on holy days, and charity works. The most common leisure activities of Iranian women in the study are TV viewing, listening to the radio, attending family gatherings, reading books and participation in religious activities respectively. Results of the questions only focusing on sports indicate that only 7% of the study sample regularly participated in sports activities.

Arab Moghaddam et al., (2007) identify lack of structure within the community and cultural barriers as the major obstacles to the Iranian women's leisure time activities. Despite the clear definition of leisure time activities, being listed and questioned, the authors are unable to specify what structural and cultural barriers and for what type of activities the Iranian women participants encounter significant issues. For instance, for TV viewing, reading books and magazines, listening to radio and music, family gatherings or attending religious activities given majority of the activities take place at people's home, a woman is less likely to face major issues since they do not depend on major funding from the local authorities or the government as they oppose to other activities such as participation in sports that relies on the state funded facilities.

Similar to the study of Arab Moghaddam et al., (2007) it appears that there is a tendency among Iranian researchers to focus only on participation in sport and recreational physical activity of Iranian citizens rather than measuring physical activity per se. For instance, a nationally representative study with 9450 participants from 12 provinces in Iran ask participants of 15-74 to complete a questionnaire about their interests in and barriers to participation in various sports. Results indicate that 32% of Iranian women and 39.2% of men were members of a sport club whereas about 35% of the female respondents have never been involved in any type of sports (Ghafouri et al., 2011).

The most popular sports for women in this study are aquatic and swimming followed by walking, cycling, mountain climbing and horse riding. Regarding non-participation, lack of time, lack of access to sport facilities, high costs of playing sports, lack of motivation and transportation issues are respectively the most frequent barriers (Ghafouri et al., 2011). As with previous studies, the authors grouped the obstacles to the physical activity of Iranian women under the broad umbrella of cultural barriers without providing any details or description of the broad terms of cultural barriers. Among other weaknesses of this study is using sport club membership as a criteria for sport participation, since one might hold a club membership without participating in sports. Furthermore, in identification of barriers, there have been no items examining the environmental issues such as lack of neighbourhood safety and air pollution, which Iranians are very commonly concerned (Mohammadpour-Ahranjani et al., 2014).

To evidence on the large variation in the prevalence of the physical activity, it is relevant to highlight the results of a recent survey demonstrating that only 9% of women and 12% of men regularly exercised (Maddah et al., 2014). The authors suggested that almost two thirds of the study population did not perform sufficient physical activity, defined as '20 minutes of exercise for at least 3 days per week'. The findings also revealed that women at younger age and with higher educational attainment were more likely to be physically active.

Comparing the findings of the last two studies, lack of well-defined variables being studied might have contributed to the inconsistencies in the prevalence of sport, exercise and/or physical activities. For instance, Maddah et al's (2014) defined physical activity as regular exercise and physical activity, using these two terms interchangeably. Again, the authors defined regular exercise 'as 20 minutes of exercise for at least 3 days per week' without clearly defining the term 'exercise'. Furthermore, the '20 minutes of exercise' is lower than minimum physical activity recommendations by WHO (2011). In general, in the last two studies, terms such as 'recreational physical activity', 'sport', 'physical activity' and 'walking' were used as identical terms. Most of the reviewed studies (Arab Moghaddam et al., 2007; Ghafouri et al., 2011; Maddah et al., 2014) also failed to assess other types of informal moderate indoor physical activities such as household chores, walking up and down the stairs, and gardening nor did include any outdoor physical activities for instance, food shopping on foot and walking as a part of daily commute, they rather largely focused on sports club membership and sports activities. More so, the large variation in the prevalence of physical activities ranging from 58% to 9% might display a wider picture. This might be in addition to the studies' methodological issues, a reflection of the inequalities in the distribution of sports facilities, accessing to public parks, and neighbourhood physical activity initiatives, as well as cultural and economic differences across different Iran cities. Of the other shortfalls of all the reviewed studies was their predominant focus on the urban populations and apart from the first nationally representative study (Esteghamati et al., 2007) the remaining only measured formal physical activity or involvement in sports (Arab Moghaddam et al., 2007; Ghafouri et al., 2011; Maddah et al., 2014). One reason might be the mass rural-urban migration that although began in Pahlavi era, the occurrence of revolution, Iran-Iraq war, low rainfall and lack of opportunities for young led to massive influx of rural population to the cities with currently 73 percent of the country's population residing in cities (Mahmoudian and Ghassemi-Ardahae, 2014).

The other methodological issues of the above studies, are their inability to illuminate the wide category of ‘cultural barriers’ as the major obstacles to the physical activity of women in Iran, nor do they examine the impact of neighbourhood characteristics on the physical activity of women. In the next section, by applying social practice and its dynamics to the study participants’ accounts, the meanings of cultural barriers will be more clearly explained. Moreover, it demonstrates how the absence or availability of public and private physical activity and sports facilities (materials) leads to the limited or widespread participation (competence) in physical activity.

3.4. Experiences of physical activity in Iran

Different participants experienced physical activity in Iran differently. The accounts reflected the upbringing, social context and norms the study participants grew up in that all related to the element of meanings of physical activity for women in Iran. Moreover, the varied experiences of physical activity was also related to the absence or presence of the Iranian government’s investment in public and private sports facilities that is social practice theory is correspondent with materials. I have organised the narratives of the study participants chronologically from the pre- revolution era up to the present.

Among those who had up to or over a decade residence in Britain, two distinct accounts stood out. One group recalled their memories of being physically active girls from their childhood through school years. Two respondents falling in this category, talked about their active participation in school’s sports teams. Tarane, 50, with over a decade residence in the UK, recounted her memories of practising physical activity during her childhood, school years through motherhood in Iran.

Overall, I had been a sporty person from high school and school. I was playing in the school’s volleyball team; I was good at all types of sports, even street

games, like Haft sang⁶, Vasati⁷ that I was the best in all of these games... When I got married and got children I had a few years gap until my third daughter was born. Em, then I started going to the gym three times a week that I was still in Iran.

As Tarane described, she attributed her sporty character to her inherent aptitude for physical activity. In her childhood, she played simple games outside her home with other children that would not require much formal training, since they learned from one another. Although she continued to participate in sports at school, there were no further activities after leaving school, until years later when she began going to the gym. Her involvement in different activities outside her home and in school was a reflection of her family's liberal views and social class, as it appeared she did not face any restrictions on her physical activity. Whereas the gap she noted, probably corresponded with her motherhood and the start of the revolution and long-term war during which physical activity for women was hardly promoted in Iran.

Unlike Tarane's life experience, four participants explicitly talked about the restrictions they experienced if they attempted to engage in physical activity. The constraints were mostly related to their families' traditional views, especially their parents, and sometimes the male family members, who were opposed to their female relatives' leisure time physical activity. The life experiences of those growing up in oppressive environment ranged from extreme prohibition, for instance, being escorted to school, to receiving explicit or subliminal messages from family members discouraging them from frequent public presence. Fateme, a married British citizen, who lived in the UK for nearly three decades, reflected on her life experience in Iran as a teenager:

I didn't have much freedom as a woman in my country because of my family upbringing and I wasn't even allowed, you know, to go to high school, my mother just take me to high school ... Not all the family are like that but my

⁶ Haft sang; or seven stones, a children's game that involves in compiling seven stones on top of another, then children take turn by hitting the stones with a small ball then running to get the ball and it turns between the participants. This is an exciting game for children that requires jumping, leaping and running.

⁷ Vasati, is a popular game among teenagers and adults played in-group while a team are in the middle vigilant not to be hit by a ball and the other team standing on the both side trying to hit the team in the middle. The game requires a lot of shouting ball and running full of excitement and fun.

family, my father was like that ... We have that constraints ... I couldn't even ride the bike, because my brother had a bike and I wanted to ride it but they didn't allow me, because I was, I wanted play football but they didn't allow me.

Fateme, in her life review highlighted her lack of freedom in Iran. Her narrative demonstrated the magnitude of the constraints her parents imposed on her. Fateme tended to limit the negative personal experience of physical activity to her own traditional family, rather than generalising it to all Iranian women. Mahvash, a married woman, a mother and an employee prior to leaving Iran, appeared to share similar experiences with Fateme who did not finish high school before moving to the UK. She portrayed the common social and cultural norms, the negative attitudes of Iranian families and the society as a whole on female gender's engagement in physical activity:

I remember at that time, just they let girls stay home and then let boys go out and play and this is, I think was like a symbol to them, and should activity and should football, OK, you go do football, you sit, you know, and help with your parents and I think that eh, make it some regular or some habit to women.

From Mahvash's view, physical activity was not part of Iranian women's upbringings. Hence, Iranian women grew up in a less physically active environment, beginning from their childhood through adulthood. As Mahvash explained, in Iranian families, especially for parents, 'gender' determined who was eligible to engage in physical activity and sport and who should be excluded. In the same line, Shiva, a 37 year old, former asylum seeker, currently a refugee, despite her education and employment prior to her departure from Iran, endured enormous constraints imposed by her family members. In reflection, she shed light on the power of social norms in creating obstacles to her physical activity prior to her departure from the Iran:

Yes, definitely there is a difference. For example, when you want to go out, umm, ehh, you are quite safe (here), what's the matter, nobody knows you. For example, your family never complain about this matter when you're out that the guy in our neighbour knows you and why you want to go out... that's why I feel, I feel comfortable when I go out, and especially about the way I

dress up for physical activity in here... When I was in Iran, I have to put hijab, but in here there is no hijab no barrier.

Shiva contextualized various impediments to her physical activity. In her narrative she began with her family's attitudes and expectations towards her reputation in the community that viewed going out frequently as inappropriate. In this context, the term 'safe' did not necessarily mean the neighbourhood safety but it was about the sense of freedom from cultural pressures such as rumours, and gossip about her if she was frequently seen outdoors. In spite of living in Britain as an asylum seeker for eight years, which created legal limitations for her employment and education, Shiva still much preferred her life in this country than the privileges she had in Iran - working and studying. Indeed, Shiva presented no attachment to the gender roles expectations impeding her physical activity in Iran. She highlighted other obstacles imposed on women by the state such as mandatory hijab. Mahvash expanded the social boundaries that Iranian women experienced, the size and composition of the circle or networks, the choices of friendship and types of activities they could undertake:

I remember that in Iran we haven't (had) some, like, some of friendship, like here. I, because firstly they were busy, too busy. But the other things emm, some tradition doesn't let you this kind of dancing in a group, without your family. If you go with your friends in Iran, they look at you, oh, definitely, they feel you go somewhere, and come back late for example 8, 9, oh, you have a family ... But here's different I used to go to gym in Iran, once a week, twice a week. I took my daughter to dance class but you see, if you say, OK, I take my daughter to swimming, it's not bad, but if you say I take my daughter to dance, it's bad.

The fear of gossip and rumours in the collectivist Iranian society, especially in the context she lived, clearly would define women's friendships circles to be limited to their immediate and extended families. Moreover, the choices of physical activity had to be fit into the Iran government's rules. For instance, dancing that is legally banned was also culturally seen as a non-Islamic physical activity. as a result those who practice it being looked frowned upon.

When moving to more recent migrants, the narratives of the respondents shift dramatically. This group usually had less than or around ten years of residence in the UK, and led an active lifestyle and participated in a range of physical activities prior to their migration. This was regardless of the respondents' social classes being middle class or working class, migrant or refugee and asylum seeker, university graduate or a housewife with limited education as they all shared similar experiences. This was a reflection of the absence of family or any cultural constraints, despite the state mandatory hijab and segregated sports facilities. The accounts of six participants in this category revealed that they were active in different social spheres fulfilling their daily responsibilities. Physical activity was embedded in their routines and practiced both formally and informally. A range of physical activities highlighted by the respondents included doing shopping on foot, having family gatherings in a park, going to a local park for a walk and using its sports facilities, going to mountain climbing with friends, attending the gyms, yoga classes and many more. Zahra, a current refugee with less than six years residence in Britain, reflected on her daily activities and believed in leading a much more active life in Iran than in Britain for several reasons:

I, there, was so active. I mean when I was in Iran, I was so active all day long. I've never been free, never had time to think about anything or feel bored... I was an artist, either had clients; organising weddings, designing the wedding halls...

Nasrin: What about your physical activity? How do you describe your physical activity in Iran?

Zahra: About walking, well, I used to walk there too I used to go swimming, also going to gym a lot in Iran.

As the above conversation explained, Zahra's understanding of physical activity was being active in the community. Her career responsibilities were the major motivations for being active, with multiple opportunities to walk. She also practiced leisure time physical activities in her daily routines such as swimming and going to a gym. Zahra, from a traditional family background, benefited from the segregated gyms in Iran, giving her family peace of mind that she would perform physical activity in an Islamically inclined environment. With this in mind that she, at the time, was either unmarried or had no children, leaving her sufficient amount of time to engage in physical activity compared to her current circumstances as a mother of two young children.

The narratives of the recent Iranian women migrants or refugees suggested that physical activity occurred in various contexts and was inspired by people in their immediate family or the wider social network. For instance, Mahin, currently an asylum seeker, who lived in Iran with her four children, as a housewife with limited formal education, and without much sources of income, also described her daily life in Iran to be much more physically active than in Britain. Not only her active lifestyle was due to her different household responsibilities, and food shopping on foot, she attributed her active lifestyle to the regular visits to the neighbourhood parks. Due to Iran's warm and sunny weather, parks were free of charge, and accessible to all, not only in daytime but at nights. These spaces along with their facilities specifically benefitted the financially disadvantaged women who could engage in public physical activity facilities.

In Isfahan⁸, where I used to live, we would wake up early, going to the local park with my daughter at 7 in the morning, even if I was lazy, my daughter would wake me up and take me there from 7 to 9 then during these two hours ... there were equipment which we would use for half an hour, using the bicycle, some machine for strengthening wrists, and dumbbells, well, we would use them and in my opinion they were much better than walking round the park.

As the above explicitly indicated, Mahin's daughter was a strong motivation for her mother to engage in different types of physical activities, walking and using the park's sports equipment in the early mornings. The positive impact of companion in enhancing motivation for engaging in physical activity in different contexts was frequently highlighted by some recent study respondents. They spoke of their daily life in Iran filled with a variety of social engagements such as going out with people in their social networks ranging from family members, relatives, old school friends, and work colleagues. Aida, 29, a migrant, from a metropolitan and large city, described her life prior to her migration. She reflected on the inspiring situations that kept her physically active:

⁸ The second largest city in Iran

For me, coming from a country, which had no rainfalls, no windy nor rainy weather, we could go out more comfortably. Rain and wind affect your mood if you want to go out. Iran had green spaces. You would go to the parks for a picnic with family but here you should go to a café, while (in Iran) we would meet up in a park. Picnicking which was not only sitting, we would go for a walk, playing with family, mountain climbing with friends every Fridays, also holidays, the weather was very nice.

Aida, outlined various contexts she could maintain social and physical activities in Iran. Describing the climate; sunny and dry weather in combination with her social context; being surrounded with family and friends, Aida, a young graduate Iranian, had various reasons to spend time out. Examining the participants' account, there was a tendency to count their leisure time physical activity while ignoring their activities in home environment. This might also refer to the collective perception of Iranians of physical activity, align with formal physical activity in Western sense. Taking into account the narratives of Zahra, Mahin, Atousa, and Aida, they mostly spoke of outdoor physical activity that might refer to the influence of Westernisation of Iranian culture in Pahlavi era despite living decades after the collapse of Pahlavi regime.

Unlike the above respondents who engaged in physical activity for fun, pleasure, enjoying the nature, socialising and health, those from middle class families tended to value physical activity for achieving a slim body shape, cosmetics and fitness. The trace of Westernisation dominating the lifestyle practices of urban educated Iranians from the capital was evident in the account of two participants. She signified her strong attention to body shape advocated by her social network despite wearing hijab. As a former refugee, currently a British citizen, Nazanin, 46, who lived in the UK for six years believed her physical activity level was considerably higher in Iran than in Britain:

You know, when you live in your home country, for instance, for someone like me in her 39-40s, they have reached to a kind of stability, and have no financial problem, at least I didn't have. That's why I could pay attention to other matters, looking after my fitness, and diet a great deal... in Iran, we

would pay attention to our appearance, especially we would wear 'Manto'⁹. Well, with Manto which was our outdoor outfit ... if I were fat, it wouldn't look nice on my body, so it was embarrassing.

Although Nazanin referred to her privileges, such as financial stability that assisted her in covering the costs of the gyms, achieving a slim body shape, despite being covered by a Manto, was her primary aim in engaging in physical activity. She was conscious of her body shape, a symbol of her social class and status. Her body shape was a fundamental part of her acceptance in the social group she belonged to.

Having reviewed the literature on the physical activity of women in Iran, the social practice theory informs my interpretations of the daily practices of Iranian women study participants. I have so far presented the role of historical development, social, cultural, economic, and political contexts as well as neighbourhood characteristics (Blue et al., 2016) as the key contributing elements inhibiting or boosting the Iranian women respondents' physical activity prior to their migration.

Historically, Iran from mid-19 century began to adopt Western ideas. But it was Reza Shah's Westernisation agenda and Iran's parliament legislation that institutionalised physical education for boys and girls in 1927. The legal endorsement, however, did not please people of all social classes of the traditional society of Iran (Jahromi, 2011). In line with the historical review, the findings of this study showed that over the course of pre-revolution up to years after the revolution, two distinct accounts were visible. Those belonging to the traditional family backgrounds experienced various degrees of oppression whereas women from more liberal families felt their physical activity was unaffected by their gender. This indicated that social class and cultural norms (meanings) were important factors in allowing or prohibiting participation or their competences in physical activity for Iranian women. Further, even amongst those from liberal families as the narratives of two participants indicated poor physical activity infrastructures for women limited their activities (competences) to only playing on the streets in their childhood and at school (materials). Whilst the life stories of four participants from the traditional family backgrounds clearly showed the absence of physical activity from their

⁹ An outfit, similar to a raincoat, mandated by law in Iran that women wear, covering their body when appear in public.

childhood to adolescence and adulthood. Hence, it could be extrapolated that physical activity in Iran, in the formal Western sense, from the pre-revolution years to the post-revolutionary period, was not promoted beyond physical education in schools. This is a reflection of the wider context, for instance, society's cultural norms in designating different roles for girls and boys in and out of the home sphere. Some sociologists argue that gender is not only a biological, but also a social construct (Lorber, 1994). While some differentiation such as giving different names to a boy or a girl, dressing them with different clothes to distinguish gender was to avoid confusion and organize their lives, the differences become more noticeable from puberty when one, a boy or girl, learns to adopt gender appropriate dress codes, walking, speaking and behaviour (Lorber, 1994). Gender role expectations as the learned and accepted norms, beliefs and practices, created by cultural standards, could be practiced for generations (Kreuter and McClure, 2004). Fateme, Mahvash and Shiva's testimonies signified their family's social class and norms by imposing restrictions on their daughters' physical activity. This was because cultural norms have power over those who rebel since they will be subject to social sanctions and emotional punishments (Baumeister and Leary, 1995; Fehr and Fischbacher, 2004). The narratives of this group clearly shed light into various meanings of 'cultural barriers' that was vaguely noted by the studies undertaken in Iran (Arab Moghadam et al., 2007; Ghafouri et al., 2011).

Cultural constraints on women's physical activity still existed, although not in great magnitude, as the narrative of Shiva with eight years residence in Britain, suggested. This also supports the findings of a recent study highlighting the impact of cumulative obstacles on the decision of women as to whether engage in leisure time physical activity or not (Mirsafian et al., 2014). Shiva's life experience as an unmarried woman whose activities in Iranian patriarchal society (Harbottle, 2004) was shaped by the opinion of her parents and male family members. As she explained her migration to the individualistic society of Britain (Sinha, 2008), was a transformative experience due to the absence of interference of family and wider social and cultural norms (Glass et al., 2012) on her daily activities including physical activity. In applying social practice theory to this phenomenon, the change of social and cultural norms that relates to the element of meaning has boosted the motivation of Shiva, Fateme and others with similar experiences to lead an active life in Britain.

Cultural pressures not only originated from the immediate family but also from the wider community. As Mahvash revealed, she culturally felt unable to expand her friendship circle and the time that she, as a woman and mother, could be outside her home socialising with people beyond her relatives. This is also a representation of Iran collectivist culture in reinforcing small in-group friendships (Hui and Triandis, 1986). Moreover, the types of physical activities a woman could participate in was limited to those agreed by the Iranian government. For instance, practising dancing, which is legally banned in Iran due to breaching the Islamic ethos (Ensor, 2017) would provoke a critical response from the women's social group. In other words, the government's ban on dancing appeared to have infiltrated the society's view, as Mahvash described.

Contrary to the above experiences of constraints, most of the recent Iranian women migrant respondents with less than or around ten years residence in the UK, demonstrated varying experiences of engaging in physical activity in different contexts. Six women in this category group believed that they had been leading a more active lifestyle in Iran than in Britain. This group represented varying socio-economic and legal statuses. They were: an asylum seeker, refugees, and migrants, house wives, employed, working class and middle class women participating in a range of physical activities subsequently reflecting a drastic shift in Iran cultural attitudes towards women's social and physical activities.

One of the advantages of life in Iran that all the current migrants agreed, was the role of the sunny weather in facilitating their leisure time physical activity. More importantly, they benefited from proactive people in their social circle encouraging them to spend time outdoors or simply functioning as a companion, whether in a small group with family members or through wider contexts, ranging from relatives, colleagues or old school friends. This also suggest that Iran society has been gradually shifting towards individualistic culture in adopting wider in-group friendships (Hofstede, 2001). Receiving emotional support, one of several types of social support, from significant others such as family and friends in the form of verbal encouragement, companionships, and/or high level of reassurance has revealed to boost the likely adherence to exercise (Oka et al., 1995; Vrazel et al., 2008).

Focusing on the element of materials, the availability of public parks functioned to facilitate physical activity of women in their locality or outside their neighbourhood. Additionally, this group were privileged for being surrounded by physically active

people. This demonstrates the cumulative effect of the sunny climate, appropriate public infrastructure (materials) coupled with physically active people (competent physically active network) in promoting physical activity (competences) amongst the financially disadvantaged.

Eight participants reported paid employment prior to their migration enabled them to afford the costs of gyms. Employment, additionally, enhanced the likelihood of going out, and being physically active. As Zahra highlighted, she did solo physical activity since her career, and sources of income was an empowering factor or a material to engage in physical activity. Moreover, Zahra, as a practising Muslim also benefited of the mandatory segregated sports facilities in Iran as this rule enabled her to comfortably attend swimming pools in Iran.

Iranian women study participants appeared to engage in physical activity for different purposes. For many, it was a group activity which brought fun and pleasure. The middle class Iranian women engaged in physical activity to conform to the norms of their social group that valued slim body size. In Nazanin's account, two opposing realities were visible; first, living in a society where women obliged to be fully covered in public, under a government promoting anti-Western slogans, second, belonging to a social class and network advocating Western ideas of maintaining slim body shape. The post-revolutionary mandatory hijab for women in Iran prompted a study with the underlying objectives of comparing the body shape ideals and eating disorders of Iranian university students in Tehran with the Iranian counterparts in Los Angeles University. They assume that because, at the time, access to Western media in Iran was illegal, and given the mandatory hijab for women, Iranian women would present fewer eating disorder symptoms and were less likely to present body shape concerns. They asked the both groups to complete a range of questionnaires including Eating Disorder Examination Questionnaire (EDE-Q), Figure Rating Scale (FRS) and self-reported BMI. The difference was the Iranian sample were tested on whether they watch western movies whilst the Los Angeles sample complete an acculturation questionnaire.

The study reveal that Iranian students in Los Angeles have significantly lower BMI compared to the Tehran study sample. Also participants in Tehran sample are more likely to be less satisfied with their body shape, have a strong desire for an empty stomach and exercise vigorously to achieve their ideal body shape whilst the Los Angeles sample are

more likely to have eaten a large amount of food in the past four weeks. The surprising results suggest that covering body might not be a protective factor nor exposure to Western culture is a risk factor for developing eating disorder or body concern (Abdollahi and Mann, 2001). In response to the rejected hypothesis, the authors propose that Westernization in particular in Tehran, capital of Iran, has influenced Iranian culture decades ago (Chehabi, 2003) and it continues to do so.

Although the study examines the body concerns of university students of 24 and younger, the findings are still applicable to Nazanin who left Iran at 38-39 and similar to the above study presented strong body shape concern. She actively engaged in physical activity not to risk her status evidenced through the term 'embarrassing' resonating the psychological impact of deviation from the values and standards of her reference group. This also indicates that cultural norms of the group are strong elements in shaping the women's practices of both traditional and Westernised.

To conclude on the overarching themes regarding the physical activity of the respondents in Iran, it can be extrapolated that the power of social class and cultural norms on gender roles were strong influences that associated with the element of 'meaning' in social practice theory. The culture norms, simultaneously, were susceptible to change when the government developed better infrastructures (materials) through building public and local parks as well as private gyms at national scale. With the abundance of sport facilities free of charge in public parks, or for those with sources of income (materials) who could afford the cost of private sports facilities, more women could engage in physical activity. This means that the culture began to shift towards a direction in which it was no longer a stigma to see women in the community participating in physical activity (new meaning). Women appeared to inspire one another, whether it was their family member or their wider social network, to engage in a variety of leisure time physical activities. As Shove et al. (2012) stress, through rapid interactions new members take up a practice and create a larger community of more or less committed practising people.

The widely contrasting experiences of new comers and well-established Iranian respondents in performing physical activity suggest that government investment in health promotion initiatives at national level (materials) could dilute the inhibiting impact of cultural norms on the physical activity of women. The cultural shift was to the extent that women's participation in physical activity in contemporary Iranian society was not only

widely accepted but it was also prescribed and deemed as a symbol of happiness, pleasure, class and status. The contribution of social practice theory to this chapter, as Shove et al. (2012) maintain, is that materials (parks, sources of income, gyms) inspire more carriers of physical activity that inevitably change the meanings (social and cultural significance of physical activity) and women performing physical activity (competences). This demonstrates one of the main proposition of social practice emphasising that practices are enacted when the defining elements of the practice are integrated (Shove et al., 2012. P. 21). 'The centrality of linkage' between the elements of a practice determines the emergence or the continuity of a practice (Ibid, p. 24). Moreover, with regards to the practice bundles physical activity in Iran was linked with the women's socialisation in open spaces. For instance, some of the recent migrant women noted that they used to perform physical activity in the company family or wider social network in nature during picnicking. For others, it was again group physical activity in the urban setting, in a local park, walking and using the parks' sports facilities. With regard to food, practising traditional Iranian diet, to some extent, associated with eating together as a family, also socialising with wider social networks for the study participants. Food practices are highly dependent to cooking, shopping, access to market, and certain food (ethnic stores).

Furthermore, as far as the testimony of the women respondents indicated being an asylum seeker, then a refugee did not mean that the woman lived in a disadvantaged position in Iran. This is because five out of six recent participants and three out of four long-standing respondents, who applied for an asylum to the British government, had finished their high school or were university graduates and employed in full time jobs prior to their migration to the UK. With these points in mind, I now progress to the chapter four on food practices of Iranian women prior to migration in Iran.

4. Food preparation and consumption of Iranians

4.1. Introduction

This chapter considers the history of food consumption in Iran and follows the development in food practices influenced by relationships with the West. The literature review continues to show the gradual change in the culinary culture of Iranians and ends with a presentation of drastic dietary change in contemporary Iranian society. It then focuses on the testimony of the study participants expressing their critical view on the food practices in Iran whilst, the contrasting accounts from the long established respondents tended to reminiscing about the old food practices in Iran. At the end I compare the participants' accounts with the literature. This chapter ends with the contribution of social practice theory to the dietary practices of the women in Iran.

4.2. History of food preparation and eating habits in early modern Iran

Iran before the Safavid era¹⁰ (1501-1721) was not known to the outside world. It was due to the problem of Iran's geopolitical location because Iranian plateau was thinly connected to the outside world through Persian Gulf. This resulted in restraining Iran's trade to only exporting silk and bullion and importing commodities such as luxury goods with a high value in weight and volume that mostly destined to the king and rich (Kotilaine, 2002). As I noted in the previous chapter, when Arabs invaded Persia (Iran) in the 7th century, women's physical activity was restricted. This was not the case for the food as Watson (1983) points to the positive aspects of the invasion and subsequent occupation that linked the Iranian plateau to the western Arab and gave rise to the lively movement that facilitated the transmission and growth of crops (cited in Matthee, 2016). That means during the Islamic period, this connectivity enabled the exchange of crops and farming techniques from Iranian plateau and Mediterranean that involved in the exchange of cereals and eggplants (aubergines), various types of citrus fruits and melons from India to western part of Asia to as far as China (Matthee, 2016). Again due to the lack of connectedness between Iran and the outside world in early modern era, Turkey's

¹⁰ The Safavid dynasty was one of the greatest ruling families, which founded modern Persian history, which started from 1501-1721. They succeeded in creating the genesis of the Persian nation-state (Encyclopedia Iranica, 2008)

food received more attention than Persian cuisine which is recognised as one of the most sophisticated in the world (Matthee, 2016).

4.3. The geopolitical situation of Iran in west Asia



Before the 19th century, Iran has been a country comprised of individual regions including the urban centres with their immediate surroundings and these regions explain the self-sufficient patterns in food consumption. This was mostly down to the geography such as

mountains, vast deserts and difficult terrain making communication challenging in the face of huge distances. This might explain why until the 20th century Iran did not have a ‘national economy’ but a series of regional economies (Matthee, 2016, p. 6). Figure 4.3. illustrates the geopolitical situation of Iran in western Asia (Ezilon, 2019).

Iran, prior to the discovery of oil, in the early 18th century, was described by the English traveller, James Fraser, as a poor country and inherently a land of scarce resources (Matthee, 2016), a country that fallen into poverty compounded with lawlessness that reduced people to the level of survival. Nonetheless, Jean Chardin, a French observer, who visited Iran several times and endeavoured to learn Persian language, remarked that Iranian peasants seemed to him better off than the French counterparts (Chardin, 1811, cited in Matthee, 2016, p. 9). Gordon, a British official who revisited the country after a three-year absence who made similar observation, noting that “on the whole it may be said that the peasantry and the labouring classes in Persia are fairly well off, and I think their condition can bear a favourable comparison with that of the same classes in other countries” (Gordon, 1896 Cited in Matthee, 2016, p. 9). This indicates that the reality of Iranian peasants’ everyday food was not reflective of the poor status of the country (Matthee, 2016).

The diet of Iranians was described by Western observers as simple, nutritious, healthy and varied (Matthee, 2016, p. 11). As Khosrokhavar acknowledged, Iranians ate two meals a day, far less than Europeans, fresh” and “frugal” that symbolized the meaning of food in traditional Iranian society as not only nutritious, but also bound to the soil and the wider social environment (cited in Chehabi, 2003, pp. 43-62). Henry Savage (1903) in the early 20th century described Persian food as “quite clean - cleaner than the general run of the best European cooking” adding that “the meat ever fresh and good,” the chickens “only killed and bled a few minutes before they are cooked,” the eggs “always newly laid,” and the vegetables “ever so clean and tasty” (cited in Matthee, 2016, p.12). Food in this traditional society was perceived as an element of a universe in balance. The Iranians’ worldview of food and consumption, like physical health and hygiene, was entangled with the nature and the dynamics of the universe, envisioned as cosmos” (Ibid, p. 11). Jacob Polak, an Austrian physician (1856) described the staple food of Iranians in mid nineteenth century comprising cereals, rice, vegetables, and legumes as well as fruits, nuts, and dairy products. Ho noted that only rich ate meat regularly, as it was the case for many parts of West and East Asia, indicating that the Iranian cuisine was mostly vegetarian

(cited in Matthee, 2016, p. 4). There is a common agreement between all observers that when it comes to fresh fruits and vegetables, 'Iran was second to none' (Matthee, 2016, p. 12). Fresh fruits have long been grown and locally consumed in great abundance throughout Iran. A profusion of grapes, peaches, apricots, apples, pears, cherries, almonds, figs, limes, and oranges grown from the orchards surrounding urban centres were always on sale in the bazaars (Butler, 2012 cited in Matthee, 2016).

As far as the Iranian dishes' ingredients were concerned a range of vegetables such as onions and variety of other vegetables, fresh herbs combined with other ingredients limited to mostly legumes and beans were used (Matthee 2016). Ash a thick soup; the staple at the time, that like bread and cheese cut across all classes (Chehabi 2003). The westernisation of Iranian cuisine, however, led to the replacement of ash with other staples: rice and meat that I will discuss it in more details later. Rice, one of the imported items from the East Indies in the seventeenth century, become few centuries later the national dish of Iranians (Chehabi, 2003). Iranians exclusively use high quality rice of the basmati variety. The word "pilau," or "pilaf," comes from the Persian word polo (Ibid). In the course of the Safavid, the variety of pilau dishes may have increased to an astonishing large number, mixed with all kinds of fruit, cherries and currants, almonds and raisins, in many different colours. Chardin's writing, in the 17th century, counted more than twenty types of rice, prepared with mutton, goat, or chicken. Drouville in the early nineteenth century called pilau the "national dish" of Iran, adding that it was difficult to prepare a perfect one as it was an elaborate, time-consuming job that involves a great deal of soaking, boiling, and steaming (Matthee, 2016, p. 15). Yet until quite recently, rice was a prestige food that mostly remained the dish of the well-off families or served by the ordinary Iranians in special occasions (Chehabi, 2003). Elites, on the other hand, would often serve five or six types, with raisins, gooseberries, pomegranate kernels, pistachios, almonds, saffron, herbs, or peas (cited in Matthee, 2016).

Bread was another staple, consumed by all, other than in the Caspian provinces, where rice was the primary food, and in Persian Gulf coast, where cereals did not readily grow. In the poetry of Persian Sufi poet, Jalal al-Din Rumi¹¹, bread is given a sacred meaning; a divine gift, descends from heaven.

¹¹ Jalal Adin Jalal al-Din Muhammad Balkhi also known as Rumi, the celebrated Persian Sufi poet. He is one of the best-known and most influential poet known for his series of six poetry books 'The *Masnavi*'

To this date, bread has remained the Iran's essential food (Matthee, 2016). It is eaten for breakfast, with a little honey and/or cheese, and as a side dish with hot meals, together with spring onions, various fresh herbs with radishes. In the mid-nineteenth century, bread came in three varieties: Sangak made from unleavened wheat flour. The second type of bread in Iran is Lavash) made from dough rolled to the thinness of a pizza crust and then baked against the inner wall of a hot oven called Tanur (Safi-Nezhad, 2006). The third type of bread known as Barbari, 'barbaric', that brought to Iran in the late nineteenth century by the Hazaras of Afghanistan; people who adhere to the Shi'a branch of Islam, considered 'barbarian' or 'uncivilized', when they refuge to Iran to escape religious oppression in the 1890s (Mousavi, 1997). Panir or white-brined cheese similar to feta, was and continues to be an indispensable element of the Iranian diet (Chehabi 2003; Matthee, 2016), as it cut across a wide spectrum of Eurasia, from Bangladesh to Bulgaria, usually made from sheep's milk, was and is classless; rich and poor eat it in Iran (Matthee, 2016). In the next section, I will examine the historical changes in the diet of Iranians created through travelling and Westernisation.

4.4. Dietary change of Iranians

Chehabi (2003) in an overview of several Iranian restaurants' menus in the US concluded that the similarity of the dishes served that limited to various types of rice; Chellow, kebabs; grilled meat and Khorisht; stews, were the representation of the Iranian national dishes. However, he offered a historical review to demonstrate how 'the Westernisation of Iranian culinary culture' led to the change of the staple food of Iranians from 'Ash', a thick soup, made with variety of vegetables and legumes, to the current common dishes, polo, kebab and khorisht. In the review, he argues that the phenomenon, westernisation, was shaped through sustained communication with Europe commenced in the Qajar times¹² in which the patterns of change were initially adopted in the court of kings, then spread to the middle class and aristocrats before being introduced to the ordinary Iranians.

that amount to around 25,000 verses or 50,000 lines. In these spiritual poem books, he teaches how to reach their goal of being truly in love with God (William, 2007).

¹² Qajar dynasty, a royal dynasty who ruled Persia, Iran from 1794 to 1925 (Amanat, 1997)

Two main features in Westernisation of food culture of Iranians included table manners, and the widespread consumption of beef. The first key element of Westernisation of Iranian culinary manifested in the ‘table manners’ that was the introduction of cutlery by Nasir al-Din Shah’s (r. 1848-1896) great-grandson who began using forks (Chehabi, 2003, p. 46) whilst Iranians used to skilfully use a piece of bread. Years later, the use of table and chair initiated by the aristocrats in the late Qajar eras. This was a change from the traditional eating habits of Iranians who sit around ‘Sofre’¹³; a tradition that still prevails. The use of cutlery, table and chair was mandated by Reza Shah (1925-1941). His ambition to ‘bring about in Iran so as to push his subjects toward progress, the state now actively promoted the Europeanization of eating habits’ (Chehabi, 2003, p. 50). In the 1920s, the first signs of fundamental change in Iranian cuisine began. Reza Shah was the first to introduce restaurants that served Western dishes and catered food to the rich and the multicultural people in Iran (Chehabi, 2003). In the 1950s through advanced transportation, Iran became more integrated country which facilitated subsequent changes in their food consumption when beef entered the diet of Iranians who were traditionally mutton eaters¹⁴. The consumption of meat generally rose with higher income.

The next decade, in particular, saw rapid changes in culinary patterns due to the expansion of travel, ties to the West, and the growing number of restaurants serving pizza, hamburgers, and the sandwiches filled with processed meat, such as mortadella (Chehabi 2003). The Islamic Republic of Iran adapted the American style food outlets with similar names to the original ones such as Mash Donald, Kabooki Fried Chicken, and Pizza Hat (Erdbrink, 2015). This shows that neither religious prohibitions nor economic boycott seemed to be able to break consumer trends in a society where new globalized food strive to compete with the home-grown traditions (Ibid). The shift in the dietary patterns of Iranian families towards fast food was echoed by the four participants in their 20s and 30s. This group, on reflections on their food practices in Iran, pointed to the regular consumption of sandwiches made with sausages and mortadella served with fizzy drinks.

¹³ A piece of cloth made from fabric or plastic, decorated aesthetically and colorful, placed on the carpet spread across the room, it functions as a table cloth.

¹⁴ Although Iranians were mutton eaters, mutton was mostly consumed by rich, as it was the case with rice, that due to their high prices ordinary families only could afford to eat mutton on special occasions (Chehabi, 2003).

Westernisation was not the only cause of dietary change in Iran, but also the post-revolutionary era led to an increased consumption of high calorie food among Iranian families (Ghassemi, et al, 2002). In a review of dietary transitions of Iranians, Ghassemi et al. (2002) raise an alarm over the lack of attention of Iran's government to the dietary change of the population, highlighting that years of war with Iraq, and subsequent economic downturn result in poor nutrition quality and food insecurity in 20% of the population. They compare the representative studies of 'National Food Consumption Survey' conducted in 1995 with the similar survey in the 1970 to pinpoint the significant dietary shift after the revolution with increased daily calorie intakes from 2000 kcal in 1970s to nearly 3000 kcal in 1995, a public health concern in the face of lack of physical activity (Ghassemi et al., 2002). In explaining the patterns of food consumption of Iranians, the report adds that bread; made of unrefined whole wheat, is still the staple, while the consumption of rice, due to its high price, influenced by the socio-economic class, since ordinary Iranians with low income could not afford to consume it very frequently (Ibid). In examining the food baskets of Iranian families Ghassemi et al. (2002) highlight that the consumption of dairy products in abundance; especially yogurt and fresh cheese; not aged, as well as nuts and leafy vegetables; Sabzi Khordan¹⁵ used in small quantity contributed to receiving nutrient such as folic acid. Meat including red meat, poultry and fish are expensive but highly valued. In the following studies, the Iranian food researchers present further evidence on the country's shift from the traditional dietary habits to the current diet. This includes high consumption of red meat, fast food, and soft drinks, high intakes of oil, sugar and salt. Esmailzadeh and Azadbakht, (2008) also raise a greater concern over the use of bread and rice from refined grains as the main source of energy intakes of Iranian adults. In other words, it seems that not only Iranians consumed food contained high calories but the availability of whole grains was reduced too.

The above noted dietary practices of Iranians might explain why a national survey finds that over 80% of women exhibit at least one non-communicable risk factor (Esmailzadeh et al., 2007). To understand the link between dietary patterns and cardiovascular risk factors, Esmailzadeh and Azadbakht (2008) examine the dietary intake and physical activity behaviours of a representative adult sample. In categorizing the participants'

¹⁵ A combination of variety of raw herbs including basil, radish, young leaves leek, mint and parsley served as the side dish

dietary patterns, three types of diet including Western, Iranian and healthy emerge. Participants falling into healthy diet appear to be more physically active, consume larger amount of fiber and food with lower calories. In contrast, those practising Western dietary pattern, consume higher fat from oil and high fat dairy products, refined grains, soft drinks, eggs, processed meat, pizza, sweets and desserts. This group presented greater risk factors such as hypertension. Those falling into the traditional Iranian dietary pattern also exhibit at least one risk factor to their cardiovascular system related to their high carbohydrates intakes, mostly bread and rice made from refined grains. Esmailzadeh and Azadbakht (2008) in this study could not find a link between the participants' dietary patterns with type 2 diabetes but justifying the issue to the small study sample size. Later, Moslehi et al. (2015) in a longitudinal study used similar methodology by assessing the food consumptions of Iranian adults who were tracked over nine years. The results show that only the Iranian 'traditional' dietary pattern described by high intake of whole grains, legumes/pulses, eggs and red meat associated with significantly lower risk (18.2%) of developing type 2 diabetes. The authors suggest that despite the high consumption of red meat and eggs in traditional diet with moderate increase the risks for heart health, the participants probably the beneficial effects of whole grains and legumes/pulses that counteracted the potential adverse effects of eggs and red meat. What the above reviewed quantitative studies fail to examine is the social and cultural significances of food preparation and eating in Iranian families. The role of abundances of fast food and other social norms associated with food and eating have been discussed in details by the study respondents when reflecting on their personal or their family members' food practices in Iran.

While most Iranian scholars tend to examine the dietary patterns of Iranians in their quantitative studies, Farahmand et al., (2012) seek to identify the obstacles to healthy eating of Iranian women residing in Tehran. Conducting 14 focus groups, they find that the women's inability to adopt a healthy diet mostly is associated with the social pressures exerted by family members, peers, and community. The role of school canteens in promoting processed meat such as sausages and salami to pupils who are under peer pressure is undeniable. As a result, the students gradually develop their eating habits around these kinds of food and tend to refuse homemade meals prepared by their mothers. Moreover, it seems that some Iranian families have a tendency to prioritize purchasing material goods and furniture over healthy food. Others believe that the issue of eating unhealthy diet lies in the lack of knowledge and information about what healthy food to

purchase and how to cook a healthy dish while a number of the focus group participants consider the limited availability of healthy food choices in supermarkets play a part too. Meanwhile Iranian women working women point to the time pressures as the obstacles to preparing healthy food. High costs of food mostly affect families with low socio-economic status. In spite of the participants evidently highlighting the social pressures, financial constraints and structural factors as the major drivers of adopting an unhealthy diet, the authors conclude that unavailability of educational programmes are the main barriers to healthy eating among Iranian families. They suggest that implementing interventions aiming to provide instructions for cooking a healthy meal are the best solutions for tackling unhealthy dietary practices of Iranian families (Farahmand, et al., 2012).

Mohammadpour-Ahramjani et al. (2014) particularly become concerned over the current rising obesity trend in Iran. In their qualitative study, they move beyond the individual or family lifestyle patterns by widening the scope of their investigation to include society and the Iranian government's policies. The authors point the blame at the policy makers who mostly ignore controlling the population's trend in fast food consumption. The study respondents, exclusively parents, in the capital city, Tehran, argue that the high cost of healthy food and low levels of physical activity such as walking, cycling, and the problems involved in playing outdoors, due to the poor neighbourhood safety, traffics and air pollution, are also responsible for this phenomenon. Further, they highlight that the cultural issues still affect the young girls especially those in low socio-economic neighbourhoods if intending to participate in outdoor games. At policy level, the study criticises Iran's government for giving power to the industry and allowing them to advertise their unhealthy food products at the price of compromising public health. Limited budget allocated to community health promotion due to the poor provisional policies contributes to unhealthy diet and low level of physical activity among families in the capital (Mohammadpour-Ahramjani et al. (2014) et al., 2014). In line with the previous study among women in Tehran, Tehranian men also note that the younger generation, under peer pressure, find eating fast food more fashionable. The children's eating habits gradually transform their parents' diet and the whole family's food behaviours since they would prefer to integrate their children's food interests and tastes into their own daily meals (Farahmand et al., 2015).

4.5. Food preparation and consumption of women in Iran

This section introduces the participants' attitudes to and experiences of daily food preparation and consumption in Iran while taking into account varying features such as the respondents' social context, economic status, social class, and the time of departure as the dominant aspects shaping their food practices. Unlike the circumstances influencing the physical activity of the respondents in Iran, the cultural norms were the most dominant element affecting the food practices of the participants, irrespective of their social class. The commonality across a majority of the interviews showed the negative perception of the study respondents towards various daily food practices in Iran including the preparation, presentation, and consumption of food and hospitality. Nine participants, five recent and four long-standing migrants, frequently spoke of the lack of attention of Iranians on the impact of food on their health because for eating dishes high in fat, and salt. The link between food and illnesses was particularly discussed by those who themselves or one of their family members in Iran suffered from a number of chronic diseases such as diabetes, high blood pressure and heart disease. Mahin, a 52 year old and mother of four children, currently an asylum seeker, touched upon the role of social norms on the dietary practices in Iran in the context of frequent family gatherings.

Well, because when you see the greasy dishes you would eat in Iran, if there was someone warning you, there were less ill people. From dietary view, you would see they would put a long Sofre¹⁶ across the room and it sounded there was a competition for eating. For instance, they would compliment about the dish, how delicious it was and you would be tempted to try it, despite feeling full.

Mahin emphasised the lack of knowledge of eating various food served in their parties with the consequences of increasing number of 'ill' people. As Mahin noted the emotional aspects of the parties, emanating from the social and cultural norms, played a part for overeating among Iranians. In Iranians' parties the host usually make the guest try the variety of greasy dishes placed in a 'Sofre'. In line with Mahin's comment on the direct link between food consumption and health complications, other participants presented a

¹⁶ A long cotton, or plastic cloth, similar to table cloth spread on the carpet, and have similar function to table cloth.

critical stance on their mothers' cooking practices in Iran. They perceived the lack of knowledge of the health consequences of practising recipes high in fat was one of the underlying issue for the increasing number of patients with long term illnesses in Iran as Farnaz, a 38 years old mother of a son, raised her concern over her mother's food practices.

I compare my food with my mum's food, always I say oh, mummy, this is dangerous, she is in danger and she is, she's got diabetes, she's got high cholesterol, because of the way she cooked... just this summer holiday every day I used to say to my mum, mummy, this is not right. That's not good, you put too much oil, too much salt ... and family because you cook for them and they eat ... and before now, before it was not like this. Now, I've got more information and knowledge, what is the best diet, you know, to live, to live healthy. When I'm going to Iran, I'm telling my mum, my sister, my aunties, all of them, because they don't know, you know, they don't know how (it) affect or why this is worse, like the salt and this oil and that oil.

Farnaz, a migrant who came to the UK with a spouse visa and was proud of her legal status, identified the key role of her mother as the primary person responsible for the food preparation and food habits in the family with her direct impact on the family's health. Evidently, as her narrative indicated, she held a sense of pride and superiority over her relatives in Iran due to her resettlement in the UK which has equipped her with the knowledge of a healthy diet. Further criticism about food preparation came from some participants who identified the role of social pressures on following the fixed recipes were one of the major obstacles to cooking healthy dishes in Iran. Mahvash highlighted the cultural resistance to the change of the Iranian recipes:

I remember that that there was a person in my family, she made Ghormeh Sabzi¹⁷ with not fried vegetable. Everybody would laugh (saying) 'you see, it's not a Ghormeh Sabzi, change the name of the Ghormeh Sabzi, please'.

¹⁷ A popular traditional Iranian stew made with several herbs, black beans and pieces of lamb or beef. Herbs specifically are fried for a lengthy time, and mixed with big chunks of meat and beans. The high amount of oil required to fry the ingredients especially the herbs makes the dish greasy and tasty.

Mahvash described the challenges facing those women attempting to modify the Iranian food recipes, reducing the amount of oil in Ghormeh Sabzi. She believed they had to pay a huge price of being stigmatized or experience sarcasm by others who were resistant to the change of the taste. Furthermore, the recent migrants and refugees of younger age spoke of their frequent consumption of sandwiches filled with processed meat that in the context of migration they were no longer approved of, as Zahra explained:

Well, in Iran, we would eat more fried food, more of meat, (dishes) full of ingredients, that we thought are tastier or for instance, greasy and fried food... sweet juices and fizzy drinks, sandwiches, that we would eat twice a week. We loved them... we used to eat sausages a lot but here maybe once or twice a year.

Unlike the predominantly critical respondents, there were some study participants, mostly long established Iranian migrant women with decades of residence in Britain, who considered their diet in Iran as healthy and nutritious. In support of their claim, they referred to the high consumption of herbs and vegetables in traditional Iranian food. The three participants in this category that seemingly constituted a less dominant voice compared to the critical group, reminisced the nostalgic past in Iran for the abundance of fresh fruits and vegetables in the Iranian traditional diet. One was Tahere, a migrant with eighteen years residence in Britain, who presented a sense of pride in the Iranian diet:

Well, actually, umm, as you know the Iranian food is very nice and is very fresh, we, we do a lot of things, of fresh things and everything. We have got a lot of fruit, we have got a lot of umm, herb, and umm, vegetable we're using, which Western countries, they don't for themselves, so I kept, that that situation for myself.

The sense of superiority of Iranian diet over their Western counterpart was evident in Tahere's comment. She characterised Iranian food with freshness, probably referring to cooking from scratch, as well as consumption of fruits and vegetables in magnitude that was also echoed by Fateme. Despite Fateme's critical view on her parents' rigid upbringing in restricting her physical activity, interestingly she did not show similar experience towards the food she consumed in Iran which is apparent in her comment:

I ate a lot of fruit and vegetable like ‘Sabzi¹⁸’ and salad; I think we had a good healthy diet in Iran as well. I think it used to be everything in Iran, was fresh and still is, better than here.

In both accounts freshness of food, consumption of fruits, and vegetables in particular Sabzi Khordan, a collection of herbs, exemplified as the symbols of healthy eating, that they still follow. Nonetheless, given the magnitude of criticism over the current food practices of Iranians compared with the less dominant voices praising the diet of Iranians, I extrapolate that Iranian diet has drastically changed over the past decades.

This chapter revealed that until mid-20th century, Iranians despite poverty, maintained a healthy diet, characterised with the consumption of fresh fruits, vegetables and herbs in variety but limited in meat. From the 1950s onwards, Iran, through advanced transportation, became more integrated country with implications for the diet in which consumption of beef became a norm for Iranians who were traditionally mutton eaters. Westernization and imported certain vegetables as well as acceptability of beef led to the substitution of national dish, ash, a thick soup made with variety of vegetables and legumes, with rice, red meat (kebab) and various stews, made with red meat and vegetables. The current traditional Iranian diet are high in fat, salt, and red meat that was also reflected in the narratives of nine critical respondents. This group provided support for the above reviewed studies (Esmailzadeh and Azadbakht, 2008; Moslehi et al., 2015). Furthermore, this thesis moves beyond the characteristics of Iranian diet to highlight the underlying social and cultural significance of following certain practices related to food preparations, eating habits and hospitality in shaping the Iranian diet: the points that are missing in the current body of the literature. These aspects are related to the element of ‘meanings’ in social practice. Social and cultural norms are shown to be the major aspects in shaping the everyday eating and cooking practices of citizens in Iran as Mahin and Farnaz cited. Mahvash also pointed to other cultural norms on the resistance of Iranians to the recipe change. The central theme of the discussions of Mahin, Farnaz, and Mahvash was that the greasy dishes Iranian consumed in the context of the frequency of social occasions and lack of awareness of the health risks of consuming such food resulted in increasing number of Iranians developing long-term illnesses. As with physical activity,

¹⁸ Sabzi, refers to a range of herbs such as basil, spring onions, mint, radishes and Iranian leek served as side dish with various dishes.

social norms have power influencing the individuals' food consumption (Higgs, 2015). Social eating norms refer to the standards deemed as appropriate consumption, whether they are about the amounts of food or specific food choices among members of a social group (Higgs, 2015). People tend to model the food choices of other participants in a meal (Herman et al., 2003) and eat similar amounts of their dining partners compared to the times of eating alone (De Castro and Brewer, 1992). In the western culture, eating a small portion conveys a feminine behaviour and creates positive image or favourable impression on a partner diner who values those characteristics (Pliner and Chaiken, 1990). Overeating, on the other hand, is associated with masculinity, power and strength (Newcombe et al., 2012).

Unlike the above studies undertaken in the West, overeating is a common phenomenon in both genders in Iran. This is one of the findings of the focus group discussions in a study in north east Iran where the study participants point to overeating as a culturally accepted behaviour amongst Iranians. They compare Iranians with people in the developed countries described as body concerned (Esmaeili et al., 2016). The study participants also demonstrate positive attitudes to food high in fat but tasty, animal fat, and high fat dairy products (Esmaeili et al., 2016). While some view large body size and obesity as favourable, they associate obesity and overweight with genes and stress. In relation to the metabolic syndrome management, the respondents believe that sugar is the only food they require to exclude from their diet. Furthermore they highlight that the Iran state TV in sending confusing messages advertising salty and sugary snacks without educating the public of their health consequences especially for those with long term illnesses (Esmaeili et al., 2016). Research participants in both studies (Esmaeili et al., 2016; Farahmand et al., 2015) valued the importance of education provided by the state and health professionals in raising awareness and knowledge of public in how to prevent or manage chronic diseases. This was also highlighted by Mahin complaining of the lack of awareness of the consequences of overeating food high in fat on developing multiple illnesses.

Mahvash drew on the force of social norms and cultural pressures in following certain recipes. Indeed, social norms have power since they are associated with social judgement (approval or disapproval) (Tomasello, 2008). By adopting the norms of a group, people derive a sense of belonging that might heighten the sense of self-worth and esteem. In contrast, if not following the social norms, social sanctions or punishments might arise

(Fehr and Fischbacher, 2004) for instance, experiencing embarrassment or facing others' disapprovals (Herman et al., 2003).

Lack of awareness of the link between food consumption and health or illnesses among Iranians, as noted by a number of respondents, have initiated a number of studies. Tabrizi et al. (2016) with a nationally representing sample aim to determine the prevalence and associated factors to prehypertension and hypertension in north east Iran. They reveal that almost 100% of the study participants consume higher amount of salt than the recommended level. Their findings also indicate that half the sample have prehypertension and hypertension without any knowledge of their health conditions (Tabrizi et al., 2016).

It appears that finding reliable information for the ordinary citizens in managing their chronic diseases is a major dilemma. This is the main finding of the study by Gholami et al. (2014) highlighting that the lack of provision of health information catered for their needs is one of the underlying information seeking barriers in Iranian health care system. The health professionals in Iran tend to hold a high status about themselves with poor communication skills with the patients. The top-down approach held by most Iranian health care professionals is more apparent amongst doctors who arrogantly look down on their patients. The latter group, as a result, tend to distance themselves from their doctors. Iran state TV and radio, as the main source of public health promotion channels are unable to provide relevant programmes for patients with heart disease since they would rather to promote breast-feeding and raise awareness of addiction (Gholami et al., 2014).

Four participants in their 20s and 30s reflected on their past food habits in Iran. They spoke of their frequent consumption of fast food characterized with sandwiches filled with processed meat and served with sugary drinks. In support for this dietary practice, a study has compared the dietary habits of mothers and daughters living in the same households (Zarei and Ahmadi, 2015). The results of analysing a food questionnaire in this sample illustrate significant intergenerational differences on the dietary habits with 80% of mothers showing a tendency for Iranian traditional food while more than 50% of the young generation displaying interest in eating modern or close to modern food ¹⁹.

¹⁹ Modern food probably refers to fast food.

Moving to the long-standing participants, with 18-38 years residence in Britain, they endorsed their food practices in Iran for eating freshly made dishes, and the profusions of fruits, vegetables and herbs in their diet. In addition to the dietary change of Iranians over the past decades, the sense of reminiscence expressed by this group presents another theme about the differences between autobiographical memory and reminiscence both concerned with personal memories (Webster and Cappeliez, 1993). Rubin and Schulkind (1997), however, argue that reminiscence is concerned about conscious recollections seemingly done for their own purposes rather than used for the retrieval of specific information. Although some suggest that age does not necessarily determine the frequency of reminiscence since people of any age reminisce about their past memories (Webster, 1994), it appears that older adults, compared with younger reminiscers, use past experiences for different purposes, mostly to retrieve positive memories. Indeed, the three long-established Iranian women migrants tended to reminisce the positive aspects of Iranian diet that was in stark contrast with the recent migrants who would only recall the negative food memories.

The contribution of social practice theory to this chapter is that the force of social norms in attributing meanings to certain food and following certain recipes, despite the availability of healthy food, fruits and vegetables (sufficient materials), as before, affected the food preparation (skills and competences) of women to cook and eat dishes high in fat described as unhealthy, as well as overeating (new practices). I reiterate the central proposition in social practice in which a practice consists of interconnection of three elements: meaning, competence, and material (Shove, et al., 2012, p. 24). The current food practices of Iranians, mostly affected two elements, the social significance of certain recipes and social gatherings on the competences in creating food considered as unhealthy as well as overeating. Furthermore, the widespread availability of fast food (infrastructure or new materials) combined with the meaning attached to such food (meanings) undervalued the old historic semi-vegetarian diet that the nation practised for centuries (Matthee, 2016). With regards to the bundles of food practices, it was highly tied to cultural and social norms and socialization, whether it was eating traditional food or consuming Western sandwiches made with processed meat. The contrasting accounts of the recent migrants with those long left Iran and have still been reminiscing about the healthy food they ate were another evidence for the dietary change of Iranians over the past decades. At national level, the drastic shift in the dietary practices of Iranians, despite the availability of fresh food, shows the unwillingness of the public health authorities in

Iran in reinforcing the past healthy food consumption patterns (Matthee, 2016) through wide-scale comprehensive national campaigns. However, in the next chapter, I will explain in great detail how migration to Britain has changed the food practices of Iranian migrant participants to return to the historic food practices.

5. Food practices of Iranian families in Britain

5.1. Introduction

This chapter presents the continuity and change in the daily food practices of the Iranian women respondents after resettling in Britain. In spite of the participants' criticism of various food practices in Iran, highlighted in the previous chapter, they evidently valued cooking and eating Iranian food yet in modified version. I demonstrate several meanings and functions of Iranian traditional food for the women and their families. Continuity and change was evident in the variety of contexts and aspects related to the women's daily food routines including the meal content and meal times, frequency and participants in every meal. The chapter highlights the Iranian family dynamics in which the women used different strategies to negotiate food with their children. The remainder examines the changes in relation to the food preparation methods resulted from migration and their enhanced knowledge of healthy eating in Britain. The remainder, as with other chapters, compares the findings with the relevant literature and ends with the contribution of social practice theory to this chapter that specifically relates with two elements of meanings attached to practising traditional Iranian dishes. This explains how it influences the women's competences in practising such diet in Britain.

5.2. Food ideals and patterns

The choice of ingredients determines what food enter the body and in the long run establishes food habits. The food choices are based on conscious decisions as well as those that are habitual and subconscious (Furst et al., 1996). The life course as one of the basic and universal factors influences the food choices of people (Furst et al., 1996; Devine et al., 1999; Weisberg-Shapiro and Devine, 2016). It encompasses 'past influences of personal experiences and historical era, current involvement in trends and transitions and anticipations of future events' (Furst et al., 1996, p. 247).

In addition to the life course, there are other salient elements influencing the food choices of migrants. Ethnicity, along with ideals and roles, shapes personal food choices (Devine, et al., 1999). Ideals refers to deeply rooted beliefs, standards, expectations that provide several points of reference and comparison by which people judge and evaluate their food choices (Devine et al., 1999; Furst et al., 1996). People usually cite their food ideals by

stating “the right way”, or “a proper meal”, or “what I should be eating”, and usually need to explain why, if they do not meet their ideals (Furst et al., 1996; Devine et al., 1999, p. 88). Food ideals of Iranian women respondents manifested in their daily food preparations characterised by following the modified traditional Iranian recipes. Further, as their residence in Britain increased, they gradually integrated other cuisines such as Spanish, British, Indians, Chinese, and Italians as supplementary dishes whether cooked them at home, or eaten out.

Major life transitions such as marriage, cohabiting and childbirth that are associated with shifts in role are the times in which ethnic food ideals become more salient (Devine et al., 1999). Moreover, migration as one of the life transitions is usually accompanied with changes in migrants’ environment. Migration often reinforces reassessment of the importance of ideals, cultural norms, identities, and roles related to ethnic food choices and enhances awareness of ethnic differences (Devine et al., 1999).

Despite the importance of practising ethnic food for migrants as it has been documented in the vast number of studies (Bailey, 2017; Grace et al., 2008; Tookes, 2015; Brown and Paszkiewicz, 2017) resettlement in another country can potentially lead to various changes in the dietary practices of migrants (Satia Abouta, 2000). Most studies suggest that migration result in poor food choices, usually, characterised by the increased intakes of fat, and reduced consumption of fruits and vegetables in migrants (Satia Abouta, 2000, p. 73; Popovic - Lipovac and Strasser, 2015). Within the limited literature about Iranian migrants in Western counties, Delavari et al., (2013) find highly educated and recent Iranian migrants, mostly doctors, resort to fast food after resettlement in the country. Whereas they describe Iran’s food environment to be more reinforcing consumption of fresh fruits, vegetables, and freshly made dishes. Similarly, Satia Abouta (2000) in examining the dietary acculturation of Latino women recognises their increased consumption of pizza, hamburger, chicken, pork also vegetables.

Some argue that migrants’ children who are less dependent on traditional food, are in part one of the major drivers of the migrants’ families dietary change (Satia Abouta, 2002 & 2000; Gilbert and Khokhar, 2008). Children socialize with peers at school and expose to diverse food cultures (Devine, et al., 1999). The intergenerational differences between parents subscribing to their traditional food and children who spend significant amount of time outside their home have implications for creating conflicts within both host and

migrants' households (Vallianatos and Raine, 2008). While Devine et al. (1999) explore the food choices of participants from multi-ethnic backgrounds, they recognise that food and eating in some families, particularly, those of Black and Latino could turn the family dynamics to a battleground between the younger generation who has developed their taste for the diverse food culture, and older family members who insist on maintaining their traditional food.

The sustained exposure to Western food among migrants' children requires parents negotiating food with them. It is not only a dilemma for migrants' parents, but also an issue for the British counterparts. This was revealed through the work of O'Connell and Brannen (2016) with their mixed method study of secondary analysis of existing data and longitudinal interviews with 33 British families stretched over two years. The study attempted to describe and explain the meal patterns, gender division of daily meal preparation, the role of family incomes on diet and the power children exert over the daily food consumption. It revealed that the food choices within the British families are not only controlled by the mothers, since British working mothers can only influence the children's food choices while they are in primary school. As the children become older, they eat in a variety of social contexts, suggesting that food is embedded in 'social routines and relations' (O'Connell and Brannen, 2016). With this literature review, I present the major themes on the food practices of study participants living in the family context.

5.3. Food routines of Iranian migrant families

In the previous chapter, 'Food preparation and consumption of Iranians', a number of participants such as Mahin, Mahvash, and Farnaz expressed their critical views on the dominant food practices in Iran. Paradoxically, the women did not wish to substitute their lifetime experiences of eating Iranian dishes with Western food. Life in Britain, simultaneously, reinforced several changes in their food routines including the meal content, frequency of daily meals, meal times, and participants in each meal. Iranian women respondents endeavoured to construct the family food routines, by cooking freshly prepared dishes at home and eating at certain times of the day. Reduction of daily meals was perhaps one of the inevitable changes in a response to their family members' work and schools schedules, seemingly related to migration. As far as the Iranian meals' content was concerned, continuity and change were manifested in the participants'

breakfast eating various food choices similar to what they would eat in Iran. Breakfast food choices included bread, cheese, walnuts, eggs, milk and honey²⁰. Shiva described her breakfast that was a representation of continuity and change emanating from her migration:

Normally for breakfast I go for eggs and bread and milk definitely in the morning and ehh, since I have been to England, I've added some fruits to my breakfast but when I was in Iran it wasn't.

Shiva tended to frame the slight change in her breakfast, the added fruits, that was probably related to exposure to the wider food culture in Britain, as a positive occurrence. Unlike Shiva who recalled her experience of life in Iran as totally negative, some were not afraid of portraying a balanced picture of two countries, Iran and Britain. Fateme, who also grew up in a suppressive environment, tended to signify the continuity in her food choices as she explained:

I love my cheese, and butter, and feta cheese or umm goat cheese and because I used to have it in Iran, still that's my favourite breakfast which still carry on but we sometimes we call it Adasi²¹ the lentils, and also eggs as well, fried eggs and sometimes Cornflakes as well.

Most of Fateme's breakfast after nearly three decades of residence in Britain remained similar to her food choices in Iran. Continuing with eating cheese and Adasi²² represented the influence of taste and flavours of the food she ate in Iran on her post migration food choices. The other reason for this continuity perhaps was due to the availability of similar Iranian foodstuffs, for instance, nuts, dates, honey, butter and cheese in the mainstream chain supermarkets and ethnic food shops in London. While most of the respondents displayed minimal changes, one of the participants, Tarane, made a radical change to her breakfast food choices. Migration to the UK led her to adopt a new dietary regime,

²⁰ Several food choices for breakfast were similar to what Iranians historically consumed as I cited in the previous chapter that returns to the 19th century, see 'Food preparation and consumption of Iranians', p. 58.

²² Adasi, a dish, similar to broth made with lentils, fried onion and flour

vegetarianism, which was uncommon in Iran. She adopted this diet for moral reasons by substituting her regular Iranian breakfast with cereals:

Breakfast is one of those things that has changed a lot. It used to be just bread, cheese and sweetened tea but I, now, eat corn flakes for breakfast. I buy two, three different types with oat, wholemeal, I add almonds and walnuts, definitely honey all healthy and nutritious things for my body.

Tarane, evidently, articulated the role of migration in diversifying her food choices also justified this change on the ground of nutrition and health. She described her food choices in Iran as habitual, but her food in Britain were consciously chosen due to their health benefits. Paradoxically, nuts, which was cited by Tarane and she now consumes regularly was produced in Iran in a great scale.²³ The absence of nuts in her diet in Iran might be somewhat related to high consumer prices that could not be included to the diet of ordinary Iranians. The fruits noted by Shiva and cereals cited by Fateme and Tarane were the examples of dietary modifications stemming from migration.

Unlike Tarane taking pride in adopting new food choices, there were some, mostly recent Iranian migrants, who presented lack of interest in modifying their dietary habits. Nastaran, a recent refugee, expressed positive remarks about Iranian food. She spoke of her concern over her children's interest in cereals, perceiving them as unhealthy food. She strived to curb her children's cereals consumption and introduce some other food such as nuts, walnuts that was implicitly categorized as non-Western breakfast food:

It's too much sugar in it, so I don't think it's very healthy for them, actually that type they choose, I don't like that one. It's high sugar in it it's like so maybe two or three days a week and we have a lot of dates, honey, walnut, normally one kilo per month. For me, it's every day, maybe once a week egg and egg and cheese with the walnut (laughs) yeah, me and my husband. But, for children we need to force them "You need to have walnut, it's good for your brain" (laughs).

²³ Nuts is home to Iran and it is one of the country's source of revenues. According to the latest statistics Iran still remains as the major exporter of nuts to the world (Financial Tribunal, 2017).

Nastaran, in the above, portrayed the dynamics within her family, in which her husband and she remained devoted to the traditional Iranian breakfast such as cheese, walnuts and eggs, whereas her children grew interest in Western food for instance, cereals. The term 'force' reflected the power Nastaran and her husband exerted or the efforts they made to reinforce their food ideals to the children. The couple, hence, attempted to channel the children's taste to walnuts through linking them with brain function, a persuasion strategy.

Moving to lunch that was purposefully skipped or reduced to a very small meal. By this, the respondents intended to eat dinner with family members, husband, children and/or other family members. Family meals was meaningful for almost all women living in the family context. The members at dinner table varied depending on the spouses' work schedules, and children's age. In the households with younger age children, usually two dinner events took place in which mothers fed children after returning home from school, but would prefer to have dinner with their husband when he came back home. The dynamics within some families suggest that the family dinners functioned as a family reunion. This was demonstrated in Shayeste's account when describing the family meal routines in her home:

Then I skip the lunch because kids are at school, so I eat nothing ... the dish would be either Iranian spaghetti which I cook not very often because my husband doesn't like it, or it's rice with chicken, fish, or prawns. It's exactly a menu drawn from Iranian dishes, or Ghormeh Sabzi, or rice and stew which I usually cook a lot, because my kids love them... they eat a meal at around 5: 30 ... After that they are busy doing their homework, then my husband comes home. Then we eat, me and my husband eat together but kids tend to eat with us too and since they have already eaten, they just eat salad, because they like this gathering, all of us together.

Shayeste's love affair with Iranian dishes, regardless of leaving Iran for over a decade, was evident. Considering her two school age children who had already been exposed to various Western food, were different from Iranian dishes' taste and textures, she employed her culinary skills to cater for every taste in the family. In Shayeste's home, eating dinner together was a cultural event taking place regularly. The atmosphere at dinner reflected the family dynamics, probably a time for the parents to catch up that

would also attract children to the dinner table observing their parents and enjoying the atmosphere in spite of being fed, and probably functioned to enhance their identity as the second generation Iranians. Shayeste later talked about other benefits of practising traditional Iranian dishes:

Our house is a total Iranian house, everything, including the food. I try to cook everyday a fresh dish ... I always look for a new recipe (laughs) but only Iranian, I try to follow in my mum's footsteps. I don't know whether it's a nostalgic matter for me, but well, I like it, when I see the people who come to our house compliment my cooking and enjoy my food that reminds them of Iran, it makes me enjoy a lot (laughs), no matter how tired I am, when I come home, I tell myself I need to cook.

Preparing and serving Iranian food served multiple benefits to Shayeste. An Iranian dish refreshed her memory of Iran, represented her culture and identity to her guests who tended to admire her culinary skills. By hosting someone with Iranian food and the admiration she received, she probably took pride in her culture and identity which perhaps served to consolidate her children's Iranian identity. By following her mum's cooking style, she ensured of becoming a competent cook. Further, she wanted to move beyond the old generation's culinary skills through seeking novel recipes. Migration led to the expansion of Shayeste's food practices in which tradition and novelty merged without causing any conflicts. During the interview, her body language, her happy tone, frequent laughs all would convey a sense of competency in her parenting style and the wider picture, satisfaction with her life in the UK. She seemed to be building a new Iran in her house by practising Iranian dishes as one of the representation of her native culture or life course: past food experiences in Britain.

As previously noted, the age of children in most of the participants' households determined the number of family meals. In the households with grown up children, usually all family ate together. This was the case in the Fateme's house:

My husband come to house and I have to feed him, feed the children... for dinner, we usually eat around 7 and sometimes you know we have usually

have rice and sometimes, we have rice and with ‘Ghorme Sabzi’²⁴ or ‘Gheymeh’²⁵ and pasta. I love pasta, I make pasta as well, but try to make it with brown pasta and with plenty of salad, and also avocado, things we put in salad, spinach, lettuce, cucumber and tomato... I’d love fresh vegetables, salad.

As Fateme indicated her food choices mostly comprised an Iranian dish with added new fruits, for instance, avocados, which is not available in Iran. Different meanings attached to traditional attached perceived cooking as a way to fulfil her ethical responsibility to her husband and children. Farnaz, a 38 year old Iranian migrant who learned how to cook few years after her marriage, identified the time and efforts she invested in the kitchen, a stereotypical role of an Iranian mother and wife:

Then I start cooking, spend at least two hours in the kitchen, you know (laughs)... Iranian culture, like, umm, cooking, cleaning, washing, do everything and prepare nice food for my son and my husband when they’re coming back... I cook healthy one, not salty ... as a woman, you cook ... you know, but always I respect him, you know, any kind of food he likes I do prepare, when he coming, he’s glad, oh, we’ve got Kalam-polo Shirazi²⁶.

Farnaz linked her gender role, as a wife and mother, with her Iranian identity in which she was expected to fulfil her duty of pleasing her husband by cooking an appealing dish. Given her concern over her mother’s food preparation characterised with high use of fat (see 4.4) she was conscious of healthy cooking, a core principle of her food practices, specifically using as little salt as possible. Meanwhile, another Iranian mother, a recent refugee, was apprehensive of the widespread food outlets in the British society. Farzane differentiated between Iranian food culture, primarily requiring cooking from scratch, with British food culture, characterised mainly with the takeaways:

From my point of view, home-made dishes have a higher quality, for instance, using less oil, less salt, healthier, more hygiene and fresher. But you don’t

²⁴ Ghorme Sabzi’, traditional Iranian stew made with various herbs, kidney beans and lamb and beef

²⁵ Gheymeh, Iranian traditional stew made with split beans, lamb or beef and tomatoes, and fried potatoes/chips

²⁶ A regional dish made with rice and cabbage specific to people in Shiraz, a city in south east Iran.

know what ingredients goes to the food you eat out and the type of oil they have used...mostly because of my daughter whom I don't like to feed with unhealthy food. I am not type of person spending my time out and then ordering a cheese burger, these type of food are unhealthy, fast food are cancerous. Then for instance, here we see when kids grow up they become interested in fast food. Well, I am scared of this habit.

Farzane spoke of her ethical responsibility to her child's health. She believed it would be fulfilled through cooking a home-made dish from scratch that would give her full control over the evil ingredients such as salt and oil. She denoted British food culture as 'here', a place with widespread availability of fast food associated with cancer, which is a scaring phenomenon to her as a recent refugee mother. She exemplified Western lifestyle where probably 'lazy mothers' order a takeaway that she was disapproved of. Taking into account the easy access to 'cancerous' fast food, she, as a mother, perceived her efforts in sacrificing her leisure time on cooking a healthy dish, a moral duty. Nonetheless, the efforts Mahin, a recent asylum seeker, made over cooking a dish for her son's family, was seen by her daughter in law as an unnecessary burden as she described her everyday food preparation routines:

I have still got the same habit in Iran, despite my daughter in law, telling me 'Mum here there is no need to do this, we eat whatever we have, don't think about it, being slave of cooking for three - four hours around the stove. Relax, feel free, don't think about the dish' (laughs). But I tell her, 'No, my son goes to work, you are out and both might like it, as it's in Iran, when coming back home enjoy the smell of a nice dish.

Cooking at first glance, seemingly was a habitual activity for Mahin, who has been probably practising Iranian food for her entire adult life, yet she attached other meanings to it. She perceived the time, efforts, and labour she invested on preparing an Iranian dish a way to present her love to her son and daughter in law. Nonetheless, her daughter in law who lived in the UK for years, viewed this food preparation rituals as a time consuming labour, spent in an unpleasant environment of kitchen, and thus intended to lift this laborious task off her mother in law's shoulder. Additionally, Mahin's daughter in law strived to free her mother in law's mind from the preoccupation with food and cooking by stating 'don't think about it'. Mahin, on the other hand, found it difficult, if not

impossible, to abandon her lifelong skill and habit, the pleasurable practice of cooking in diaspora, and follow her daughter in law's advice not to cook the family meals but resorting to a Western solution, 'convenience'. This reflected multiple perspectives to food preparations from mother in law to daughter in law, stemming from cultural change through migration and adoption of alternative or 'modern' culinary practices.

In the event of women working in a full time job, or felt tired, their husbands were there to support them by taking the responsibility of cooking. In Mitra's house, a full time worker, a migrant who has been living in the UK for decades, her husband, a non-Iranian national, has learned how to cook an Iranian dish:

Nasrin: What kind of Iranian food do you cook?

Mitra: A lot of, Lubia Polo²⁷, chicken, Zereshk Polo²⁸.

Nasrin: Who cooks?

Mitra: My husband does, he's not that good, but as long as he does it, because he works from home and we all are tired and we get home, he does most of cooking.

Cooking was not a female gender role in Mitra's house. Living for decades in the UK, Mitra still appeared to be keen on maintaining Iranian food culture in the house regardless of her husband's inadequate culinary skills. What mattered was both this continuity of having Iranian food, combined with common sense, about the parent who has more time, taking the responsibility of preparing the family meal. Similarly, Nastaran, a recent refugee, who identified herself and her husband as traditional Iranians, described the dynamics within her house in which eating Iranian dishes was mandatory. Nastaran's husband took the responsibility of cooking a traditional dish by supporting his full time employed wife, because this decision was made by him.

At the moment my husband has more free time than me, so, he's going to do something like cooking, and a little bit washing dishes ... yeah, it's a share life ... So with this situation if I have more free time again do something more, but when he's free, it's not fair to leave it for me, like, I come back

²⁷ A dish made with rice, green beans and tomatoes.

²⁸ A dish made with cooked rice, and barberry used as the rice dressing

after 6, start to do something else, yeah, exactly I have college as well, assignment...

Nastaran tried to legitimize the division of domestic chores and food provision between her and her husband, which is a new phenomenon in diaspora, through the lens of equality and fairness. The family dynamics within the households with employed women such as Nastaran and Mitra indicated that they adopted strategies to continue with cooking and eating Iranian dishes rather than opting for convenience food.

5.4. Negotiating food with children

In the context of migration, it was important to negotiate food with their children if Iranian mothers wanted to practice traditional Iranian food in their households. Knowing that the children would spend a considerable amount of daytime with peers at school, Iranian women were conscious of accommodating their children's taste through cooking skills and negotiating food with them. The latter was also a reflection of their parenting style. Shayeste identified several factors in negotiating foods with her children:

Nasrin: Who is the decision maker about the dish you cook?

Shayeste: Always me (laughs).

Nasrin: How about your kids, do they eat whatever you cook?

Shayeste: Yes, they do, because I've been always cooking for them and they've been eating all sorts of dishes... I try to cook more stylish, looks more stylish for my kids to appeal to them to eat everything I cook.

Beyond the regular cooking, she paid attention to the aesthetics and presentation of the cooked dishes. The absence of her extended family might have also aided her as the main decision-maker to be able to negotiate the traditional food with her children in her own style. Nastaran and her husband, the recent migrants, used verbal explanation to persuade their children to eat traditional Iranian dishes:

Nastaran: But my husband is, we have a very traditional family so they stick to traditional food. If children don't like 'Adasi', we explain to them it's good for you. Do you want to be a doctor or engineer? (laughs) It's a medicine (laughs).

The analogy Nastaran and her husband employed, linking Iranian dishes with educational and professional success signified the high value placed on education in their household. Indeed, Nastaran associated the home-made lentil dish with her children's future ideal professions.

On the other side of the parenting style, there was only one traditional mother who noted that she offered her child to choose their favourite food. This was the case of Farnaz, whose UK born son was not interested in Iranian dishes, but Farnaz and her husband remained devoted to traditional Iranian food. To resolve this dilemma, she decided to cook a separate dish for him while she and her husband carried on eating Iranian dishes.

My son is a bit fussy for food, and some traditional Iranian food he doesn't like and I always have to cook for Dara separately. It's, like, ehh, any especially food he likes, like pizza, pasta, you know, steak, spaghetti, fish, and ehh, something different shish kebab ... he doesn't like Iranian stew. We cook for ourselves separately.

This might justify why Iranian women tended to eat in the company of a partner since they both shared similar tastes for the home-made Iranian dishes that served to refresh the memories of the ideal food they had been eating throughout their life. Further, it showed that some Iranian women were lenient about their children's food preferences and willing to satisfy their taste at the price of preparing separated dishes that required time and labour.

The family dynamics amongst the interviewees also suggested that even in the families who regularly ate traditional Iranian dishes, children were permitted to exercise their power by making food choices on certain occasions, days or times of the day. This was more noticeable when eating out, and ordering takeaways. In addition, in the families with grown up children cooking their favourite dishes was encouraged. This assisted the Iranian parents to avoid conflict by balancing the power and intergenerational differences on food choices amongst themselves.

Shayeste: At the weekend, I have no responsibility about dinner; everyone can eat whatever they like. On Sundays, the kitchen is usually closed and either my husband cooks or we order a takeaway or eat at a restaurant.

Nasrin: What do you order?

Shayeste: Takeaways, usually we order Indian food since kids love it. Curry is their favourites, we love it too, or fish and chips. If we go to a restaurant, it is either Iranian or Turkish restaurants. Sometimes my husband cooks a simple dish like omelette and kids eat Chinese because we don't like it so we order Chinese for kids who love Chinese.

In Shayeste's household, there were two groups, in which the tastes' preferences of wife and husband described as 'us', and the children were clearly different. The power balance in the family was achieved through giving the children choices at the weekend when she would give up food work to go for convenience. In Mahvash's house, her teenage children had freedom of choice for cooking a simple dish in the evenings.

And now because they make packed lunch at school, they eat at twelve o'clock, so when they come back home and eat lunch 4.30. Actually we don't have a main dinner, I don't have to make dinner like lunch but at night sometimes ehh, they make ehh, you know, sandwich, potato with steak and bake with cheese.

For Mahvash, as the above comment indicated, feeding the children a home-made Iranian dish, once a day after school, would be sufficient to consolidate their sense of Iranian identity. Moreover, she allowed her children to prepare a dish based on their choice such as baked potato, cheese and steak, none of which are Iranian dishes. This is a win-win strategy as it gave Mahvash some time to rest and the children to exercise their autonomy and being occupied with cooking, a lifelong useful skill for themselves.

5.5. Enjoying the best of both worlds

The Iranian migrants in this study whether asylum seeker, refugee or migrant, identified both positive and negative aspects in British food culture. Close inspection of the women's narratives revealed that fourteen out of twenty-two participants had a stronger

tendency to highlight the positive features of food and eating practices in Britain. Zahra, a recent refugee, compared her food practises in Britain and in Iran, including cooking and eating at home, dining out and food shopping:

Zahra: At the beginning, it was so difficult when we would go out for a meal and seeing the dish is not greasy, wasn't up to my taste, but gradually, for instance, here, they pay attention more to the heart health, healthy food and stuff like this. Then in Iran, we would eat less fruits, more food (meals) but here, salad and fruits, and vegetables...

Nasrin: How did it happen to change your dietary pattern?

Zahra: I, here, when we came, for a while we lived with one of our friends, who wouldn't eat meat nor chicken, at all, it was 10 years that she had given up eating them, ... then my husband wanted to buy meat, then, she would say 'No, we don't eat meat here, only fish and prawns', but we were meat eaters, then we started, gradually, with her, we would go out buying prawns, broccoli, potato, these sorts of things. Then, she wouldn't allow us to fry things, as she believed it was unhealthy. Then most of the food, for instance, was steamed... then she would eat them with an enthusiasm that would trigger my appetite to eat a non-fried, low fat, less salty dish with great pleasure. Well, we were hungry and craving so we would eat it with pleasure too.

Zahra explicitly expressed her positive attitudes towards British food culture for prioritising health over taste. This did not mean that she easily subscribed to the seemingly British bland food. In her struggle, she underwent stages where she eventually gave in to sacrifice the pleasure of eating dishes that she grew up on to the healthier ones. Zahra's food experience in this country, detailed in the above extract, was an example of behaviour change through cohabiting with a well-established Iranian who instructed a new refugee, on every major and minor aspects of food from shopping to cooking and eating as she described a tasteless dish. Zahra was from a generation raised on greasy, fried, and salty food who moved to a pro health food environment with the closest proximity to a mentor, her cohabiting friend that from her point of view was a representative of British culture. One can argue that Zahra's narrative was an extreme case, where her dietary change took place involuntarily through following a step-by-step advice given by a cohabiting fellow Iranians who held power over a recent arrival refugee. Nevertheless, she evidently, held positive outlook over British food culture, characterised

with healthy eating that was also cited by other interviewees. Furthermore, it suggested that Iranians, who complained of the lack of food health education in Iran, as Mahin and other participants noted in the previous chapter, became the recipients of healthy eating messages prevalent in British society rather than being attracted to the other aspect of British food culture, the widespread convenient food.

Migration that inherently was accompanied with exposure to a wider food context resulted in the participants' reflection upon the food culture they lived on for generations. On reflection, they began to question their lifelong daily food practices that resulted in making changes on some practices that they perceived unhealthy. The family structure of Iranian women, living in a nuclear family, had a synergic effect in enabling them to follow their own initiatives without fear of being stigmatised or ostracised over slight or drastic dietary modifications. This means, the women, in Britain, were less obliged to follow the food social norms, ideals and eating patterns dominant in Iran. Unlike Zahra's compulsory dietary change, Mahvash, a former refugee, now a British citizen, acknowledged the availability of choices and diverse food culture in Britain, as a new phenomenon and one of the positive outcome of her migration:

Because in here you can see different style, different culture, I think even you can choose the healthy eating style from different culture and even we can find what is not good in your culture or what is not good in here, we can, you have a choice, you find. But when you are in your culture, when you just see 'Ghormeh Sabzi' with massive oil covering on top of it, so actually we can't see there is other choices.

Mahvash presented her sense of gratitude for the diversity in food culture that widened her view to become a neutral observer and an experimenter. She evidently regarded migrants as people who are able to make rational decisions. Speaking of the food practice change, Atousa, a 28 year old migrant and a mother, pointed to the limited socialisation in Britain as an empowering aspect that enabled her to experiment with food ingredients. Most importantly, not only it was the lack of obligation to follow certain traditional Iranian recipes, she was also inspired by her English in law's family member to mix different ingredients and reinvent recipes:

Here we don't have that much communications with others, so I can experiment with food, different texture, spices, flavours, and cook something without specifically following the original recipe.

Limited comings and goings empowered Atousa to cook with peace of mind whatever she wanted without fear of stigmatisation. In other words, autonomy, diversity and choices led her to re-invent recipes. As I previously noted this might be related, to some extent, to the nuclear family structure of Iranian migrant families in the individualistic society of Britain that facilitated their food practice change. Tarane highlighted several underlying features for her drastic dietary change to turn to food vastly available in Iran but she would not pay attention to:

Nasrin: what is your opinion about the herbs we consume in Iran as a side meal?

Tarane: No, I didn't use to eat herbs in Iran, just occasionally eating only basil but now I eat plenty of them if they are on my sight... whereas when I was in Iran I would just eat cucumber and yogurt and salad I wouldn't eat olives, now there must be olives ...

Nasrin: What has led to these dietary changes?

Tarane: I think, gaining information to some extent that one should know what to eat and the fact that they are available to you, you go out and find everything you want, not only some specific items. At the beginning, they might be unfamiliar to you but gradually you see your friends have made a really delicious dish with this ingredients then you find out what a nutritious dish it is.

Tarane described her food practices in Iran as repetitive, but her migration to Britain was a turning point to pick the best of both Iran and British food cultures. Tarane, similar to Zahra, valued the food culture in the UK that improved her knowledge of healthy food, also realizing the nutritious food of home, herbs. Paradoxically, Tarane's food practices change, regular consumption of Sabzi Khordan- a collection of various herbs - that is widely available in Iran in varieties and at cheap prices, happened in Britain. She acknowledged the rich physical food environment in London that I will examine in Chapter 7. She then referred to the social food context in Britain in which her fellow

Iranians supported diversity rather than advocating only traditional Iranian recipes Tarane was already mastered in.

One of the advantages of migration on the food practices of Iranian women was the knowledge improvement that facilitated change towards healthy cooking. This was shared by fourteen respondents, who were approval of 'recipe bending'. This refers to modifying traditional Iranian recipes into healthier ones, even if it was a trivial change. The health-orientated approach of Iranian women to cooking was characterised by reducing the amount of oil, salt, and sometimes sugar in the dish. As far as the Iranian women respondents' narratives were concerned, oil was considered as the most evil ingredient requiring to be reduced to the lowest level, but the way they achieved this, was a matter of personal preferences. Rohi, a 64 year old, a former refugee, currently a British citizen, who appeared to be obsessed with her body weight, talked about her inventive method of fat reduction when preparing Khoresh Bademjan (aubergine stew):

We used to fry aubergine in Iran, but here I boil them slowly and because of obesity and its side effect ... I add one spoon oil and then add half a glass of water to the aubergine, on one hand, the oil is absorbed to the aubergine, but it is still tasty. This inventive method I developed, soften the aubergine at the same time it tastes as if being fried.

Rohi highlighted two important principles. One was the importance of maintaining the authentic taste at the same time avoiding obesity through reducing the amount of oil. She resolved the issue by mixing a little oil with water that the inventive recipe, from her perspective achieved a pleasant taste for a low calorie dish. Other methods of preparing a low fat dish was simmering, grilling or simply boiling the ingredients as Parvin indicated:

When I cook, I mostly try not to use oil, not to fry food, just boil them or grill them in the oven to appeal to the taste of my kids.

Parvin seemed to be using variety of fat reducing cooking methods, simultaneously, was conscious of preparing a dish measuring to the standards of her children's taste. Shayeste also earlier in this chapter spoke of being mindful of her children's taste preferences. Changing the recipes for health reasons without or with limited effects on the taste

required mastering cooking skills. In addition, as the primary decision maker in food preparation process, the women presented a sense of agency in following their own initiatives in establishing certain food habits in the households without fear of stigmatisation. Some women talked about the long-term effect of such food practices by identifying themselves as a positive role model. Mahvash explained how she shaped her family's dietary behaviours:

I try to make salad each time I was, I am home, I try to put, and now, my husband likes fruits. My daughter, she makes, eh, you know smoothies with all vegetable, doesn't matter taste even when she wants to make ehh, you know, scrambled eggs she puts spinach... now my son, now he just eat, you know, tomato, you know, like a fruit. My daughter, she is perfect to choose healthy things because now, they understand they saw all the time, I didn't use too much salt even she is better than me.

Mahvash, evidently, perceived herself as a positive role model in transmitting healthy food behaviours to her children. Moreover, it appeared that her children were exceeding their mother's healthy food preparation practices characterised by the frequent consumption of vegetables in their daily meals. The phenomenon where the food practices of mother transmitted to their children were one of the representations of Iranian women's sense of agency, competence in constructing food habits in the family.

This chapter drew on many aspects of food that continued to be culturally constructed concept and practice. In relation to social practice theory, the chapter focuses on two elements: meanings and competences of the food practices of Iranian women respondents living with their families in Britain. Continuity and change were visible on the daily food practices of the women, for instance, in their meal content and time, the frequency of the daily meals and in the number of participants in each meal. Whilst new added food was a common phenomenon, breakfast and dinner food choices mostly remained similar to what they ate in Iran. In line with other migrants to the West (Satia Abouta, 2000), cereals, for instance, entered the food choices of Iranian migrants in Britain. This phenomenon, however, sparked contrasting treatments. For Tarane, it was a matter of proud and a symbol of diversification of food emanating from migration. Nonetheless, Nastaran saw it as an unhealthy food because of its high sugar that required to be restricted.

Migration and different work and school schedules led to the reduction of the daily meals to two with lunch mostly being skipped or reduced to a small meal in spite of being a large one in Iran (Harbottle, 2000). This was reasoned for the absence of children at home at noon, implying that eating food were a gathering not only satisfying the biological needs (Fischler, 2011). In social sense, the food practices of the women respondents, it was evident that family meals, usually comprised of a traditional Iranian dish, were meaningful for almost all women living in the family context. The social significance of practising traditional food for the study participants was also reported in other migrant groups. Bailey (2017) specifically used the term ‘place making’ to portray the Indians’ efforts in constructing a new home in diaspora. Bailey described various place making activities observable in this migrant group encompassing making spices, pickles and even bringing specific utensils such as pressure cookers from India to regenerate memories of life in India and prepare dishes as close as possible to the taste and flavour of those of home.

The repeated patterns of eating an Iranian dish in most of the Iranian participants’ households, highlighted in the narratives of Shayeste, Fateme, Farnaz, and Mahin as the representatives of fifteen respondents, supports the notion that the staple diet could be practiced for generations and represents the resistance to change (Koçturk, 2004). Some argue that the staples are the last to be adapted to the new culture since they are symbolic representations of social role, identity and religion (Vallianatos and Raine, 2015) in migrants’ lives.

The dinner table environment discussed by Shayeste and echoed by some other study respondents have been largely discussed in literature under the topic of ‘commensality’. It was defined by the act of sharing a meal (Mennell et al., 1992) or ‘eating in the company of others’ (Sobal and Nelson, 2003) and the ‘manifestation of human sociality’ (Fischler, 2011, p. 2). However, commensality is beyond simply eating with others. Supposedly when people eat together, and bring them closer to each other it creates ‘bonding’ (Fischler, 2011, p. 8). Of various types of commensal eating family constitutes the core and fundamental commensal unit and the privileged group for sharing a meal across different ethnic groups (Sobal and Nelson, 2003). Commensality functions to create and strengthen the relationships amongst the individuals sharing a meal, for instance, social ties (Mennell et al., 1992). Further, it leads to the construction of identity through interactions with others, the restrictions of this activity according to the social rules, and the protection

among the group members (Fischler, 2011). The social norms that govern shared meals, for instance, table manners, help to construct and strengthen the behavioural patterns expected by the members of a group in interactive situations. Commensality is a relevant example of constructing food norms amongst people belonging to a group, particularly relevant to children (Ochs and Shohet, 2006).

In addition to the cultural and identity construction, food preparation, homemade dishes and serving family members was discussed from ethical lens. Farzane, a single mother, and very recent refugee, perceived her time and efforts on cooking a healthy dish as her moral duty. This phenomenon is describes as ‘nutritional altruism’ (Crawford et al., 2010) that comprises a variety of situations with the central meaning of making right choices with regard to the quality food and doing the right thing for others. The term combines the notions of love and obligation to safeguard the wellbeing of children and family members.

Food was also functioned to regenerate the past memories. The food practices of Mahin was not only to feed her son’s family an evening meal when all returned home, but also a way to reminisce about Iran. As Mahin explained, she endeavoured to regenerate certain scenes, for instance, the smell of the hot freshly cooked meals filled in the house (Bailey, 2017) for her son and daughter in law. Mahin’s reference to the smell of the dish and the nostalgic role of cooking Iranian dishes was also noted by Shayeste who stressed on the social benefits of doing so in hosting guests in the context of family. It signifies the power of cuisine for the migrants in ‘revitalizing’ their pasts, and life history where they lived. In the book, *Remembrances of repasts*, David Sutton (2001) examines the everyday food practices in Kalymnos²⁹. He argues that smells and taste are integrated senses. He then focuses on the evocative power of smells in revitalizing memories that is particularly relevant to migrants who left the country of origin for short or long term. In this debate, he indicates that smells are more easily connected to ‘episodic’ than ‘semantic’ memories such as life history, memories that tended to be emotionally charged. To articulate the power of smell on memory, Sutton cited several authors, for instance, drawing on the work of Sperber who remarked that ‘re-experiencing smell may function to revive memories that could be more captivating than smell itself, more repetitive than the original desire one had to identify it’ (1975, p. 122). Borrowing from Fog Olwig and

²⁹ An island in Greece

Hastrup (1997) Sutton suggests that food might be analysed as a cultural site and is especially relevant to migrants' lives within the fragmented societies where migrants by practising their traditional food, regenerating smells, and taste they reconstruct the 'wholeness' of a culture.

Harbottle (2000) also depicted the everyday food routines of Iranian families in Manchester. In her anthropological and sociological work, she stressed that managerial responsibility of food preparation still lies within Iranian women who see this task as a way to strengthen their identity, status and power. Consistent with the findings of this study, Harbottle asserts that cooking a nutritious food for Iranian women who perceive themselves responsible for the health of family, echoed by Farnaz, Farzane, and Fateme, was to satisfy individual's psychological needs that was also highlighted by Mahin and Shayeste. Further, through responsibility of cooking a meal and bringing the family members together to eat, Iranian women ensure of the family cohesion and integrity that involves emotional as well as manual effort. This brings a sense of pride, respect, status, fulfilment and connections to the family members (Harbottle, 2000). Bailey drew on the collective homemaking activities of Indian diaspora in the Netherlands, where they used their spices and family recipes to reconstruct sensorial experiences such as smell, sounds and taste. He labels these activities 'sense of olfactory belonging and the rhythms of life' that ultimately serve to revitalise the memories of eating meals with those they shared food with (Bailey, 2017, p.56).

With regards to the respondents employed in full time paid jobs, I quoted Nastaran, a recent refugee, who is supposed to be responsible for the family food preparation in Iranian cultural, yet she and her husband, having a consensus on menu planning (Harbottle, 2000). The findings of this study are in line with the observations of Harbottle (2000) acknowledging that in spite of the patriarchal society of Iran, those Iranian men who were competent in cooking, particularly enjoy this activity or have more free time are very regularly involved in cooking an Iranian dish for the household. The phenomenon is also prevalent in other migrants' communities such as the Barbadians in the USA (Tookes, 2015) and the Polish in the UK (Brown and Paszkiewicz, 2017) who are less favour of gender roles division in food preparations. Given men and women of all classes in the contemporary societies are engaged in the workforce, the Barbadian men appear to be more competent in cooking than women (Tookes, 2015). Life in diaspora facilitated the change in gender division of food provision to be a flexible, not a rigid

social construct assigned to women only (Lorber, 1994). The two study respondents in full time employment, one, Nastaran, with four years of residence in the UK, whose spouse took the responsibility of cooking, were similar with Mitra with four decades of residence in this country, it can be extrapolated that migration did not seem to affect their food practices as long as the couples maintained a positive attitude towards homemade traditional food. This phenomenon is in contrast with other studies highlighting that migrant families' busy work schedule and responsibilities hinder women from preserving and practising their traditional food (Mellin-Olsen et al., 2005). Weisberg-Shapiro and Devine (2015) recognise that cooking traditional home-made meals is not simply a matter of intention and positive attitude to cooking. They argue that it requires culinary and meal planning skills with affordability, and social and emotional supports. Exploring the food routines of Latino migrant women in San Diego and New York, Weisberg-Shapiro and Devine (2015) realise that those women who habitually involve in cooking are able to construct food routines in their household that can save time on daily decision-making processes over food preparation. On the contrary, those who are unable to do so for various reasons, such as lack of social support, severe financial constraints and inadequate cooking skills, present a disrupted eating pattern without commensal eating with family that ultimately led to resorting convenience food (Weisberg-Shapiro and Devine, 2015).

Throughout this chapter, I portrayed the Iranian women's efforts in maintaining their traditional food culture by cooking home-made dishes regularly. Generally, the women did not face major obstacles in negotiating food with their children. Of twelve women living with their children, eleven strived to transmit their own food interest in eating Iranian traditional food to their children. I exemplified the strategies of Shayeste, Fateme, Parvin and Mahvash on food negotiation in their household, in which the family came to an agreement to eat mostly a traditional Iranian dish for dinner, as the main daily meal, while children were occasionally given choices of Western or non-Western food. As far as the family dynamics within the participants' household were concerned, there was no signs of substantial conflicts over the food cooked and eaten that is in contrast with a study of multi-ethnic participants I reviewed earlier in this chapter (Devin et al., 1999). I also presented Farnaz's food negotiation style in which she cooked different dishes for different tastes in her house. The similar practice cited by Dominican and Chinese mothers whom in response to the Americanised children's taste were willing to cook a separated dish for their child to avoid argument in the house (Satia Abouta, 2002).

The other food practices of the respondents in the UK was their attention to the taste, simultaneously, avoiding obesity through reducing the dish's calorie. I demonstrated the testimony of Rohi who highlighted two important principles when preparing a dish by mixing little oil with water that from her perspective her inventive recipe achieved both, a low calorie and tasty dish. Discussing the authenticity while modifying traditional recipes, the Barbadian migrants in Atlanta, USA, used similar patterns. Barbadians in response to the hectic American lifestyle, the complex lengthy recipes, limited availability of the ingredients, and the health complication of the traditional recipes consciously modified their traditional food, still regarded them as authentic and traditional. Food in this migrant community perceived a way to express their solidarity and distinguish their ethnic identity from other African groups and Americans rather than only following the recipes (Tookes, 2015).

The above noted positive changes in the dietary practices of Iranian women are in stark contrast with other studies in Britain involving minority ethnic groups who present resistance to change. For instance, Lawton et al. (2006) recognise that South Asians have been regularly consuming their ethnic food despite concerns over the potential health risks associated with the food. The study participants assert that if they refuse eating traditional food they might risk social alienation. Moreover, Grace et al. (2008) realise that older generation of the South Asian women tend to oversee the food practices in the household and give advice to the younger generation females to ensure them of following their traditional recipes. In the event, when the younger women decide not to follow the hospitality norms that advocate offering a generous menu to the guests, for the sake of health consequences, they could experience or encounter 'a moral conflict'. Nonetheless, the younger and second-generation South Asian women tend to resist conforming to this food culture. The above reviewed studies indicate that the influence of social context, in which the proximity of the extended families and wider community limit the power and freedom of women in following their knowledge of maintaining a healthier diet. Whereas, as I noted earlier, it might be the Iranian women's social context for residing in a nuclear family that has empowered them to manipulate the recipes without fear of stigmatisation. Further, with regard to the inter-generational dynamics of Iranians within the British society, it has been reported that older generation of Iranians hold a liberal view towards the British culture (Communities and local government, 2009).

Applying social practice and its dynamics to this chapter, it reveals that social and cultural significance of practising traditional Iranian food (both related to the element of meanings) for the respondents. This was displayed through the participants' regular commensal eating and carried multiple cultural, social and symbolic meanings. The commensal meal, mostly comprised of traditional Iranian food, prepared at home from scratch. The time and labour spent on preparing a traditional dish was perceived as a moral responsibility of a woman in raising a healthy family. The practicing Iranian traditional diet served to unite the family, transmit Iranian food culture to the next generation, strengthen the family's identity and refresh the memories of Iran. The other food practices discussed in this chapter related to the category of 'competences' in social practice. Iranian women respondents appeared to be competent in using their own initiatives in establishing their family food preferences and taste around a traditional Iranian diet. In doing so, they regularly cooked Iranian dishes whilst occasionally alternating them with other cuisines. The great desire to eat Iranian traditional dishes was a strong driver to overcome any obstacles especially within the families with employed women. In these households, the couple usually tended to divide food works and house chores amongst themselves. The same desire led the Iranian parents, mostly mothers, to overcome the intergenerational food differences by negotiating food with their children. Of several strategies used, one was through cooking traditional dishes while accommodating different tastes within the family. The other was occasional power sharing by giving children some degree of freedom of food choices, for instance, allowing them to order or cook their favourite dishes. Nonetheless, some took on the burden of cooking different dishes on a daily basis.

Again with regards to the element of 'meanings' of food, different respondents perceived the British food environment differently. The dominant voice admired the diverse food culture, availability of choices and improved knowledge of a healthy diet and appreciated their life for being re-settled in the individualistic society of Britain. This was because many Iranian migrant women, regardless of their migration status and education, felt privileged to have freedom of choice in adopting new food practices, alongside their traditional food. The nuclear family structure of most Iranian migrant families in this sample positively influenced the women's competences in implementing their own initiatives by constructing certain dietary practices in the family. This phenomenon was not seen as a sign of loss of identity nor perceived as compromising the authenticity and taste, rather considered as a rational decision towards adopting a healthier diet. The

women's dietary changes were attributed to their improved knowledge of healthy food (competences), stemming from exposure to the food culture and the health messages prevalent in British society. Social context also played a large part in building the women's competence and it was reinforced by fellow Iranians who advocated novel and healthy recipes. The regular practices of healthy food facilitated by the women's migration to Britain led some of the study respondents to perceive themselves as healthy food role models for successfully transmitting such practices to their children. This was also a representation of the women's agency within the new social structure (Giddens, 1984) in establishing food habits of the family. Looking at the wider context, it should be noted that the individualistic society of Britain played a positive role in allowing the women to practice their common sense without fear of stigmatisation. In relation to the bundles of practising traditional Iranian food, it was evident that it recursively performed in a specific time (dinner) when the family members or the couple routinely gathered around the table (space) with or without children (social activity). It required the women, and occasionally their partner to cook (tied to cooking skills). Furthermore, it also requires shopping, and access to the relevant materials (ethnic and non-ethnic food stores) that I will explain this element in Chapter 7.

Along with the voice of the critical participants, in this chapter I also presented the less dominant voice of those who were dissatisfied with Western food culture. Some participants, mostly recent refugees with young and school age children, raised their concern over the widespread convenience food outlets, which they identified as the main factor for the higher prevalence of child obesity in Britain than in Iran. Three women in this category perceived this phenomenon as the underlying reasons for poor food choices in Western food culture. Simultaneously, they argued that the UK food environment (the abundances of ready-made food in stores and fast food outlets) had affected the competences of Westerners, exemplified by lazy women ordering and eating ready-made burgers. Nonetheless, they were proud of Iranian culture that valued preparing home-made dishes from scratch. In other words, while the healthy eating messages were so appealing to the study respondents, some aspects of Western food culture (ready-made and convenient food) were not. The strategy of picking, healthy eating messages and diverse food culture, and mixing with their own traditional Iranian cuisine was due to the value (meanings) attached to food in raising healthy family as the main priority of the women. I cite Pred's point that in the context of migration, certain projects dominate people's time and energy with implications for the accumulation of competences (Pred,

1981). It is worth highlighting that healthy eating messages prevalent in British society, was not an uncommon phenomenon since part of the healthy eating that includes eating fresh fruits, vegetables and herbs have been deeply embedded in Persian culture even among poor (Matthee, 2016). Migration for Iranian women was a turning point to return to the food of their ancestors that in contemporary Iranian society was no longer culturally and socially approved of. This was regardless of the women's legal status; being an asylum seeker, a refugee or migrant did not seem to make huge differences in the type of food consumed. In Chapter 7, I will draw on the food infrastructure (materials) as another important element contributing to the study respondents' healthier diet in the UK than in Iran.

6. Empowering and disempowering

6.1. Introduction

This chapter presents various features influencing the physical activity of Iranian women in Britain. It begins with an overview on the literature on the participation in physical activity among minority ethnic groups and migrants in the western countries that in some Iranian women participated. I then contextualize the respondents' comments by highlighting the specific influence of previous life experience in Iran on their perception of the obstacles to physical activity. Of many issues influencing the physical activity of Iranian women in Britain, I specifically draw on the participants' family social class in Iran. Furthermore, this chapter reveals the key role of social network in particular the presence or absence of inspiring people on the frequency and regularity of Iranian women's engagement in physical activity. I have detailed the intra dynamics within Iranian community in London and its implications for the physical activity of the recent migrant women.

As I noted in Chapter 1, systematic reviews indicate that migration to Western countries usually leads to physical inactivity (Caperchione et al., 2009). The reviews identify an array of the challenges to the physical activity of migrants including cultural and religious issues, perceptions of health and injury, loss of social capital and social isolation, socioeconomic challenges, and environmental barriers including different climates (Caperchione et al., 2009). In identifying the barriers to the physical activity of ethnic minorities, most of the studies conducted in the UK, tended to recruit members of South Asian communities. The findings suggest that the women's spouses and elder members in the family and the community in wider scale hold a negative view on the participation of women in physical activity. This is because, culturally, women were expected to fulfil their responsibilities around the household and childcare duties (Babakus and Thompson, 2012). Other studies reveal that some practical obstacles are responsible for the low participation of South Asian women in physical activity (Jepson et al, 2008; Koshoedo et al, 2015; Grace et al, 2008). These obstacles include lack of previous experience of physical activity in a western sense, for instance, wearing sports clothes, and/or devoting part of daily time to leisure time to physical activity.

In Chapter 1, I also touched on other obstacles to participation in physical activity of Iranian women by presenting the findings of two studies undertaken in Australia. Both studies emphasize the impact of stressors associated with migration in diminishing the physical activity of Iranians. One, comprising highly educated Iranian migrants of both gender identify stress as only a temporary issue, which was seemingly resolved once they assimilated into Australian society (Delavari et al., 2013). Whereas the other, recruit migrant women including Iranians from low socio-economic status who describe the daily life stressors as persistent challenges emanating from various sources. The women highlight the difficulty in communicating with family members, as well as members of the host society as the major causes of frustration and social isolation (Gholizadeh et al., 2012). Stress and depression are not only prevalent among Iranian migrants, it has been reported as one of the obstacles to participation in physical activity among many women from culturally and linguistically diverse backgrounds in Western societies (Caperchione et al., 2011). Stress and depression are indicative of wider mental health problems which many Iranian migrants in Western countries suffer from. For instance, Akhavan her team (2007) used semi-structured interviews to identify females' perceptions of various factors influencing their health. They found that unemployment, and financial issues resulted in mental distress in Iranian women in Sweden. Tinghög and colleagues (2010) particularly focused on the association of mental ill health and other factors within diverse migrant populations in Sweden. They found that 48% of Iranian migrants both men and women suffer from depression. High suicidal attempts was also reported among Iranians in different European countries despite low rate of suicide in Iran (Lipsicas et al., 2012).

Lack of social relations and social capital in the host country are other contributors of decreasing motivation to participation in physical activity of migrant women from culturally diverse backgrounds (Caperchione et al., 2011). In chapter 3, the study participants demonstrated the positive role of community in contemporary Iranian society in which family members, colleagues and old school friends inspired one another to maintain physical activity. Nevertheless, the analysis of dynamics of Iranian community in Britain suggests that it suffers from lack of social cohesion (Spellman, 2004). Some argue that this is not a new phenomenon, nor is confined to the UK, but it is a widespread issue in Iranian communities across the Europe (Honarie et al., 2016; Malek, 2015). Kathryn Spellman (2004) in her anthropological work spanning two decades portrays the complexity of the Iranian community in Britain in the 1980s and 1990s. In demonstrating the community issues in the 1980s, she argues that 'the sensitive political situation in Iran,

the social pressures in London, the divisions and mistrust between various Iranian networks and the Iranian self-perception of being sojourners' at the beginning then 'settlers' did inhibit them from building their Iranian identity. Her descriptions of the social development in the community over the next decade reveals not much change in the community dynamics. Her observations in the 90s shows that many Iranians consciously attempt to stay away from other Iranians they did not know to be able to construct non-Iranian friends. A strategy that would enable them to fit into the British society (Spellman, 2004). Similar dynamics emerge in a Europe wide study of Iranians resettled in various western European countries. The findings suggest that Iranians, beyond their own families, tend to distrust fellow Iranians, whilst having high levels of trust towards members of the host society (Honari, et al., 2017).

The fragmented nature of the Iranian community might be due to the fact that they are a heterogeneous group coming from a wide range of backgrounds and social classes including working class traditional families, westernized bourgeoisie and elites (Mostofi, 2003). Nilou Mostofi believes that the diversity is extensive since Iranians constitute of multiple religions, and ethnicities including Muslim, Jewish, Baha'i, Zoroastrian, Christian, Turkish, Armenian, Azerbaijani, Kurdish, and Assyrian groups. From immigration backgrounds, they are refugees and asylum seekers, immigrants, expatriates, students, families, and individuals. She describes Iranian diaspora as a heterogeneous group who 'lived unique lives in Iran and endured extremely distinct experience during the revolution' (Mostofi, 2003, p. 685).

Amy Malek (2015) in portraying the practice of being Iranian outside Iran supports the notion of the fragmented Iranian community by relating the lack of community cohesion to the individualistic tendency amongst Iranians initiated in Pahlavi era. Adding that the individualistic perspective and practices are positive features for goal setting, wellbeing and self-development, she simultaneously advocates a degree of participation and exchange. She argues that some Iranians blame their parents and upbringing for not emphasizing how to make a balance between individualism and shared practice, establishing ties and cooperating with other Iranians. Malek (2015) believes historically, the Western modernization ideology and practices that places high value for individualism, freedom and economic prosperity was institutionalized decades prior to the time Iranians migrated. It was the 1979 revolution with economic and political instability and the subsequent Iran - Iraq war that created a sense of suspicion and distrust

among Iranians whether in Iran or abroad. From her view, the host society promotes individualism too. She stresses that the host society endorses individualism rather than facilitating building community cohesion. She concludes that lack of community cohesion results in marginality and downward economic mobility (Malek, 2015).

In the following sections, I will present the overarching themes that represent the influence of the respondents' life experiences in Iran in their perception and practices of physical activity in Britain. The remaining sections also demonstrate the effect of personal and social elements in enhancing or decreasing their physical activity in Britain.

6.2. From perception to practice

There was a commonality across all interviews, in which the respondents presented positive attitudes towards physical activity. They emphasized the importance of performing regular physical activity for maintaining health and mental well-being. The general knowledge of women about physical activity varied from a minimal movement to involving in regular exercise but it did not reflect their educational level, nor did it correspond with their commitment to engage in regular physical activity. Shiva, for instance, a 37 year old student and a refugee, defined physical activity that corresponded with a minimum level of movement within her home environment:

In my point of view, physical activity means when you move your body, it could be walking from your room to the kitchen, to the bathroom, going downstairs, upstairs, I call it physical activity (laughs).

Despite her simple definition of physical activity, Shiva appeared to be leading an active lifestyle as her daily routines indicated:

When we finish school I prefer to go to the gym for 45 minutes ... because I go to college, I force myself not to take all the route by bus, I try to walk part of the route ...this helps me to maintain my health ... When I sit somewhere and don't move I feel depressed ... when I do physical activity, I don't think too much.

Being mindful of the level of her physical activity, Shiva integrated it into her daily routines by attending a gym regularly, also forcing herself to walk for commuting. She tended to avoid a sedentary lifestyle throughout the day. Although Shiva did not articulate her knowledge when defining physical activity, in practice, she was fully aware of the health and mental health benefits of physical activity. Her emphasis on the role of physical activity was also to prevent mental health illnesses such as depression. It also helped her with preoccupying thoughts linked to anxiety and worries that probably indicated her vulnerability to them in her day-to-day life. Through physical activity, she was able to retain a healthy body regardless of being indoors or outdoors. It appeared that being physically active functioned to soothe her anxiety, to alleviate her interfering thoughts and to improve her depression, so in practical sense, physical activity maintained her physical health and boosted her mental well-being.

For Mahin, physical activity meant ‘walking’ outside her home. Unlike Shiva who accounted for indoor physical activity, Mahin, a 52- year old housewife, discredited house chores, perceiving them as obligatory tasks with no health benefits:

When one walks even if it’s slow walking you become relaxed, but if you are at home no matter how much from morning you bend down and stand-up this is not an activity, anything you do is a routine and one must do it ... if you are at home no matter how much from morning you bend down and stand-up this is not an activity, anything you do is a routine and one must do it.

As a stay-at- home asylum seeking woman, she differentiated between house chores defined by obligation, repetitiveness and a lack of intensity, and outdoor activities seen as voluntary physical activity. She then outlined other health benefits of physical activity:

But walking outside home is very good. I wish I was healthy and could walk briskly. Also you should sweat which in sweat so many harmful things will be cleared by sweating, the blood is diluted, heartrate regulated, since in my opinion when one walks slowly sounds like an ill person, well, I am ill and sometimes I feel unwell so I have to walk slowly but walking briskly is much better...but when one walks briskly they use the weather, nature, and psychologically feels happy.

For Mahin, who has developed diabetes, high blood pressure and heart disease, walking played a pivotal role in maintaining her health. According to Mahin, walking was a way to ‘sweat’ which has associated health benefits: purification of blood and improving heartrate. She did not perceive walking per se as being beneficial. She also stressed the benefits of brisk outdoor walking and the pleasure of the scenery which were not achievable when she remained at home doing routine house chores. Despite her limited education, Mahin strived to highlight the physical and mental health benefits of brisk walking. However, she explained that her several chronic diseases limited her ability to do so. In this battle with Mahin’s temptation to speed up her walking pace, she would rather not jeopardize her health status.

On the importance of brisk walking brought up by Mahin, three other interviewees, not only valued vigorous physical activity but also and tended to assess their daily physical activity by its outcome such as fitness, weight loss and change of body size. They emphasized formal physical activity, for instance, performing intensive physical activity at a gym, running on treadmill and swimming. Five respondents used physical activity and exercise interchangeably. This perception caused them to underestimate their daily walking in a park, to school, to baby groups, and to libraries. In this group, for instance, Atousa, who I interviewed in a local park while walking with her child in a pushchair, voiced her opinion of fitness:

Nasrin: How did you find your walking with your child in a pushchair?

Atousa: We go to some places; this park is one of them. We go to classes ... I walk, but, well, in my opinion, it’s not considered as an exercise that much because I don’t feel I’m fit.

Nasrin: How would you feel when you were fit?

Atousa: It was mostly based on running that I saw it as very thing, because I could see I was really sweating and how much I was sweating. It was an exercise for me, the other things were not exercise from my view. Then I see, the more I go to the gym the more I can run, then I can understand that OK, I’m fitter now because I can.

Similarly, as with Mahin, vigorous physical activity mattered to Atousa when assessing her physical activity levels. In her comments, physical activity was equivalent with

running on a treadmill leading to ‘sweating’, as well as fitness and stamina that were the outcomes of ‘exercise’.

Returning to the definition of physical activity, what Atousa and Mahin shared was the emphasis on vigorous physical activity and its outcomes. Otherwise, anything else was doing a minimum level of physical activity that was also reflected in Parvin’s definition of physical activity. Parvin, a 44 -year old mother of two children and a housewife, a former refugee then British citizen, articulated her understanding of physical activity:

In my view, physical activity must be routine like eating that you eat three meals, physical activity is similar to that. For instance, it must be on a specific time based on your age and weight your health condition you should set a specific time, three to four times a week knowing that you must do exercise whether in a gym or going for a walk.

From Parvin’s point of view, physical activity was an obligation for an adult. Her definition of physical activity featured: regularity and frequency, timing, and commitment that all corresponded with formal physical activity. Nevertheless, her knowledge did not reflect her performance as she acknowledged:

It’s been a while that I don’t go out specifically for walking ... In the past I used to go, on certain time but not anymore ... sometimes I might go for a walk with my daughter ... I don’t think my physical activity benefits me, no it doesn’t, it must be more than this, in my opinion.

Parvin’s occasional walking on her own or with her daughter seemed insufficient. Not acting upon her knowledge, she was dissatisfied with her sporadic walking. In comparing the respondents’ perception with their personal assessment of their daily physical activity, it was evident that knowledge did not necessarily translate to action. Some with basic knowledge, dedicated some of their free time to it, but others despite knowledge did not perform sufficient level of physical activity. The following section examines the perception of the study respondents of various personal and social elements influencing their physical activity. As such, I begin with the personal characteristics that some participants considered as the key drivers of physical activity of women.

6.3. Motivation, willpower and time management

There was a common tendency amongst mostly well-settled participants who would see women as independent adults with great control over their daily schedules. Eight women in this category believed that in this country, there was no barrier to physical activity of women, and Iranian migrant women were no exception. Demographically, they had years of residence in Britain, and were familiar with their surroundings. They believed that there were sufficient facilities in the society; hence, obstacles were the excuses of lazy women uninterested in engaging in physical activity. Taking into account the obstacles raised by the respondents in Chapter 3, 'Mixed memories of physical activity in Iran', the first positive outcome of migration to the UK for some was the absence of the Iranian government's mandatory hijab. Further, for those who experienced oppressive upbringing, migration was corresponded with freedom of the socio-cultural boundaries imposed by their families because of their gender. In the absence of the issues they experienced in Iran, resettlement in the UK meant living in a safe heaven, free from any interferences, and following their own initiatives in leading an active lifestyle. This was reflected in the perception of Shayeste, a married Iranian migrant and mother of three children of the obstacles to physical activity of women:

There's nothing (laughs) nothing, it's you who have to have a will power (laughs), you have to set some time and do this. For God sake, tell me what barriers exist, what barriers do you see, if you want go out for a run, you can go whether you put on a coat or are naked, going to swimming pool or not going, going cycling or not going. It's you the only decision maker.

Shayeste's emphasis on motivation, the availability of choice, the ability to make decisions and freedom of dress code, were all implicitly reflective of the obstacles she experienced in Iran. These all reveal her belief in the importance of agency. The other noticeable point was her gender-neutral view on the freedom of dress code in this country in boosting the motivation to participation. This, also, to some extent, linked to the dress code restrictions imposed on women by the Iranian government. Additionally, for Shayeste the relaxed view of British society about people's dress code seemed to be a determining factor for engaging in physical activity in public. The trace of past life experiences was visible in her understanding of obstacles to physical activity. As she described, setting time for performing different types of physical activity such as running,

swimming, cycling were all indicating the importance of planning for engaging in formal physical activity. In the absence of the state initiated and cultural restrictions on physical activity of women, it appeared that migration has empowered Shayeste, as a woman, over her life to gain agency, to become 'the only decision maker' for participating in any types of physical activity on any dress codes. In Chapter 3, 'Mixed memories of physical activity in Iran', I also presented a comment from Mahvash, who was critical of the gender role expectations stemming from Iranian traditional culture that would discourage girls from playing games or sports from childhood onwards. Here in Britain, she portrayed her daily routines that was a representation of her sense of autonomy in scheduling her time:

Because at the time, when I went to gym, to be honest, I tried to do my cooking, and cleaning quickly done, even I would go once a day to primary school, teaching assistant voluntary job, you know. I do that even when I go to gym I try to come back home by walk not by bus, because I feel OK, if I come back I can, you know, do more burning, more calorie and my size was 8-10, you can't believe that, but after that you can see, if you want something you can do.

From Mahvash's point of view, it only required one's willpower and motivation to engage in various types of physical activity. In the above, Mahvash, who appeared to be multi-tasking, took every opportunity to keep active and to burn calories while doing her daily routines. It appeared that she did not need much external support in fulfilling multiple daily household chores and outdoor responsibilities as a mother. Women, like her, must be powerful, independent, energetic, motivated, and extremely organized to achieve any goals regardless of their busy daily schedules. If they do so, there would be several rewards including improving well-being and achieving a slim body size. It appeared that perception about the power of 'self' and motivation in engaging in physical activity was not restricted to those belonging to the traditional families. Mitra, a long-standing Iranian migrant coming from a liberal family background, shared similar views. Prior to presenting her perspectives on physical activity, I firstly described her daily routines:

I'm a member of gym which is next to my office and sometimes two three times a week, at lunchtime I go to the gym; go to spinning classes ... and for my social life I do rambling on Saturdays or Sundays.

Mitra, whether on weekdays' lunchtime or weekends led a lifestyle filled with different types of formal physical activities. Yet, she did not deny the constraints of motherhood and childcare in limiting the ability of a mother to participate in physical activity. Apart from the period of raising a very young child, she believed barriers were all created by or the excuses of lazy people. She similar to Mahvash and Shayeste pointed to the key elements in participation in physical activity, decision-making, time management and willpower when identifying the barriers to the physical activity of women as she explained:

Laziness, yeah, and sometimes people might not have time. But I think a lot of people have got excuse that I don't have time, but in my opinion, you can make time if you want to ... because I'm a full time worker and I've got a quite stressful job ... I travel quite a lot, and but if you put in your mind that I want to do this, I think people can make time ... I've seen people around me, oh, I can't do that, I don't have time, and you're sitting and watching a TV ... please just get out, I think, it's laziness. There might be something you know, if someone have got baby, obviously, that's different but generally once your children reach a certain age that you don't have children to look after being little, I think everybody can make it.

From Mitra's view, our 'mind' creates excuses for inactivity and laziness. Similar to Mahvash, she exemplified her own busy workload to show how her determination to stay physically active would not allow her career's stresses interfere with her leisure time physical activity. According to Mitra, it was the individuals who ultimately decide how to spend their free time. The other nuance point in her comment was engaging in physical activity required one to sacrifice some of their sedentary leisure time of 'sitting and watching TV'. What she was referring to was physical activity should be valued and integrated to the daily life of women at the cost of sacrificing some pleasures. Mahvash went through the daily life of housewives, by examining the barriers to physical activity through their lens, and then challenging them:

I think some criticize, make lots of barrier for women. I have to clean the house, I have to clean the kitchen, I have to make the food ready, and then I have to go and bring kids home. OK, when, for example, when can I find a time to go out? but 20 minutes, 30 minutes it's not gonna affect your lifestyle.

While she acknowledged the responsibility of housewives around childcare and house chores, women, from her point of view, were responsible adults that should make some efforts and value their own health by designating some time, separated from their daily chores, to physical activity. What both Mitra and Mahvash believed was that women must be resourceful and multitasking, regardless of their busy workload, and further, they needed to tick all health behaviour boxes including participation in physical activity. There was no sign of the impact of multiple household tasks on the women's energy or the likely tiredness nor did they see the need to receive some assistance in attending to house chores and childcare. Interestingly, emphasis on motivation, planning and scheduling time separated from daily household was raised by the respondents who identified themselves as not physically active women. Shahnaz, a full time worker and longstanding British Iranian who has been living in the UK for nearly four decades and also has been looking after her elderly parents, found that her lack of motivation and pleasure were the underlying reasons for not engaging in physical activity. Although she used to be physically active, on a business trip abroad for six months when she used to attend gyms regularly. She even refused to recognize her multiple responsibilities at home, in addition to her work duties in creating obstacles to her physical activity:

Laziness, and lack of enthusiasm, that's it. I don't find it really, I don't know, I found other things much more umm, probably kind of enjoyable than doing that ... state of mind really, I just wanted to do it, nothing really, my state of mind was just you know happy to do yoga and you know nothing really. I just motivated, to do it, now, I don't want to do it.

Shahnaz attributed her previous sporadic engagement in physical activity to motivation that she no longer had, hence, describing herself as a 'lazy' person. This section, repeatedly demonstrated the women's strong belief in personal characteristics for engaging in physical activity. Nonetheless, there are further underlying challenges to performing physical activity that I will discuss in the following sections.

6.4. Family dynamics: continuity, support and limitations

Moving to the UK for Iranian migrant and refugee women was corresponded with leaving the people they grew up with and their community behind, subsequently living within a

smaller social network. This change had implications for handling their daily routines, especially for those coming from close-knit family backgrounds. They had to rely on their immediate family for accomplishing various daily chores such as grocery shopping, food preparation, and childcare to name just a few. In the absence of their extended family, friends and colleagues whom they left in Iran, Iranian women's spouses became their primary supporter in managing daily housework. They provided a range of support from verbal encouragement and guidance to practical support encompassing childcare, attending to house chores, cooking a meal, transport and a company in the events of participation in different types of physical activity. This was the case for eight respondents with children of different ages. The help of the spouses was more crucial for the new arrivals such as Zahra, a recent refugee, who prior to her migration was managing her own business, as an interior designer and artist. Following her resettlement in Britain, and due to her limited English skills she was unable to transfer her artistic skills to the British society. Hence, she began to learn English language and a new profession. In this journey, Zahra, regarded her husband's support pivotal to her integration into the British society:

You know, my husband constantly recommends me to go to this course, take more courses, insisting not to stay at home, he keeps telling me: I'm doing all house chores and cooking but please don't stay at home, try when you go to English lesson speak to your fellow classmates. Any progress I make is with his push (laughs) go to swimming, go to the gym, take our kid to the ballet dancing...

In the previous chapter 'Food preparation and consumption of Iranians in Britain', I highlighted the support from the spouses of employed women in cooking homemade food. In this chapter, I present other types of support from the women's partners. For instance, Zahra's husband, in addition to offering support with house chores and childcare, verbally encouraged her to socialize in different spheres of British society, including physical activity. Although registering for apprenticeship courses is free of charge, her husband supported her by assisting with childcare and housework. This gave Zahra space and time to engage in a variety of educational, social and physical activities. His approach towards learning new skills was through education rather than watching TV, as he emphasized, taking courses and attending English classes that required her to leave their home environment. His guidance in encouraging Zahra to speak to her English

language school classmates, as Zahra acknowledged, was a way to break her social isolation and improve her confidence in speaking English with members of other ethnic groups, ultimately facilitating her assimilation into British society. Similar to other study respondents, attending a gym, and going to swimming pools were ideal ways of participation in physical activity, although she used to undertake these activities in Iran prior to her migration. Interestingly, in spite of being a regular mosque worshiper, Zahra was encouraged by her husband to enroll their children in ballet dancing classes, a banned activity in Iran. This might reflect the couple's moderate Islamic view towards different leisure time activities through involving their children to synchronized activity from very young age. There were occasional references to the support of family members such as children and grandchildren accompanying the women on walks. With three participants in this category, I exemplify Mahin's narrative. As a 52-years old asylum seeker, who left some of her family members in Iran, believed that her grandson in the UK played the role of a company and great motivation for a walk.

I go out to a class and at 3 pm pick up my grandson, and come back by walk, my grandson likes walking even if I ask to take the bus he objects and says no granny let's walk, yeah, he, at least is a motivation for me to walk too.

Mahin, who previously, in Chapter 3, noted leading a more physically active life in Iran, still, appreciated this companion. The walking journey to and from the nursery not only provided Mahin the chance to leave her home and stay physically active, she also supported her son and daughter-in-law by picking up their son from the nursery when they were at work.

In spite of varying support from family members for their female relatives, the sustainability of the support was not sufficient to ensure that the women respondents could regularly engage in physical activity. This was because the women's social network was restricted to their immediate family whose competing tasks, whether it was due to work or study, would interrupt the continuity of their shared activities. This was the case for four study participants who could not rely on their spouses', or their children's support in maintaining regular physical activity. Meanwhile four other participants highlighted that their childbirth was a cause for long-term leave from their full time job, given the cost of childcare and the absence of extended family who would otherwise have provided such support. In this instance, the male head of the family became the only breadwinner,

which had implications for joint leisure time physical activity amongst the couples. Nazanin explained how she quit walking accompanied with her husband because of his long shifts:

I used to go for a walk with my husband but his work shifts has extended, so not doing anymore.

Nazanin's unsustainable physical activity was also an indication of lack of control and planning in engaging in physical activity that could also reflect other issues such as her limited social network. I also showed in the previous section that Parvin did not continue her walking in the company of her daughter who was involved with her studies.

6.5. Liberation from socio-cultural and state pressures

Earlier, in the section 'Motivation, willpower and time management' I touched on the impact of migration on the perception of the obstacles to the physical activity. Four respondents from traditional families emphasised the freedom of dress codes as well as autonomy, decision making and planning in engaging in physical activity. All these factors implicitly referred to the freedom from interferences by others in participation in physical activity. For this group, migration was equated with freedom of social, cultural and state pressures. In Chapter 3, 'Mixed memories of physical activity in Iran', one of the participants, Fateme, spoke of her experience of enduring constraints imposed by her parents because of her gender, where she was not allowed to play outside her home with other children whilst her brother was free to go cycling and play football. Her resettlement in Britain, on the other hand, opened new horizons to her to pursue the types of physical activities she had previously wished for. In addition to her regular daily walking especially in the summer; her husband facilitated other types of physical activity:

Actually, my husband made a small gym at home. But still I'd like to go outside but when the weather is not good I try to use the gym... I learned the bike... my husband helped me to ride a bike and had helmet and everything flasher thing for safety (laughs)... if the weather allow me to go outside, I just go for just maybe 20 minutes, half an hour walk just walking, not just going shopping or something else ... because I need to do exercise, to refresh my

mind, and it helps me mentally because I get depressed if I don't go outside and don't walk.

The dichotomy, inside vs. outside, visible in Fateme's account showed the importance of outdoor walking for her in releasing her tension and boosting her mental well-being. This was also mentioned by Mahin who described the indoor house environment as tedious and monotonous. The other point in her account was her awareness of the importance of physical activity for her health; hence, she designated different environments for engaging in physical activity, for instance, in bad weather using the home gym and in good weather doing outdoor walking. Her lifestyle and daily routines were all indicatives of her perseverance in engaging in a variety of physical activities for achieving the optimal physical and mental health benefits. As the above comment demonstrated, her husband played a role in improving her physical activity. Fateme's husband, who also grew up in Iran, did not seem to follow Iranian traditional culture norms that expects women to remain at home. In Britain, he not only did not impose any restrictions, but he also facilitated Fateme's engagement with a variety of activities such as setting up a mini-gym at home, purchasing some bicycle equipment and even teaching his wife how to ride a bike, which her parents had forbidden her to do. The narratives of thirteen women, living with their spouses, displayed the supportive approach of Iranian men towards their wives' engagement in various social and physical activities irrespective of the women's length of residence in Britain, immigration and financial statuses. In this chapter, Zahra, and Nazanin both recent refugees, and Fateme a longstanding British citizen were all acknowledged their husbands' support. Despite the limited scope of the support, at least for Nazanin, it was a step towards eliminating the women's sedentary lifestyle and social isolation.

I already quoted Shayeste's comment in this chapter, where she denied the existence of any obstacles to physical activity of women in British society by referring to the freedom from dress codes in this country which implicitly related to the constraints of physical activity of women in Iran. She later identified the contributions of migration in enhancing her physical activity levels:

I think here I'm more physically active than there (laughs). We, there, were more limited to home, I don't know, I have left Iran 12 years ago, at the time I had just started my job. Besides I was slim and perhaps wouldn't think that

I need physical activity (laughs), but no, here I'm more active, because there's less limitations ... If you want to take your children to the swimming pool, for instance, Could I take my son to the pool if I were in Iran? No, ... There's another thing, here, I have to take my kid to school but in Iran you don't have to take your child to school, you hire a private driver... here, if I want to run, regardless of my body shape, no one looks at me to say 'Oh look at her she's so fat even and can't walk but she's running'. But if it was in Iran, you get hundreds of verbal abuse. Secondly, where would you go for a run? But here, it's not important, no one judges you, here you are feel relaxed; you can wear whatever you like.

Shayeste compared her lifestyles in Iran and the UK from various angles. Similar to Shiva and Fateme, her life experience in Iran was firstly a reflection of her family socio-cultural background where she, as a woman, was commonly expected to spend most of her free time in home sphere and more likely to be sedentary. Her laughter also denoted the impact of her perception that anyone with a slim body shape would not need to engage in physical activity. She then moved from the home sphere to the society, where Iran government only permitted participation in physical activity in the segregated sports facilities, seen as another obstacle to the physical activity of Iranian families. She felt the mixed gender swimming pools in the UK facilitated her physical activity in the company of her son and daughters together. She believed the widespread street harassment in Iranian society an issue for the women's participation in physical activity. This, along with the presence of judgmental people openly making derogatory remarks about women with large body size exercising, could potentially discourage them from performing physical activity in public. All this would amount to a lack of safe and pleasant spaces for women in Iran to participate in physical activity. From Shayeste's point of view, neither of the above dilemmas existed in the UK and this was the reason why she felt more physically active in this country.

6.6. Role models

Not only did the absence of judgmental view on women's body size in British society boosted the study respondents' motivations to go out frequently, two women spoke of other inspirational scenes in public. Tarane, a 50 years old, and mother of three children,

a former asylum seeker, then refugee, currently British citizen, believed females' runners in the streets were positive role models in inspiring her to engage in physical activity:

Seeing all beautiful and fit women with slim body shape you come across here and that how many women even run on the streets, and you see how important is exercise to them by even doing it under the rain, or in the sunshine has an impact on you that you must shake your body and move ... at the beginning I would watch them with surprise, well, we hadn't seen such scenes in my country ... then gradually I realized that this is good that even if you have no money you have to do it.

Tarane drew attention to watching women running on the streets which for her was one of the positive features of living in this Western country. The other key point in her accounts was praising the exercisers for their commitment and perseverance in practising physical activity. Having frequently watched exercisers in public, Tarane strived to challenge her perceptions of the obstacles to physical activity such as financial constraints in joining a gym and the weather adversity that was also highlighted by other respondents. Despite her admiration, in practice, the outsider role models had minimal effect on boosting her motivation to go to the gym when she was demotivated. Tarane, who was suffering from mental health problem, described the occasions when she was in low mood.

If my mood is down, I don't like to speak to anyone, just want sit quietly, and entertain myself with my laptop. Since my friends are living far away from me, so I can't socialise with them all the time. Sometimes it's my daughters who push me, saying 'Come on mum, how much you sit down with this laptop, you are putting on weight, leave it'. Because they see that I'm very sensitive to obesity and don't like it, or when they go to swimming pool ask me to join them.

In the event of feeling unmotivated, Tarane found her friends could encourage her to be active. Furthermore, practically, it was her family members, daughters, who could persuade her to go to the swimming pool. This indicated that her admiration for women exercising might be working in the back of her mind but when it came to real life complications, such as depression or lack of motivation, she needed human interactions

from her friends and family members in breaking her sedentary life. This resonates with the role of face-to-face communications and in general social networks in general as an important element in boosting the motivation of migrant women to participate in physical activity. Similarly, Atousa, 28, a migrant with over a decade of residence in the UK, firstly praised the joggers on the streets but still held reservations about the extent to which this phenomenon could lead to her commitment to regular exercise. From her view, the admirations would not lead to action, if in reality she faced tangible obstacles:

Well, um, um, here we see people exercise comfortably, they exercise a lot, eh, people, I can see them visibly, then how fit they are. Well, it sort of encourages one, but it hasn't inspired me to exercise. It hasn't inspired um, means it hasn't pushed me very much... I would say, the point is that since I can't find women only swimming pool.

Her reference to 'comfortably' might imply that Westerners have integrated physical activity to their daily routine. She then separated herself from the physically active people by identifying herself as unmotivated, when her several attempts to pursue her favourite physical activity were unsuccessful. I will discuss these issues in the following chapter.

Taking into account Tarane and Atousa's comments, given their personal complications, the potential positive role of the physically active Iranians in boosting the motivation and confidence of other Iranian migrant women in engaging in physical activity could be instrumental. This was an issue raised by Mitra, a longstanding British Iranian, a physically active and a rambler. Owing to her neighbor who once encouraged her to join a rambler group in London, Mitra did not know how to connect with other Iranians and inspire them to this regular walking:

I always say to people 'come on let's walk', and the all know I'm walking, I have not managed to (motivate) some of my Iranian friends (to) walk."

Why Mitra, a migrant with 40 years of residence in the UK, was still unable to motivate other fellow Iranians perhaps due to the complex dynamics within the Iranian community. The issue was brought up by four Iranian migrant women in this sample who talked about the difficulty of making a reliable social network in Britain. I will discuss this issue in the following sections.

6.7. Dealing with losses

Unlike the respondents who found their resettlement in Britain was a help in leading a physically active lifestyle, migration was seen as a hindrance to nine refugees, and two migrants. They believed their migration, at least at arrival point, was accompanied with enduring varying degrees of stressful life events as the consequences of the loss of many privileges they had held in Iran. For instance, the loss of emotional and psychological supports from their extended family or the community, loss of career, financial stability and status that all affected many aspects of their everyday life. The initial experience of migration for some Iranian women applying for an asylum to the British government and even after obtaining refugee status was overwhelmingly challenging. Of seven women who spoke of their life experiences in Britain as asylum seekers or refugees, two respondents specifically noted that the stressful life experiences at arrival and in the following years caused them psychological trauma and even lifelong mental health problems. As new arrivals, establishing a basic life in a foreign country brought about new priorities, such as finding accommodation, employment, and for those with children, enrolling them in a school. This was the case for Nazanin, a middle class Iranian, who enjoyed many privileges before moving to the UK. In the following extract, she portrayed the first months of arrival and living as a refugee, explaining why her physical activity in Iran was much higher than in Britain:

When I immigrated to the UK, I lost my middle class standing and financial stability. I arrived in a country where there were more important matters for me to be concerned with, such as finding a suitable place to live and a decent job so that I can bring my children up in a suitable environment. ... I stopped thinking about myself and taking care of my health, which caused me to lose weight dramatically. At the beginning of my arrival, I lost about 10-15 kg. They were awful circumstances because I had lost my social status and identity which I had back home. I didn't feel a sense of belonging to where I was living. These factors led to a sense of self-doubt and confusion and it psychologically affected my wellbeing and I couldn't think of my physical appearance. When I first emigrated here I lost weight then I gradually put on weight, due to the lack of physical activity. I had lost my career and became an unemployed mother. I had to stay at home for long hours and spend my

free time with my children. Cooking was the only pastime which would comfort me.

Nazanin, in her narrative, depicted the interrelated social, professional and financial implications of migration on her health and well-being. She portrayed the life complications for a middle class who were unfamiliar with various aspects of the new society simultaneously had to establish herself and bring up her children. Whilst in Iran, looking after her body shape was a priority a way to fit into her social network that I highlighted in Chapter 3 'Mixed memories of physical activity in Iran'. In Britain as a refugee, she had to cope with enormous losses and in these circumstances, exercise and dieting became peripheral matters. By separating her 'self' and body from the list of her everyday agenda, she could probably focus on more fundamental issues required for her family's survival. She had arrived in a country where she could not speak the language of the majority, therefore, her qualifications and job experience were not recognized. This caused her financial hardship, loss of her position, and status with deeper detrimental effect on her sense of identity and belonging to this society. Meanwhile, her husband and she still needed to earn sufficiently to be able to raise their children. The psychological impact of mounting pressures initially caused her weight loss, but then gradually food became a friend. Weight gain which was strongly avoided in Iran now became a new phenomenon not only due to the lack of physical activity, home was also a place she would cook and eat, a new pastime that she never practiced in Iran since she had variety of activities to engage in and people in her social network to spend time with.

It was not only the refugees with dependents, such as Nazanin who underwent psychological stress. Ghazal, a single female refugee, described the multiple stressors she experienced over the past six years of her arrival. Similar to Nazanin, she situated herself by describing her lifestyle in two worlds of past and current to explain how she became so sedentary:

My physical activity level is very low ... I have nowhere to go, mostly staying at home ... I've got depression, during the day, if I feel OK, I go for a walk for an hour, otherwise just sleeping ... When I moved to the UK, my depression got worse". My immigration status, the pressures from my family to return to Iran, all added to my depression ... When I was in Iran, I would go to yoga, three times a week, three times to English lessons, mountain

climbing once a week. In the afternoon, I would walk from work to home. I have never been as inactive as I am right now ...(In Iran) I would go for a walk in the evenings with my mum and sister ...(here) I wanna go for a walk but I can't find a walking buddy to go out with... I took a friend out walking but seeing her starring at her mobile phone all the time, demotivated me.

Ghazal's story was multidimensional, in which she had to handle various life adversities without a network support in guiding her, comforting her daily life stressors and providing her a company. Her attempts to build a social network in this country yielded limited success. In the presence of various problems, she was not successful in making bonds with the members of both Iranian and the host communities. This resulted in the sense of loneliness as the underlying reasons for her lack of motivation to engage in physical activity. She contrasted her current life in Britain as a lonely asylum seeker to her life in Iran, where she used to fill her leisure time with a variety of physical activities; mountain climbing, yoga and walking. This was a representation of the absence of a community or a reliable network for mostly recent Iranian migrant women.

6.8. Fragmented Iranian community

In analysing the interviews indicated that several factors such as the migrants' resilience, their legal status, and support networks were key in overcoming the migration problems. Although four participants coming from legal routes spoke of stressful life, even feelings of loneliness and depression but the length of pressures for those in this group was far shorter compared to other seven refugees who endured overwhelming daily life pressures over the first few months and for some even years of arrival in this country.

As far as the interviewees' experiences in the UK were concerned, lack of social cohesion in Iranian community might have a role in the women's frequent expressions of enduring stress, sense of loneliness and depression. Some were suspicious of interacting with other Iranians whom they described as intrusive people intending to dig in to their private life. The negative references to other Iranians in the community was noted by nine women who either tended to purposefully avoid social contact with other fellow Iranians or were critical of the unfriendly reactions of Iranians in social contexts. In the first group, Aida, 29, an Iranian migrant recounted her early memories that despite feeling lonely then experiencing depression, she would still prefer not to approach her fellow Iranians:

I didn't find Iranians interesting, because they have made a small Iran (here) with different cultures and groups ... which is much worse than home, with all competitions, jealousy, gossips going on, and if you want to socialize with them they cause you trouble... I'm happy to communicate with Europeans. We never talk about our life, it's just about how to communicate with our kid.

Aida found Iranians as a group, materialistic people engaged with rivalry or social comparison. At face value, Aida's response was to protect herself from the likely effect of gossip and rumors but lack of trust in anyone in this community was more evident in her narrative. Her choice of acquaintances, Europeans, as she explained, was to maintain a relationship that would not go beyond small talk on parenting. Meanwhile, more established fellow Iranians seemed to be instilling mistrust towards other compatriots among the new arrivals. Ghazal's recollections of the first few months of her arrivals illustrated the lessons she learned from her relatives;

In the first few months of my arrival, I used to live with my relatives, but they didn't like me communicating with other Iranians. They would tell me not to trust anyone in the society that would scary to me.

The negative perspective of Ghazal's close relative that in the initial interview seemed frightening to her, gradually changed her attitudes towards fellow Iranians. In fact, in the subsequent interviews, she was convinced by the justification of her college friend who found disconnecting with other Iranians would pave her path to successfully settling down:

I have a friend who found a partner; she decided to cut off her friendship with all of us in the college and said to me 'Don't spend your time with Iranians to be able to focus on your own life'.

Seeing other Iranians as a hindrance to a successful resettlement and avoiding them to ensure a peaceful life without interference in British society was echoed by four women in this study. One of the respondents believed Iranians tended to preach others even if they were not asked for. On the subject of lack of cohesion in the Iranian community, six respondents expressed a sense of envy towards other minority ethnic groups i.e. Turkish,

and Afghans described as cohesive communities for supporting one another. On the other hand, there were six interviewees who were willing to expand their social network. The latter group, regardless of their legal status, education, and length of residence in Britain, believed that communication with other Iranians was a way to buffer the psychological impact of living in a different country and contribute to their mental well-being. Mahvash, who during the interview, spoke of weekly or fortnightly social engagements with other Iranian families, she met at an Iranian school that was not only a way to enjoy their company, they also did group physical activity at school too. She, nonetheless, highlighted the communication challenges within the community:

You know, it is only us, Iranians, who dislike one another. I have seen this from right the beginning of my arrival in this country. I was advised by other Iranians not to enroll my children in the schools with high number of Iranians ... but it did not have any impact on me nor on my husband since we are well connected to so many Iranians ... but you don't see this attitude in other minority ethnic groups, for instance in Afghans.

As Mahvash explained, her husband and she, as 'well connected' migrants, had to resist the negative recommendations in expanding their circle of network. This demonstrated the pervasive and dominant negative perspective towards other fellow Iranians within the community.

In this chapter I presented several themes on the perception of and factors influencing the physical activity of Iranian migrant women in Britain. In keeping with social practice theory, the themes mostly related to the meanings including the personal, and social significances of physical activity for the women respondents, irrespective of their legal status, whether an asylum seeker, refugees or migrants. The respondents offered a range of definitions from movement at minimum level to participation in formal physical activity or exemplified a type of physical activity. The commonality across all the interviews was an emphasis on the physical and mental health benefits of physical activity. There were references to maintaining regular physical activity preferably outside home with several women stressing on planning and setting some time separated household responsibilities, for specifically participating in physical activity. These were in line with the definition of exercise and generally formal physical activity (WHO, 2011) and probably related to the demographic of the study sample were urban dwellers. Of 22

study participants, 21 had at least high school education and beyond, and were interested in spending their free time on social media, reading posts on Facebook, What's App about health and mental health topics. This perspective also underlined the importance of the availability of places such as gyms and parks as the favourite spaces for the study participants' physical activity, given they highly valued brisk walking in parks or going to the gym to engage in vigorous physical activity.

The understanding of Iranian women respondents of physical activity shows both similarities and differences with that of black and minority ethnic (BME) groups in particular South Asians in Britain. The similarities between this study and those conducted amongst South Asians, highlights the importance of physical activity for improving health (Grace, et al., 2008; Lawton et al, 2006; Jepson et al., 2008). The difference here was that most of the Iranian women respondents valued outdoor physical activity to such an extent that some believed their daily household activities had no contribution to their overall physical activity. On the contrary, Lawton et al (2006) in interviewing 31 Pakistani and Indian adults with diabetes found that despite the vast majority of the participants' knowledge of various type of physical activity, few believed that daily prayers or helping family members in a shop corresponded with performing sufficient level physical activity for an adult.

The visible influence of individualistic perspective was evident in the respondents' comments talking about the positive contribution of migration. This group emphasised leading physically active lifestyle in the UK, due to the liberation from interferences of others on their daily schedules. I exemplified the accounts of Shayeste along with three others who believed that the barriers to physical activity limited to the social and cultural norms and the government rules that only existed in Iran. Whereas life in Britain liberated them from all of these pressures that resulted in participating in regular physical activity.

Of the other individualistic perspectives presented by five participants were frequent references to motivation, willpower and time management as the main personal factors for engaging in physical activity. This group also viewed women as the responsible adults who should make rational decisions and be motivated at all time. This group stressed that women's household and childcare responsibilities as well as work demands should not be viewed as a hindrance to their physical activity if they sacrifice some of their leisure time on physical activity. Although three women who expressed this attitude did not

necessarily do so. For instance, Shahnaz attributed her previous sporadic engagement in physical activity to motivation that she no longer had, hence, describing herself as a 'lazy' person. Motivation positively associated with physical activity (Bauman et al., 2012) but denying other obstacles in engaging in physical activity could be a reflection of individualistic perspectives of the participants who were strikingly coming from a collectivist culture (Hofsted, 2001). This also supports Malek's point on the individualistic perspective and practices of Iranians promoted in Pahlavi era (Malek, 2015). Migration to the West, in this study, to Britain, might have facilitated the adoption of concepts related to the individualistic perspectives such as willpower, decision-making, goal setting and planning in achieving goals that Iranians also showed high score in Hofsted's (2001) cultural test.

Unlike the cited studies focusing on women from minority ethnic backgrounds in the UK where the women's spouses and elder members in family prevented the women from outdoor physical activity (Babakus and Thompson, 2012), the respondents' family members, in particular their partners were their main supporters of participation in physical activity. They offered varying forms and degrees of support, from verbal encouragement to join a gym to practical support by providing childcare and companionship for physical activity. This phenomenon is in line with the observations of Harbottle (2000) who acknowledges the differences between Iran as a patriarchal society and the supportive approach of Iranian men towards their spouses in Britain. There was another discrepancy between the findings of this study and others involving Iranian migrants. The narratives of support from the women's family members, I presented so far, for instance, Fateme's husband; setting up a mini-gym at home and acting as a sports instructor in riding a bike was in contrast with the experiences of migrants in Australia. The study that comprised female participants from Iran and Turkey who stress that their head of family either sends subliminal messages discouraging their spouses from going out for a walk or finds no value in investing on the gym memberships for participating in physical activity (Gholizadeh et al., 2011).

Nevertheless, the degree to which the study respondents' family members, especially spouses could make a tangible support in improving their physical activity was limited. For instance, Nazanin's physical activity with her husband was ceased because of his long shifts. This supports the findings of Jepson et al.'s (2008) study in which families tend to do little activity due to their work commitments. Although some fathers attempt to take

their children to cycling, and/or swimming and mothers strive to take children to park to get some physical exercise but family activity is often predisposed to disruption.

Those women from traditional family background attempted to deconstruct the restrictive gender role expectations stemming from their upbringing that would discourage them from social and physical activities. Migration empowered the women of this social class, who strived to re-establish a new construct of gender in which a woman, wife, or mother should be a powerful decision maker who needed to manage their time effectively. This also did not support the previous studies that lack of previous experience was a barrier to women's physical activity in diaspora (Jepson et al., 2008; Koshoedo et al., 2015; Grace et al., 2008).

Further, Shayeste, a migrant along with two other refugees, advocated mixed gender gyms as a positive phenomenon of migration in improving their physical activity, in the company of her family members. This is in line with the experiences of Iranian migrants in Australia. The study participants of highly educated Iranians felt satisfied and were able to go to the gyms with family members or with an opposite sex that they believed has contributed to enhance their motivation to maintain a more physically activate life (Delavari et al., 2013). Shayeste also took pride in herself for walking her children to school as a means of transport, which from her view, was in stark difference with the pervasive practice of driving children to school in Iran that could be a reflection of lack of neighbourhoods' safety in Iran. This aspect is also related to infrastructure, that in practice theory relates to the element of materials and I will explain in the next chapter.

Iranian women participants admired Western women exercising in public and considered them as physically active role models, for their persistence in engaging in regular exercise, their slim body shape. Nonetheless, in reality, people in their social network appeared to improve their motivation through verbal encouragement and practical support. This highlights the complexity of the mechanisms boosting motivation also raises this question 'What role models insiders or outsiders might have optimal effects on the physical activity of people from minority ethnic backgrounds?'. Most of the qualitative studies suggest that the role models stemming from the community can improve the adults' motivation in participating in physical activity. In Britain, Jepson et al., (2008) found that South Asians were in favour of role models from their local communities who could organize physical activity event, lead group walking or motivate

them to join swimming pools. Similarly the minority ethnic women in an American study stressed that they did not find themselves as exercisers unless having someone in the community they could exercise with they would be motivated to do so (Eyler et al., 1998). Focus groups consisting of migrants and refugees from Cambodia, Mexico, Somalia, and Sudan residing in the US suggest that positive role models who are part of the community and have successfully incorporated physical activity into their daily routines are more likely to motivate the migrants to participate in physical activity (Tiedje et al., 2015).

For the recent migrants, the most dominant consequences of migration were the loss of the privileges they have held in Iran; for instance, the loss of social network, career, social standings and financial stabilities amongst many others. Language barrier was a major challenge to finding paid employment. The recurring patterns stemming from the life stories of five refugees portrayed their situation, coming from socially connected and financially stable backgrounds to an unfamiliar environment in which majority at the point of entry had limited English language fluency that subsequently constrained their ability to communicate and approach members of the host society. The limited financial constraints, as Nazanin, a middle class Iranian and a refugee explained, created further limitations on different leisure time activities for instance, joining the gyms, paying the cost of childcare that she would comfortably do in Iran. Hence, she had to spend most of her free time at home to reduce the overall family expenditures. This also affected her social life and ability to make new friends. As Pred (1981) noted, migration brings other priorities and main projects to people's life. Physical activity once was integrated into the daily routines of Nazanin, Ghazal and Zahra, three refugees, who now face many other obstacles to overcome.

The dynamics within the Iranian community in Britain and the issue of distrust of other Iranians played a large part in diminishing the women's motivation to participate in physical activity. The recent migrants, as they reflected on their daily life prior to their migration in Iran, were inspired by people in their social network but in the absence of such community in the UK, they were demotivated to go out, nor did much physical exercise at home. The frequent negative references of the respondents to other fellow Iranians resulted in some women purposefully avoiding other Iranians. The sense of suspicion and distrust of other Iranians appeared in this study, are the indicatives of the fragmented Iranian community in Britain (Spellman (2004) that also seemingly a Europe wide issue (Honarie et al., 2017). Malek (2015) argue that lack of community cohesion

marginalises the migrants with implications for their social mobility (Malek, 2015). In support of the Malek's argument, this thesis showed that the fragmented Iranian community in London, for the Iranian respondents whom majority at the point of arrival lacked English language skills affected their competences because they were deprived from receiving support and guidance of the well-established Iranians. It subsequently affected their coping mechanisms in facing with the initial demands of life, and smooth transition to the British society. Lack of community cohesion led the women to adopt a sedentary lifestyle in many ways. Lack of relations with other Iranian migrants along with the absence of any organized support network for Iranian women (Communities and Local Governments, 2009) caused them to spend their free time at home due to lack of motivations to go out. The issue was compounded with the women's financial issues arising from the limited sources of family income further restricted them, as they did not want to add further costs, gym memberships and crèche, to the family expenditure. This was a new phenomenon, as I earlier exemplified Nazanin and Ghazal, two physically active women in Iran whom in Britain became demotivated to participate in physical activity; food on the other hand became a friend, a coping mechanism by soothing the tensions of related to migration. Meanwhile, Mitra, a long-established and physically active migrant who identified the power of relations with inspiring and like-minded people; her neighbor, in introducing her to rambling, did not know how to motivate other Iranians to this path.

In a nutshell, there is no fit for all. The individualistic society of Britain brought so many privileges to the lives of some, but marginalized others. The first group felt liberated from the pressures originating from family, culture and community (change of meanings). Moreover, liberal Western culture, with default mixed gender leisure sport facilities (new materials), initiated family physical activity for three participants, who identified this as another novel and positive experience of migration. The second group, comprising mostly new arrivals who came from vibrant, well-connected contexts, found that migration corresponded with a loss of inspiring community. This led to the deprioritization of physical activity that once was part of their 'routinised daily life' (Shove et al., 2012) in their home country. The application of social practice theory to the findings of this chapter suggests that motivation and competence in performing physical activity are related to the size and connecting with a circle of physically active enthusiasts. This chapter also demonstrates the implications of migration and legal status for quality of life and mental well-being of the new refugees. The narratives of Nazanin and Ghazal showed the huge

psychological pressures of living as refugees, even though, back in Iran, they lived a comfortable, middle class lifestyle. On the contrary those who came with visa had better support either from their sponsor, or as Phillimore (2011) argues perhaps was due to their preparation for the journey.

7. Navigating the new society, challenges and resources

7.1. Introduction

This chapter explores the perception and experiences of Iranian women participants of different features in the physical environment in Britain. It includes the weather, neighbourhood safety, and mainstream mixed gender sports facilities on their participation in physical activity. The chapter continues to demonstrate the impact of inequality on the accessibility of appropriate sports facilities on marginalization of migrant Iranian women in particular those of low income and practising Muslims. The information seeking behaviours of the study participants and its implications on their awareness of the available services are examined. The remainder provides a detail of the perception and experiences of the physical and social food contexts. This comprises the women's access to the chain supermarkets and ethnic food stores on the continuity with practising traditional Iranian food. The chapter ends by highlighting the Iranian women migrants' money management strategies given their families' tight budget in the context of migration.

This chapter investigates the impact of physical environment on the physical activity of the study participants that in social practice theory fits with the element of 'material'. The physical environment can operate as a facilitator of or inhibit physical activity (Stokols, 1992). For instance, proximity of a park or fitness facilities to one's home can improve walking; conversely, it can result in physical inactivity for people residing in geographically unsafe areas (Stokols, 1992).

Adaptation with the weather in the host country could affect the physical activity of migrants when there is a great climatic difference between the country of origin and the host country. This is the case of the South Asians who identified the UK weather, a challenge to their participation in physical activity. They express their profound sense of discomfort for going outside in the cold, wet and windy weather (Lawton et al., 2006). Similarly, the face to face surveys with South Asian migrants in the USA reveal that Chicago's cold, snowy and windy weather that differs dramatically with their home country's climates, would affect their leisure time physical activity (Daniel et al., 2013).

The weather differences highlight the importance of access to indoor spaces such as sports facilities in enabling migrants to participate in physical activity. Nevertheless, the extent to which these facilities are equally distributed or accessible to migrants are debatable. Within the migrant communities, those with religious affiliations face barriers accessing the segregated leisure sport facilities (Lawton et al., 2006; Grace et al., 2009; Jepson et al., 2009).

Access to facilities, to some extent, is related to the ways people navigate their environment or their information seeking behaviours. A study by International Organisation for Migration reveals that Iranians would favour printed materials to be informed of the ongoing initiatives (IOM, 2007). Moreover, receiving guidance from health professionals such as GPs is another favourite method that Iranians along with other minority ethnic groups would prefer to improve their knowledge about health practices (Gholizadeh et al., 2011; Grace et al., 2008). Similarly, Allender et al. (2006) emphasize the positive impact of GP referrals in increasing motivation of adults in participation in physical activity.

Food physical environment incorporates various characteristics including the physical settings and social environment of the setting, and food supply elements such as sources and availability of food in the food system. The food context could expand and/or limit choice possibilities (Furst et al., 1996). Residing in a large city with developed diaspora communities creates space for small entrepreneurs such as ethnic food stores and restaurants with the opportunity for migrants to prepare food of their home country in many ways (Rath and Kloosterman, 2000). London as a multicultural city has been cited for its large established migrant communities, and large number of ethnic food stores (Bailey, 2017). Polish migrants in the UK also recall travelling to London where they would load their car with Polish food (Brown and Paszkiewicz, 2017). This also underpins the role of cost of food with some studies indicating that higher prices of healthy food result in migrants consuming unhealthy but cheaper food high in sugar, fat, salt, and sweetened beverages (Kockturk, 2004; Vallianatos and Rain, 2008).

Having done the literature review, in the following sections, I present the perceptions and experiences of Iranian migrant women of various aspects of physical environment in

Britain, such as climate, and infrastructure (roads, parks, and sports facilities) and how these elements impact upon their physical activity.

7.2. Safe neighborhood, poor weather

Apart from one, the remaining in this study, whether from north, west, east and south London, expressed their satisfaction with their neighbourhood. Nineteen respondents talked about positive characteristics of their neighbourhood such as safety, aesthetic and the availability of green spaces. Nine respondents believed that these features contributed to their frequent daily walks for commuting and accomplishing their daily responsibilities. Mahvash described her neighbourhood:

In our area, umm, we have a very very good gym and then, ehh, we had many many parks with lots of physical activity (facilities) in the park and then this is, you know, very safe area, for your personal physical activity, like, every time in the early morning or at night, when you go for walking you feel safe, is not you know gangs, and then they can go alone, yeah, it's a, it's a very safe area.

Mahvash's description of her neighbourhood physical activity facilities ranged from the gyms that required one to pay for membership expenditures, to free 'exercise facilities' in local parks. She also raised the issues of safety for women if intending to engage in physical activity in public places. Her reference to physical activity in the early morning and late night referred to the risks associated with the timing if one decides to do solo physical activity. Simultaneously, she refuted such possibility, owing to the high level of safety in her neighbourhood. Tarane believed that it is the responsibility of women to take care of their own safety regardless of the neighbourhood safety as she explained:

This area is amazing, no problem at all (laughs). From the safety point of view, it's much better than our previous one, but even in my previous neighbourhood I would still see women doing exercise. I think this aspect has no impact on the women exercise because with taking some precautions that in what time of the day, for instance, not doing exercise in the dark, or very quiet road, um, or in a very quiet area, for instance, in a park between 2-3 in the afternoon that a woman shouldn't be there, no matter how safe the area is.

Tarane compared her past and current neighbourhoods. Although faring the current one much safer, the presence of women exercising in her previous area was also a symbol of the neighbourhood safety for physical activity of women in public. Despite the comparison that would ultimately perceive Britain or London, as a generally safe place, she required women to take some precautionary measures when engaging in physical activity. Neighbourhood safety was contributed to many in this sample walking frequently. Thirteen participants spoke of their daily walks to work or within their neighbourhoods as a common practice. Five women with very young child, believed that their daily walking to school, to nursery, to baby groups while their child in a pushchair was the main means of engaging in physical activity. Interviewing Aida in a public place while walking with her son in a pushchair, she mentioned two opposing points influencing her walking, one was the infrastructure and the other was the UK climate:

I don't see any barriers to physical activity, given the pavements are smooth that allow me to use pushchair, and except the weather.

Aida, a married migrant with a young child, who has limited social network, acknowledged the positive impact of smooth pavements in enabling her to walk frequently together with her child in a pushchair in the community. Highlighting the infrastructure, such pavements are not probably widely available in Iran. On the other hand, the weather has limited the magnitude of this benefit. A similar view was echoed by Shayeste, that in the previous chapter 'Empowering and disempowering', refuted the presence of any barriers to physical activity of women in the UK due to the freedom of dress codes and lack of judgmental people in public. However, during the course of the interview, she depicted the challenges of participating in vigorous physical activity, given she was raising three children and the bulk of the responsibility of childcare was on her shoulder:

I must say I walk at least two miles a day because I walk my daughter to school and walk her back home. We have treadmill at home but because of my little child. I am overweight which I've got it since my third child birth but I'm scared of using the treadmill so as a safety precaution and the likely accident for my kid, I gave up ... I try to walk briskly but with my child in a pushchair and the weather that is fundamentally awful here, I can't.

In the above extract, Shayeste, as a mother and a migrant with a very young child, demonstrated the challenges of engaging in intensive physical activity. From her view, in the presence of other obstacles, walking with her child in a pushchair in the windy and rainy weather would diminish her walking pace. This did not result in achieving the expected outcome, weight loss. At home, she was the primary person looking after her young child as well as other responsibilities; hence, the use of their home treadmill was potentially hazardous. Motherhood, and being a migrant as Shayeste's narrative indicated limited her choices to engage in gentle physical activity.

7.3. Physical activity preferences and challenges

Discussing the role of neighbourhood on physical activity, eleven women spoke of the significance of regular workout at a gym. Gyms provide several benefits to Iranian migrant women. Gyms with their enclosed environment offer a solution to the weather adversity. Further, for a migrant with limited social network like Farnaz, a 37 year old mother of only child, and a migrant, a gym was not only a setting to participate in physical activity, it was also a social club, where she could meet with other fellow Iranians:

I'm walking to the gym after putting Hamid at school, I'm going to the gym and spend like ehh, two, three hours in the gym ... I could find more friends around my area and then see other women go, you know, I found some like Iranian friends, you know, you see more and more. If you stay at home, just it's you.

Farnaz, unlike those disliking social interaction with fellow Iranians, felt fortunate making new friends, in particular, with Iranians at the gym. Farnaz who initially settled in another major city in Britain, felt socially isolated because of the city's small Iranian community, hence, decided to move to London. In the above, while she highlighted walking her child to school, she also explained her preferences for working out at the gym, a place where she succeeded to expand her social network as it opposed to her home environment that could not provide this opportunity. This explains, why in the previous chapter Iranian migrant women valued outdoor physical activity. However, the extent to which other participants accessed a suitable gym was limited. This issue was raised by

five respondents, one was Nazanin, who specifically believed her migration has diminished her family budget and she no longer could afford to go to the private gyms:

Here because my area is not very rough, so women can walk on the street even overnight because it is safe and there is no problem, but if one wants to go to the gym, no, there is nothing in this borough ... In the area I live, there are a number of gyms but all are private, and there is no single state funded gym.

Whilst Tarane referred to neighbourhood safety as an essential element for women's outdoor physical activity, Nazanin assessed the safety of her area as outstanding for women's physical activity even overnight. In spite of her satisfaction with her neighbourhood safety, performing solo physical activity in the street or at home did not appeal to her. The emphasis on attending the gyms was perhaps related to her previous experience in Iran where her financial stability would allow her to spend her disposable income on fitness. In the context of migration, however, with her diminished sources of income, her physical activity was reduced too. Similar to Nazanin, Fateme believed the cost of gyms was a major barrier to the use of such spaces. I earlier highlighted that gyms perceived as the sites with multiple benefits. For Fateme, a physically active participant, a gym was a rehabilitation centre. She noted that in addition to her regular walking and the home-made small gym developed by her husband, she found attending certain classes in public gyms improved her health:

I used to go to Pilates as well for my, um, joint pain and for the mostly for, ehh, and because I have got problem with my bladder and doing some exercise on those muscles. It helps you to strength your muscle as well which it cost me £10 and per each hour and I couldn't carry on. You know those things which you wanna do it, you wanna be happy, stay healthy but the money restrict you.

Fateme associated attending the Pilates classes with promoting her health and sense of happiness but her financial constraints deterred this path. On the contrary, three participants who accessed a discounted gym, such as Tarane, believed that the low cost gyms were equally available in all boroughs:

Well, you still see there are some facilities for those with disabilities, or unable to pay the fees, because the costs are lower ... the government also provides so many facilities to promote physical activity. They understand people's circumstances.

Tarane, a former refugee currently a British citizen, living in Britain for over a decade, admired British government, described as understanding of the marginalised groups in the society. Her positive attitude to British government might be, to some extent, related to her access to the low cost gyms whereas Nazanin was deprived from this service.

In addition to the constraints of accessing to the low cost gyms, three practising Muslim women participants were also felt restricted in accessing segregated swimming pools. These women in spite of wearing hijab in public, did not deprive themselves from using the mainstream British mixed gender gyms. This might be due to their interest in conforming to different spheres of British society. Attending such places, however, seemingly yielded mixed experiences. The general views of Iranian Muslim women wearing hijab was that living as a Muslim migrant in a Western country should not deter them from the mainstream resources, otherwise, they would marginalize themselves. Generally, three respondents wearing hijab perceived themselves as a moderate Muslim and distanced themselves from the more conservative ones. This was reflected in Atousa's comment as she spoke of her experiences of attending mixed gender gyms:

I think those who want to follow a strict dress code and even don't want to wear clothes that shows the shape of their body, well, that would be much more difficult, since some even might not want to exercise with men in the same environment next to each other walking, running on the machines but these sort of people might not be interested in exercise anyway. This has never been an issue for me at all... I mean I would really try to wear clothes not to show the shape of my body, then I realized it is not possible as I was struggling. But I came up with novel methods, I decided to wear hat then thin hat. At the beginning, I used to wear a headscarf and tied it around my neck but it was difficult so I wore hat.

Nasrin: What about your clothing?

Atousa: I had short sleeves, then it wasn't important for me if my trousers were tight, I gradually learned how to do things.

Atousa, a migrant who came to the UK with spouse visa, underwent gradual dress code modification to be able to exercise in a mixed gender environment. By situating herself as a moderate practicing Muslim, she justified the need to exercise a degree of compromise if wanted to use the leisure facilities in a Western country with different culture and infrastructure. She described other Muslim women with strict dress codes as non-exerciser or uninterested in physical activity. Nevertheless, doing exercise in a mixed gender gym while fully clothed was not necessary a pleasant experience for others. Zahra, a practising Muslim, and a recent refugee, who led an active lifestyle in Iran, shared her feelings, experiences and the constraints she encountered in doing exercise in a mixed gender gym:

I went to the gym last year for three months because I like to exercise. However, I still couldn't do various types of exercise ...it was difficult for me since with hijab, you must wear headscarf, wearing clothes, you exercise, you feel hot whilst others in top and comfortable clothes, and then you want use sports bicycle with lots of clothes on your body (laughs), and sometimes I would ask myself how difficult it is for me and how comfortable others are. But I had to put up with so many clothes, headscarf, be mindful of your headscarf not going back, your clothes were unbuttoned or be mindful of this and that... I still couldn't do various types of exercise. For instance, those which you need to lie down I was embarrassed to lie down on my back, on belly while men were around, I never did these exercises. I could only use exercise bike.

Comparing the accounts of these two practicing Muslims, Zahra, and Atousa evidently had different experiences of attending mixed gender. For Zahra, compromise meant only attending a mixed gender gym without altering her dress code, but she did not seem to be enjoying the exercise either. In this study, multiple interpretations about attending mixed gender gyms were surfaced in which Shayeste appreciated mixed gender swimming pools as she was able to attend a joint swimming with her son and daughters. Three more Iranian women described similar positive experience of migration. Whereas for Zahra, a religious woman, exercising in a mixed gender environment corresponded with enduring the unpleasant circumstances, for instance, sweating, not being able to use various machines nor performing various exercise movements. The accumulative strains of being overly

covered while sweating led her to feel a sense of uneasiness, tension and the lack of pleasure. The experience of Zahra in exercising in a mixed gender gym, was in stark difference with what Atousa described after undergoing dress code adjustment.

The degree to which Muslim women wearing hijab, would modify their dress codes for the purpose of attending mixed gender sports facilities was limited. For all three practicing Muslim women study respondents there was no room negotiating wearing a revealing swimsuit in a mixed gender swimming pool. Hence, they had to search for the gender-segregated swimming pools. The accounts of all in this group indicated that they had great difficulty accessing women only swimming pools in their neighbourhoods and even beyond their immediate area. This issue, lack of availability of gender specific swimming pools, led to either intermittent participation or abandoning the practice because of the travelling hassles. Some tended to believe that they were the source of the problem. For instance, Atousa who previously, in Chapter 3, identified herself a physically inactive person, did not locate the problem in the society, she would rather seeing herself as the person who should take the blame. She then strived to convince me that gender segregated swimming pools might be an interesting idea and experience for non- Muslim women too:

Nasrin: Do you have any recommendation to the local council for improving the physical activity of women?

Atousa: In my opinion, many, even if they don't look at this from religious point of view, might not dislike the idea to be in the only, exercise in the female only environment. I think it is interesting for them.

Nasrin: And how did you find lack of access to them (women only swimming pools)?

Atousa: well, yeah, for instance we used to go with two three friends of mine even we went to a female only spa. It was for women and cost me £100 per day. It was fantastic, clean, modern, all were women; their staff, so comfortable and we did this two three times... I mean this is a situation that was interesting, I was enjoying it and would do it but then it was closed ... and never could find such a place and I gave up doing this.

In the above, Atousa, due to her religious affiliation, required the local council to dedicate some of the swimming pools sessions to women only. She strived to examine the idea

from different angles. Seeing it as a likely interesting experience for non-Muslim women, rather than considering this as a burden on the council management team. In describing her experience of attending a women only spa that in spite of its high cost, the joy of being in the company of friends, feeling comfortable in a segregated environment felt well worth the price but that one also was no longer available. Zahra, who had developed knees problem, described the journeys of travelling with her children to other neighbourhood for swimming in a segregated gym as inconvenient practice:

Swimming is good for me. I mean, every time I go my knees get better for a few days. I feel in general from my emotional state, I feel good, my body becomes lighter and also is good for my knees ... but well, that one is so far away, so my husband should spend a day drive us off there, then pick us up.

In the above extract, Zahra explained the importance of swimming for her and well-being but due to the lack of availability of segregated swimming pools in her neighbourhood, she had to go to other areas that meant to rely heavily on her husband for transport that was inconvenient for the family altogether. In this secular society, Muslim women were marginalized because of their religious practices and the unequal distribution of segregated swimming pools that for this group was the most preferred modes of physical activity. Whereas practicing Muslim women would comfortably attend swimming pools in Iran. Unlike Shayeste, migration for Zahra and Atousa was equivalent with deprivation from the sports facilities available to them in Iran.

In Chapter 2, most of recent Iranian migrant participants, regardless of their legal status, education and social status highlighted that their participation in physical activity in Iran was shared activities with family members, friends or colleagues. The past experiences was reflected in the comments of four recent migrants who similarly wished to participate in group physical activity in Britain too. Ghazal, was one of the fortunate participants who had such experience in the UK. In reflection, she revealed the outcomes of joining an instructor led group physical activity in her local area:

I also joined a walking group in Croydon, It was very good ... It was just for six weeks and was advertised by Kingston University, a once a week two hours walking ... It improved my English, I learned about the course that I'm currently taking. It improved my knowledge about so many other things,

beside I met new people ... I am going to free psychology workshops, and also psychotherapy very far from my place, I go no matter the journey, as long as it's free.

As Ghazal highlighted joining a free group walking brought her several benefits including improving language acquisition, making new friends, and career development that all also facilitated her assimilation into British society. As a recent refugee, Ghazal's financial constraints, limited her choices of physical activity to search for only free services but the initiative ceased due to the short length nature of the programme. Similar interest was expressed by Nazanin, another recent refugee. She requested a group physical activity in the places of worships:

In all areas, thank god there are lots of vacant halls at the churches or other public places and nobody uses them, so they can recruit a sports instructor, and distribute leaflets notifying the local residents for instance, on Thursdays, at 6 pm. All women can get together here some days, but it must be free of charge (laughs) to motivate women to physical activity, because if the council wants to improve women's health (laughs), since women tend to prioritize other needs over their own health although they are not aware they must pay off the price of ignoring their health needs in the future.

Nazanin's request on participating in women's group physical activity might not be necessarily a religiously originated interest, since during the interview, she noted using mainstream swimming pools with her sons. Yet, her interest in women's group activity might be a way to expand her social network. She also highlighted the self-imposed financial limitations, and her priority for other household expenditures, probably her children's needs, over her own physical activity. Nazanin's lack of priority for spending money on gyms could be a reflection of various post migration losses she previously noted. Nonetheless, her laughs were implied the conflicts between her knowledge, the health benefits of physical activity, and the absence of her action. Nazanin suggested group physical activity in her local area, guided by a sports instructor with emphasis on free initiatives that could be the reality of migration for a middle class Iranian woman who lived a comfortable lifestyle in Iran. Furthermore, the above signified the impact of change of social context and culture on the practices of physical activity for the middle class Iranian woman such as Nazanin. As she mentioned in Chapter 3, in Iran, she used

to regularly engage in physical activity to earn achieve slim body shape and status but in the context of migration this practice in the absence of her reference group was a meaningless and potentially a cause for financial hardship on the already overstrained family budget. With this in mind, it is worth comparing Nazanin' s divergent attitudes towards the cost of eating a healthy diet and the costs of engaging in physical activity I just presented:

Nasrin: To what extent do you think your migration has affected the quality of your diet?

Nazanin: It didn't, not at all. I mean maintaining a healthy diet is the most important aspect of my life. Despite having all difficulties we've been through, eating a healthy diet has been very important for my family and do whatever we can to maintain it for my children and family as a whole at any cost. It has never been the case, to let's say, we set aside this money, for instance for this pillow, instead of buying fruits, never done this.

The last two comments, explicitly indicated that the link between food and health were much stronger than physical activity and health despite her knowledge of the health benefits of practising physical activity and health risks of sedentary lifestyle. The limited money in her household was channelled to food at the prices of eliminating other costs such as gym memberships to ensure that family would eat good food.

Access to the neighbourhood resources to a certain degree related to information seeking strategies. Four respondents noted that word of mouth was their main information seeking behaviours in learning about their local sport facilities. The women obtained information through fellow Iranians they communicate in different contexts such as language school, Persian school, college and mosque. Information seeking method of Zahra was through word of mouth and networking with other fellow Iranians at mosque who signposted her to a gender segregated swimming pool:

I used to go swimming a lot in Iran, but coming to this country and wearing hijab, I didn't feel comfortable going to mixed gender swimming pools, until a friend of mine told me that I'm going to a women only pool.

As she noted that prior to migration in Iran Zahra used to swim frequently. She also stressed on the issue of observing hijab that would abstain her from using the mainstream mixed gender swimming pools. Zahra, however, was not aware that the gender segregated swimming pools existed in Britain in the first place, although in very limited places. Her poor English skills, would limit her information seeking strategies to only like-minded fellow Iranians, who shared similar religious orientation. Indeed, it was through a meaningful conversation with a fellow Iranian at the mosque who guided her to the gender-segregated swimming pools. Although Zahra's husband could drive her to other neighbourhood to give her the chance to swim at a culturally specific swimming pools. This opportunity for many such as Atousa, whose spouse worked long shifts, was not possible, as she noted earlier, resulted in eventually giving up swimming because of the scarcity of such facilities in her area.

Seeking help from health professionals was mentioned by sixteen interviewees, where Iranian women turned to their GP for many issues including receiving a medical advice. Nastaran found her GP's referral to a gym, under the scheme of 'exercise on prescription', was a way to alleviate her daily stresses. Nastaran's migration facilitated her first encounter with the gyms whilst her busy life in Iran did never give her the chance nor had the time for leisure time physical activity. Nastaran, currently a refugee but a successful specialist manager in Iran, believed her migration initially did not make any changes to her physical activity level. This was because she was employed in office jobs with similar long sitting hours both in Iran and in the UK. It was a visit to her GP for seeking a solution for her back problem that initiated her participation in physical activity:

GP send me as a free three months so a little bit became familiar what is gym, what I can do or what's the best for me and after that I can start... at the moment, it's like became a member, every time I can go, when I find a time.

Having familiarized with the gym environment, she became a regular member of the gym and despite the heavy workload and stressful life she had to endure in diaspora; she tended to attend the gym in her free time.

7.4. Food environment and resources

The food shopping patterns of the participants revealed their regular visits to the chain grocery supermarkets for purchasing everyday food such as milk, fruits, eggs and many more. In addition, they would regularly visit the ethnic shops selling fresh vegetables, herbs, meat and variety of Iranian food products ranging from pomegranate syrup, sesame paste, and cheese to Iranian bread, Naan. The widespread availability of ethnic food stores selling raw, fresh, baked and manufactured foodstuffs at cheaper prices compared to the chain grocery supermarkets and the freshness of their food products were the underlying reasons for visiting them. Shayeste described her choices of grocery stores:

Turkish shops, because they have all sorts of Iranian products, as well as halal meat and I like their shops because they are hygiene and I feel comfortable buying from them.

The presentation or cleanliness of the shop was the fundamental criteria for Shayeste for visiting Turkish shops offering international products such as Iranian foodstuffs as well as halal meat. Nastaran echoed similar view in which the Middle Eastern or some African shops became her favourite choice for purchasing meat and other Iranian food products as she explained:

We have a lot of Turkish shops around us, so they have the same ehh, food as Iranian so we can buy from there for meat... we have another one, I don't know, there are from Eritrea or something but because they have a Halal, and I don't care about Halal, but they have, they have Halal and fresh one. So we normally buy from them, and it's much cheaper than another shops (laughs) yeah, when you buy something, it's like compared to packed ones. We buy packaged meat on the British supermarket, half a kilo is £5 for lamb meat but when you buy from Turkish shop gives you much more for £5 and it's fresh. For their quality, I don't know but its taste is OK.

As the above excerpt explained, her trust in ethnic shops such as Turkish and Eritrean shops, was firstly due to their proximity to her home. The other feature in Nastaran's comment was purchasing halal meat was not necessarily for her religious ideology but due to the freshness, good value for money and most importantly the taste of the food products. Looking for bargain was frequently noted by the study respondents, especially those who lost their financial stability. Hence, the food packaging in the chain grocery

stores was not necessarily appealed to Nastaran, but it was the cheap food prices, freshness, the taste of the of the products and the hygienic appearance of the shops that appealed to Nastaran and Shayeste to become the regular visitors of the ethnic food shops. As Nastaran implied the combination of freshness and taste were equivalent with 'quality'. The emphasis on the halal meat although for some participants was purely a matter of observing the Islamic recommendations, for others, for instance, Shiva who ate pork and drunk alcohol was a matter of satisfying her taste. Shiva in the following quote explained how she eventually grew trust in halal meat offered by an Iranian supermarket:

I have tried every supermarket's meat from Waitrose to Tesco and all others. I have also dined in many restaurants in London which I didn't find the taste of non-halal meat appealing, so I buy halal meat because it's tastier.

Freshness and low cost were the primary motives for Nastaran who chose halal meat over the meat offered in the chain supermarkets. Whereas Shiva's choice in purchasing halal meat was only a reflection of the long lasting influence of life course or previous taste, and deep memory of such food on her current food shopping practices. As I noted earlier the availability of variety of ethnic food shops facilitated the continuity in purchasing and consuming similar food to the home country. The length of residence in the host country did not change the food shopping practices of Mitra who has been living in the UK for decades. She still explained why visiting markets provided her multiple benefits:

Mitra: I don't shop around here, because ehh, for my meat and vegetable, you know, and a lot of, I go to Arab, Iranian, Indian shops in Kingsbury, not every week, every other week or every two weeks, ehh,

Nasrin: Why?

Mitra: Because I like my vegetables, and when I go there, I buy instead of that little (showing small size), I buy herbs a lot, parsley and coriander and I clean it, and chop it and put it in the freezer for cooking, which I can't get in normal supermarket, so because of that, and you know, bread and cheese, so, for normal shopping, obviously it's Tesco and Waitrose, again bread, my husband? but generally, for bread, I have bread Barbari, so I usually buy, you know, every two weeks, go to other area and buy a lot and put in my fridge or sometimes, freezer, because I like, it ? and much cheaper ... so sometimes I just say, he pushes me, oh, let's buy that, oh, I need to clean it, so no, he

says no come on, it's nice, so yeah, yeah, just for 'Sabzi'³⁰ but not regularly, if I go to other side, but I love it. Let's say it's a habit.

Mitra's career that required her to work long hours and occasionally traveling to other cities or countries did not seem to deter her from visiting ethnic market where she could obtain Iranian and Indian food. With over £45 K family annual income, she, similar to other Iranians with no job, seemed to be looking for bargains. Her trip to other neighbourhoods provided her with several benefits such as purchasing meat, specific bread, cheese and favourite herbs in bulk at cheaper prices than the British chain supermarkets. Moreover, Mitra's husband reinforced her buying Sabzi Khordan, in spite of the laborious works required from buying to putting it at the table, including cleaning, cutting and washing, suggesting that family members can strengthen the continuity of some traditional food practices and potentially transmit them to the next generation.

The social context of the markets was a strong driver for visiting them. This phenomenon was raised by three respondents who also possessed a car that facilitated traveling to the markets. They had positive memories of the market, despite having left the area. Markets provided spaces to socialize with specific ethnic groups, which continued to be a trusted place for shopping. This was the case for Samira who still visits Acton market although she no longer resides in the area:

I buy my foodstuffs from here, ASDA, but because my previous area, that was Acton, it has become like a family to me. I usually prefer to go to my previous area, ACTON, for Morrison's and its market, for Afghans and Turkish... I found Afghans really very nice people, I mean the attitudes I had towards Afghan in my country, truly changed in this country... I buy a lot of things from them ... not to mention Turkish, but I really like Afghans more than Iranians, because they are honest people, laid back, very friendly, also Turkish, you like interacting with them, generally their food is fresh, especially meat ... I buy fruits and herbs from them..

³⁰ Herbs included basil, Iranian leek, mint, radish, and few more, Iranian usually prepare and eat raw as the side meals.

The sense of nostalgic past might not be necessarily limited to their native country, but it was also associated with the migrants' old neighbourhood. Samira presented high trust to the food products of the market for their freshness as the salient feature in purchasing food such as halal meat, fruits and herbs that was a common food shopping practice in Iran. Additionally, she enjoyed the trip to her old neighbourhood that revitalised her memories of the area through interaction with some ethnic groups. This phenomenon has also led to abandon the stigma about Afghans she had otherwise in Iran.

In this study, only five women were financially active. Of the remainder, four participants had given up work after giving birth, nor could five other respondents find employment since leaving Iran that limited their sources of family income, if not only on benefits. Hence, this question was raised on how they found the impact of their migration on their diet. On raising this question, without an exception, I found one answer that it did not affect their diet. I previously cited Nazanin's response. Here, Nastaran explained how she managed raising two children as a recent refugee:

Because it's like the, ehh, most important thing for us is my children's education and their healthy food so we try, it's like, it's not very essential to buy every month clothes. But it's essential for us to a good education and ehh, very good healthy food. So it is our priority to have this two first.

Having these two priorities, healthy food and education, which three other recent participants also highlighted, indicated that these families were clear where the limited financial resources should be allocated. Meanwhile, at home, she and her husband shared the house chores and cooking amongst themselves to ensure of eating healthy diet as their main goals in raising healthy children. In the above, the women used a variety of strategies such as navigating their own area as well as other neighbourhoods in the search of good bargain for purchasing fresh, raw and traditional food products. This combined with the value placed on cooking from scratch (meaning) would not only ensure that the women could succeed to raise healthy families, it also suggested that food occupied an eminent place in achieving a successful migration experience.

In keeping with social practice theory, this chapter draws on the role of materials and infrastructures for accessing to both physical activity and food resources. Beginning with physical activity facilities, such as roads, access to parks, specific sports facilities

including low cost gyms, segregated swimming pools, and money were key in participation in physical activity. The information seeking strategies also influenced the women's competences. Furthermore, the different meanings attached to food and physical activity, as two disparate practices were a determining factors on where the limited resources should be allocated. To highlight on the major findings of this chapter where I began by exploring the neighbourhood characteristics of Iranian women respondents residing in twelve boroughs in London. The capital was described as a safe city for a woman if decided to participate in physical activity. Nonetheless, two Iranian woman believed that taking some precautionary measures ensured them of maintaining their own safety. This was seen as the responsibility of the women themselves by avoiding physical activity in quiet roads at less busy time of the day. Thirteen participants stressed walking every day or frequently that was a reflection of sense of neighbourhood safety (Stokols, 1992).

Walking was the most pronounced type of physical activity for four women whose choices of physical activity was limited due to their childcare responsibilities. In spite of the acknowledgement over the smooth pavements as the facilitator of their regular walks, British weather, was an obstacles to the pace of walking of this group too.

For Iranian women coming from a dry or semi-dry climate of Iran (Weatheronline, 2018), the UK windy and rainy weather highlighted the importance of accessing to the gyms, specifically for Iranian women who were in favour of formal physical activity. Five respondents talked about lack of access to a low cost gyms, however three women such as Tarane accessed a low cost gym in her locality. She also perceived British government as fair and understanding for providing physical activity services especially for the migrants and the disadvantaged. Whereas Nazanin, as one of five respondents, four of them refugees, who did not find any discounted gyms in her area spent her free time at home and felt her migration has marginalised her. This is one of the representations of legal status in this study that being a refugee was associated with financial hardship at least for many years after arrival until finding an employment. This group found themselves to be less physically active in Britain compared to their lifestyle in Iran.

Interviewing three Iranian practising Muslims women respondents, neither opposed to the idea of attending mixed gender gyms offering sports equipment and exercise classes. One who regularly attended mainstream gyms in the past, believed exercising at such

places required a Muslim woman, a degree of dress code adjustment. This is a nuanced difference of this study with the frequently cited studies describing attending mixed gender gyms and exercising in the presence of men as a barrier to the physical activity of Muslim women in Britain (Lawton, et al., Grace et al., 2008). The commonality between my findings with the common discourse in the literature on the barriers to the physical activity of Muslim women was that both groups strongly refrained from mixed gender swimming pools and required strictly women only spaces. As with the limited access to the low cost gyms, segregated swimming pools were not equally provided across different boroughs in London. Long et al., (2009) in a systematic review of the literature on BME sport and recreation argue that funding was the needs of BME communities but it is not a priority for the local authorities and in some occasion the BME community's need seen as a 'problem'.

Information seeking behaviours of Iranian women for locating the favourite physical activity facilities also appeared to be traditional, limited to either word of mouth from other fellow Iranians within their own network or through a GP recommendation. This is in line with other studies among Iranian migrants in Australia and members of ethnic minority in the UK in favouring receiving guidance from health professionals, such as GPs (Gholizadeh et al., 2011; Grace et al., 2008).

Four women who were interested in group physical activity, preferred to be informed of the local initiatives through flyers as Nazanin noted and Ghazal practically succeeded to participate in one of the local initiatives. The councils, on the contrary, utilize their website and newsletter both in English for marketing their services that might not be the most suitable methods for reaching out the migrants with limited English competency. Further, the council offered group instructed-led walking in limited locations (Barnet Joint Strategic Needs Assessment, 2011). Some argue that poor participation of minority ethnic individuals in physical activity might partly be related to the issue of dissemination of information in BME communities. They stressed that more than provision, is the means of communicating information, since it does not reach BME communities and for some, the information needs to be translated into appropriate language (Long et al., 2009). Indeed, the mismatch between Iranian women's information seeking preferences for the use of flyers and the local councils' use of websites and newsletters for marketing the available physical activity resources left some uninformed and exacerbated some of Iranian women respondents' marginality.

Funding is an issue for the sustainability of projects offering opportunities to participate too (Long, et al., 2009). Snape (2005) echoed similar challenge, when evaluating a project aimed at promoting exercise and physical activity among Asian women. The review indicated that short-term initiatives face funding issues and a major challenge to the community development. Swinney and Horne (2005) argue that in lack of review of initiatives aiming at BME communities, the local authorities need to apply bottom up approach with BME individuals and communities being involved in the process of consultations. The lack of community cohesion (Spellman, 2004) and the absence of representatives from Iranian community (Communities and Local Government, 2009) both created fundamental obstacles for Iranians raising their voice to the local authorities. Moreover, limited partnership between Iranian charities, schools, mosques and the local authority in designing cost-effective health programmes were evident in this study. Review of literature on the physical activity of BME individuals suggest that members of minority ethnic communities are poorly represented at decision making levels and for a number of reasons are excluded or encountered a range of barriers to sports participation (Koshoedo et al., 2015).

In addition to physical activity, I explored the food context in London that was described as rich and multicultural. The accounts of the study participants' scattered across twelve boroughs in London suggested that they comfortably accessed chain supermarkets as well as the ethnic food stores within their locality or through travelling to other neighbourhoods. The ethnic stores provided the women with many ethnic foodstuffs at reasonable price. This was one of the privileges of residing in the capital city (Bailey, 2017; Brown and Paszkiewicz, 2017) that also contributed to continuity with practising Iranian traditional food. The ethnic food stores were highly trusted shops, for both longstanding and recent refugees as well as migrants for offering fresh and raw food: meat, fruits and vegetables, as well as other foodstuffs consumed in Iran: bread, cheese, pomegranate syrup, sesame paste, and olives to name just a few. With several benefits of shopping at ethnic food store for a good bargain, those accessing a car also found it a pleasant experience to travel to other neighbourhoods' markets.

The great satisfaction with the food environment in London, frequently voiced by the study participants, were in contrast with the food experiences of Iranian migrants in other Western European countries who had limited access to the leafy vegetables, Sabzi

Khordan or found them to be expensive (Ahlqvist and Wirfalt, 2000). This study did not support the findings of studies I reviewed earlier in this chapter in which the higher prices of healthy food resulted in migrants consuming unhealthy but cheaper products high in sugar, fat, and salt and sweetened beverages (Kockturk, 2004; Vallianatos and Rain, 2008). As I presented the accounts of Mitra and Nastaran in which their busy work-life schedules did not prevent them from purchasing healthy foods such as herbs, vegetables, fresh meat and eating home-made dishes as long as their partners were willing to take the responsibility of some of the house chores and food preparation (Harbottle, 2000).

Trips to other neighbourhoods for food shopping not only brought pleasure to the women for interacting with other ethnic groups. These communications broadened and changed the attitude of Samira towards other ethnic groups. Vazquez-Medina and Xavier Medina (2015) in exploring Mexican market in California discuss the role of ethnic markets as spaces with multifunctional benefits to migrants. They argue that markets stimulate migrants' social interactions, facilitate knowledge, and circulate products as well as nostalgia (Vazquez-Medina and Xavier Medina, 2015). Bailey (2017) explains that food has agency and creates sense of belonging if migrants are able to shop and cook the same food of their home. In the study of Ghanaian migrants in the Netherland, Bailey and Meijering (2015) recognise that places such as shops create spaces for migrants by expanding their social network that it subsequently contributes to their social and psychological well-being. Food and spaces enhance the sense of self, identity and create the sense of home and belonging, hence, alleviate longing for migrants in diaspora (Bailey, 2017).

With regards to the contribution of social practice theory to the findings of this chapter, the study participants described the food infrastructure (materials) in Britain as accessible, at reasonable prices and good quality. In comparison, the food environment in London was far more diverse, and reachable than the physical activity resources. Moreover, the unequal distribution of low cost and culturally appropriate sports facilities compounded with the family tight budgets (limited materials) and restricted information seeking strategies (competences) led to the de-prioritisation of participation in physical activity (meanings) for those who previously comfortably accessed sports facilities and participated in physical activity in Iran. This highlights the second proposition in social practice in which 'practices emerge, persist, disappear as links between their defining elements are made and broken' (Shove et al., p. 21). With regards to the participation in

physical activity amongst some women that I already illustrated, the restricted access to the materials broke the link between three elements of meanings, competences and materials. That means lack of access to the relevant materials (gyms, money) proved to be a major obstacles in diminishing the significance of physical activity for those who routinely practised it in Iran. As I noted earlier, simultaneously, between physical activity and diet, the restricted family budget was directed to food and education that was perceived as a necessity not only for survival of the family, but also for a successful migration experience. This also supports Shove et al.'s argument of the shortfalls of behavioural theories in which adopting healthy behaviours are not only associated with education and awareness of the benefits of maintaining such behaviours (Shove et al., 2012). When it comes to the bundles of practising physical activity, several practice change are visible. In Chapter 3, I explained that physical activity in Iran was a social practice in a park or in nature with family, relatives and wider network. These patterns appeared to change drastically with the women's migration. In considering the British weather, an unfamiliar climate to the study participants, the narratives of picnicking tended to disappear and substituted by walking children to school, to baby group, etc. Some attributed their frequent walking to the smooth pavements (infrastructure), also perceptions of safe neighbourhood. Others highlighted their migration has been accompanied with new practice of going to mixed gender swimming pools with children of both sexes. The new phenomenon was, specifically, impossible to do in Iran since the 1979 revolution, due to legal prohibition on mixed gender sports facilities (Jahromi, 2011). Practising traditional Iranian food was linked to good access to the resources, and pleasurable experience of food shopping.

8. Physical activity and food for health and wellbeing

8.1. Introduction

This chapter explores multiple meanings and functions of food and physical activity in achieving health, desirable body weight, healthy ageing and mental wellbeing. I began by comparing the accounts of midlife participants and younger age to highlight the role of ageing on different practices of food, eating and physical activity. I also examined the everyday life of migrant women affected by physical and mental illnesses. At the end I demonstrate the contribution of social practice theory to this chapter.

8.2. Ageing, health and mental health

Midlife spans a broad age range from 40-65 (Newton et al., 2017). In considering that half of the sample were over 40, it is relevant here to examine the role of ageing on physical activity and food practices of Iranian women of this age. Midlife involves a 'life review' of one's past experiences (Stewart and Vandewater, 1999) and considering the path ahead (Levinson et al. 1978). In the general population, the middle class midlife experience usually includes transitions such as retirement and children leaving home (Moen and Wethington, 1999). From the emotional perspective, midlife is characterised by positive changes such as emotional maturity and the ability to manage life conflicts (Stewart and Vandewater, 1999). On the other hand, midlife is marked by a number of physiological changes and gradual decline, such as loss of muscle mass, the occurrence of wrinkles, weight gain (Merrill and Verbruggl, 1999) and increased waistlines (Newton et al., 2017).

Stewart and Wethington (1999) indicate that body changes during midlife could potentially reinforce weight management plans and maintenance of chronic illnesses. The literature highlights two opposing perspectives in which some studies consider that weight management efforts impose double pressures on women whilst others describe them as healthy endeavors. In the first camp, Newton et al. (2017) argue that attention to weight and body image in midlife is the representation of the 'double standard of ageing' (Sontag, 1979) in Western societies that subsequently pressurises women socially and psychologically to conform to the ideal body weight. In support of this argument, others refer to the contradictory social constructions of gender in which masculinity is centered on power, autonomy, self-control and competence whilst constructions of femininity are

established around physical attractiveness and youth appearance (Halliwell and Dittmar 2003). As such, midlife women who are less attractive and lacking the stereotypical female characteristics might be the subject of harsher judgement than their male counterparts. Women might also internalize these harsh judgments with implications for their well-being (Skultety and Whitbourne, 2004).

Some discuss the phenomenon of weight management from social aspects. For instance, Calasanti (2005) points to the standards of US contemporary culture which pressures midlife adults to 'age successfully' through efforts to slow or alter the aging process. This is socially rewarding since they achieve physical attractiveness, as well as the ability to remain active and productive as they age. It is also linked to signs of health and social worth that is a manifestation of sense of control and self-worth during an ultimately inevitable process of ageing (Ibid, p. 37).

On the opposite camp, Johnston et al. (2004) view this from a positive angle, arguing that women of midlife present a more health oriented approach to body weight and shape through adopting healthy food and exercise, rather than resorting to a disordered eating pattern that is more prevalent in youth.

The impact of migration on mental well-being was another subject that some study participants highlighted in Chapter 6. In the context of migration, I portrayed the negative effect of the loss of various privileges the women had in Iran on their mental well-being, that subsequently diminished their motivation to participate in physical activity. I touched on several studies highlighting the poor mental health of Iranian migrants in Western countries. Hollander et al. (2011) indicate that gender plays a role in the experience of the psychological effect of migration, in which being female and migrant increase the risk of mental health problems. In a systematic review, Shishegar et al., (2015) identify a number of underlying issues related to the high prevalence of mental health problems among Iranian migrants in the West. They include language barriers (Saechaao et al., 2012; Lipson, 1992) unemployment (Lipson, 1992; Jafari et al., 2010; Akhavan, 2007; Tinghog et al, 2010) lack of social support (Lipson, 1992) discrimination (Dossa 2004; Lipson, 1992) financial issues (Lipson, 1992; Akhavan 2007) and the inability to adjust to the host society's culture (Jafari et al., 2010; Ghaffarian, 1987). Within the literature, the coping mechanisms of Iranian migrants have been portrayed as a black and white matter: either this group were unable to cope due to a sense of frustration (Gholizadeh) and

miserable life experiences in both home and host countries (Dossa, 2004), or showing migration adversities as a temporary issue that fades away upon assimilation in the host culture (Delavari et al., 2013). As such, in the following sections I will reveal the perceptions of ageing, deterioration of health and mental health on the everyday practices of Iranian women in diaspora in which food and participation in social and physical activities is considered pivotal in enhancing their health and well-being. I will apply Giddens' structuration theory (agency and structure) and will compare it with social practice theory in understanding ageing, health and mental well-being and more importantly the coping mechanisms of the women in the context of limited resources.

8.3. Physical activity and diet across the lifespan

Food and physical activity did not carry similar values for different participants for several reasons. I explained in the previous chapter that migration had direct impact on the households' sources of income that subsequently led to the changes of priorities. I exemplified Nazanin's explanation that eating healthy foods was a key to maintain her family's health and endeavored to achieve this goal at any cost. On the other hand, she excluded the costs of a gym membership, she previously did in Iran, because it was no longer a priority. With regard to the family living expenses, although residing in the capital city would amount to higher costs of accommodation, it benefited the Iranian families because of the easy access to diverse food at much lower prices than in Iran. Whereas I presented the participants' quotes signifying the negative effect of the absence of the support network, inspiring people they had in Iran, combined with the limited access to the low costs gyms and culturally suitable sports facilities in diminishing the physical activity of recent Iranian migrant women. From the new arrivals' view these considerably diminished their physical activity level in this country compared with the various choices they had prior to their migration.

Those with young child, although trying to take every opportunities, for instance, by walking in the community, their activities perceived to be inadequate as three respondents presenting dissatisfaction with their body shape, believed that they needed to engage in vigorous physical activity to achieve the ideal body shape. Of the interesting points was the way the respondents made sense of the obstacles to their physical activity as Shayeste, one of these three explained:

The only thing that I know, is walking is a good thing, and putting on weight is a very bad thing, which I've got it and I hate it (laughs) but have no choice and I've got to get on with it until my daughter grew older... But well, honestly, I would use treadmill until I got pregnant on my third child, then everything stopped and I was limited to this walking.

Shayeste explicitly manifested her negative feelings towards her post childbirth weight gain. She, simultaneously, depicted her life circumstances for being a migrant mother, raising her young child, in addition to two other school children, without additional childcare support. She eased the tension by seeing the issue as temporary. The history of performing intensive physical activity prior to her last pregnancy when she used to run on treadmill reassured her this job, child rearing, would end once her child got older. Hence, until then she needed to postpone the intensive physical activity plan. As far as the respondents' demographics were concerned, women with very young child such as Atousa, Zahra, Aida and Shayeste mostly in their 20s and 30s faced various obstacles in engaging with physical activity. They were mostly related to motherhood and childcare responsibilities while they could only rely on their spouses for childcare support. Their spouses, on the other hand, could provide limited help due to being the only breadwinner in the family. This issue was also a representation of lack of control over planning some time for engaging in physical activity.

Moving to the midlife women in this study with some whom encountered physical and mental health illnesses with their implications for their day-to-day living. Seven out of ten midlife Iranian women participants appeared to be actively in pursuit of achieving an optimal health through physical activity and maintaining a healthy diet. These two were central to the daily practices of Tahere, a 55 year old migrant, who moved to Britain nearly two decades ago. Reflecting upon her life in Iran, she portrayed her different lifestyles in both Britain and Iran:

Actually I didn't used to go to gym (in Iran) or kind of sport or anything, but because of the situation of life has been changed. I am, um, more on my own, so I put, em, sometime for my activity. Going to gym, swimming pool or do some kind of sport for myself, or if, even if I cannot, I, I go for a walk, or something for myself. But when I was in Iran, because of the family situation is, em, is completely different from here, and we are mostly alone here, em, I

don't , I didn't have time, I didn't use to go to gym because anything, em, because the whole week I was working and going to school and everything and, em, then weekend was completely with family ... the most important things here, I can understand, perhaps, I, I got old and then I became more obsessed about doing these things but I can explain myself, I am more obsessed these days to understand what I'm eating, what is healthy food and how we can take care of ourselves in respect of body wise, I can see that but em, perhaps 18 years back, I was, I was younger, and then, I didn't see that much, I have to take care of myself (laughs).

Tahere, in the above, hinted that being young and leading busy work-study schedules could amount to deprioritization of physical activity and/or paying attention to diet. She justified her current obsessions with a healthy lifestyle by drawing on three positive points. Firstly, the occurrence of her migration in which she moved from a collectivist culture where planning for leisure time was outside her control whilst residing in an individualistic society has given her agency and control over her free time to engage in healthy practices such as physical activity, eating healthy, and attention to her health. Further, she felt that being young did not oblige her to be concerned about physical activity and diet, probably, because humans in the young age were more likely to be naturally protected against illnesses. Tahere, contrary to the comments of Ghazal, I quoted in the chapter six 'Empowering and disempowering', perceived living as a single woman was an opportunity, not a hindrance, as it enabled her to engage in various types of physical activities.

Midlife not only for physically healthy women such as Tahere, but also for those respondents suffering from physical and/or mental health illnesses meant to see life as the glass half full. This group endeavored not to take life for granted. Tarane, a 50 year old former asylum seeker, then refugee and currently British citizen, highlighted the role of migration in expanding her knowledge of managing chronic illnesses she was involved with as she explained:

Learning that exercise should be the main part of daily life began when I was living in Iran from Iranian TVs and also from friends and relatives, but I wouldn't pay attention to it until I came here and got the knowledge that exercise, in addition to the physical health, improves our wellbeing

immensely even for the treatment of some disease, for instance, if I've got back pain, if I go swimming, and doing some activity in the pool it helps me.

Tarane portrayed her life in her 30s; that she was still living in Iran, in which she had learned healthy messages from different channels such as TVs, and friends, simultaneously, would ignore them, probably for being healthy and was not much in need of such information. In addition, Tarane, along with some others, gave greater credit to the pervasive health promotion messages in the UK society in facilitating her behaviour change towards adopting a healthier lifestyle than in Iran. For Tarane, who has raised her children and suffered from back pain, and mental health problems, achieving a healthier body was a priority but for Shayeste, a physically healthy woman who gave up her NHS job to raise her children, priorities might lie in child rearing.

Putting knowledge into practice was an important aspect of everyday life of Fateme who had to cope with rheumatoid arthritis, marked with stiff joints, pains, and other psychological issues. Her approach to the physical illness, on the other hand, was to use her knowledge skillfully to gain mastery over her illness and ensure that she could lead a normal life. Fateme, in Chapter 6, 'Empowering and disempowering', talked about her regular outdoor walking and using their home gym in the bad weather. In the following, she explained the impact of her illness, rheumatoid arthritis, on her food choices:

Because of rheumatoid arthritis, just I have to be very careful with my food even sweet things is not good for me. The butter is not good for me and I have to eat a lot of fish and because you know I need vitamin D as well, the things which I know. It is quite important with vitamin D, the food has been affecting our health, I know for example if I eat butter or white flour doesn't help me or even I know some of the foods ehh give you depression as well like starchy food and for example, potato. Try to use sweet potato sometimes.

As Fateme pointed to the effect of certain food with significant effect on her rheumatoid arthritis as well as those triggering depression. Food, as it revealed in the previous chapters, was a key to raise healthy children, also here, to some extent, for some women such as Fateme food functioned to manage their physical illnesses. Moreover, for many Iranian women respondents, attention to food was through its link with body weight.

Fateme, in the following extract, gave me some 'simple' tips on how to avoid weight gain:

Even the portion of the food, just eat everything but just make it smaller and use a fork. Something simple things ... I think it is, because it takes longer ... but for the fork it is just little by little you eat and it helps you and it fills you up ... also using a small portion and plenty of salad because salad fills you up but even vegetable the vegetable you love something just add olive oil and umm lemon juice it gives you great (pleasure).

The dominant point in Fateme's advice was 'practical' weight control technics through reducing the calorie intake in each meal: reducing the portion size by using forks, lengthy eating time and consuming vegetables. Her detailed explanation of how to mix and match different food, herbs, and juices implied that she was enjoying the weight loss practice. Applying knowledge to the food and eating practices for the purpose of weight and physical illness management were the representations of power, agency of Iranian women participants. Meanwhile, there were some respondents who were not necessarily engaged in formal physical activity but due to their long- term illnesses; they channeled their energy and time to social activities. Samira, a 46 year old migrant and a mother, who developed mobility problem, believed physical activity must be an obligation for adults:

I don't like staying at home, although I love doing house chores and I am very dedicated to my family life ... but I'm an active person, it might be, if I stay at home, not get tired, and might be better for my appearance since I don't get tired but I want to do so, since physical activity prevents me from getting deteriorated as they say mentally, we get depressed if we don't. I can sit at home and get some help from others, relatives but I don't like it. In my view, your spirit, your emotional well-being improves, refreshes when you work independently. I think sometimes, physical activity must become an obligation even if they don't like it.

Samira, a practising Iranian Muslim woman, who arrived at a local café Islamically and smartly dressed, talked about sacrificing her appearance for the sake of health and mental health as she noted to prevent "depression". Although during the interview she did not directly talk about her physical health issue, but she clearly took the personal

responsibility of managing it through involvement in a work rather than sitting at home and relying on others. Samira's strategy was taking her own initiative and leading an active life through engaging in social activity rather than being a surrender of her mobility issues. Home environment, in spite of her dedication to house chores, seen as a potentially depressive atmosphere if she put all of her energy and time to it. Identifying herself as an 'active person' was probably a reflection of her previous work-life background, where she worked in a large corporation in Iran. In Britain, given her insufficient English language skills, she was unable to find a job in the English speaking environment whether in the voluntary or paid sectors. Her current involvement in an unpaid voluntary work in an Iranian organization, the work, she gave a lot of credit to, was a new opportunity to feel useful, to communicate with the like-minded people and more importantly an opportunity to work outside her home that ultimately contributed to her well-being.

Demographically, with increased age, the participants exhibited greater motivation to maintain health through achieving an ideal body weight. With the occurrence of physical health illnesses, motivation and ability to engage in physical activity, in a Western sense, diminished without affecting eating a healthy diet and controlling body weight. Rohi, a 64 year old and retired nurse, a former asylum seeker, then refugee and currently British citizen, identified the occurrence of recent health issues as the primary reason for her reduced physical activity level. In these circumstances, she counted her social engagement and attending to her daily house chores as physical activity:

Yeah, I like it, it is very good if one can do it. I like it, but I have problem since I've got a pinched nerve, so after some activity I experience a burning feelings in my neck, ... if I work in the kitchen or go shopping, I feel a severe pain to the point of numbness. But I still need to clean the house, walk around the house, doing house chores, grocery shopping, attending Mawlana³¹ classes, attending psychology class once a month, because I like to support them as I was involved in this charity sessions. I try to be strong, and do some exercise specifically for upper neck, shoulder... that have been recommended

³¹ The *Masnavi*, or *Masnavi-i Ma'navi* (Persian: مثنوی معنوی), *Masnavi*- is an extensive poem written in Persian by Jalal al-Din Muhammad Balkhi also known as Rumi, the celebrated Persian Sufi poet. It is one of the best-known and most influential works of Sufism (Williams, 2007).

by my physiotherapist, yeah, I lie down and exercise, all in all, I always try to help myself.

Rohi, initially, in spite of her interest, due to her physical illness, abandoned the concept of engaging in formal physical activity but clearly referred to her efforts in keeping active inside and outside her home independently. Additionally, Rohi's approach to physical activity was pragmatic, through practising the exercises recommended by the health professionals. She explicitly presented her problem-focused approach towards her physical health issues. Trying to "help myself" was a phrase quoted by five participants who suffered from physical and mental health problems, a representation of the women's resilience and sense of responsibility in managing their long-term illnesses and leading an active life. It is worth noting that in the next section I will discuss in details the underlying reasons for engaging in various social activities Rohi highlighted in the above extract, such as attending Mawlana class, charity discussion group and meditation. Contrary to her diminished physical activity, due to her neck and back pain, she took food and eating practices very seriously as she described:

Because I stay up very late, I feel hungry and I have to eat at around 11-12 at night. However, in between when I get home until dinner I might eat a banana or a pear, cherry, grapes or anything available, usually eating two or three types of fruits with water or ginger tea or cocoa until late evening so until then I try not to eat because I am very prone to weight gain and obesity, so until dinner I try to occupy my mind with two pieces of chocolate because I need to eat dinner and I put on weight if I eat in between. I weigh myself without exception, every day. I weigh myself to track my weight changes, just in case I put on weight.... when I come back from a party I watch my eating and weigh myself again to make sure I've got the same weight(laughs) then I start cutting down on food and stabilise my weight, this is my dietary pattern for the past two years.

Following the advices of some health professionals in Farsi speaking satellite TV channels broadcast outside Iran, Rohi tended to strictly monitor her eating practices and weight. The various techniques she used from consuming fruits, cocoa with water to distracting her mind, obsession with daily weighing, and other calorie counting strategies

might be a reflection of her attempts in overcoming the negative effects of ageing on her body.

8.4. Migration and mental well-being

In Chapter 6, I dedicated a section to the effect of migration on various aspects of daily life as expressed by seven Iranian migrant women respondents who endured various stresses including language barrier, different legal and educational systems, difficulty in finding employment or dealing with unemployment and financial issues amongst many others. The life hassles ultimately led to developing psychological problems or the exacerbation of preexisting issues for seven study participants. Strikingly, this group tended to see the daily life pressures as part and parcel of migration process. Not only were their perspectives but their coping mechanisms were noticeable. For Nastaran, a recent refugee, life in the UK was corresponded with facing enormous pressures arising from new career and educational workload over and above her household demands and motherhood responsibilities, hence, attending a gym, recommended by her GP, was a place to reduce the negative effects of the psychological pressures:

Yeah, I'm going to forget everything for a few hours, or few minutes or something make me a little bit relax ... But we miss here a lot, the sun. I feel very, ehh, it's like, very down, or I think I had a more energy before, than now, even I have a better food, or better exercise but I feel I don't have that energy than before, I don't know maybe age. It's like four years ago, now four years passed with a lot of, it's like problem, stress, everything affected your life... So I think I need more energy, but I don't know how (laughs). Try to do it's like the first, I don't know maybe it's just miss the sun. I'm going to ask the doctor.

Nastaran speculated various factors such as lack of sunshine, ageing at 38 and life stressors as the underlying problems for her fatigue. She related her fatigue to the mounting daily life pressures, and she was unsure to what extent exercise and good food could address her fatigue, nonetheless, she trust her GP in answering her physical issues. The peculiarity was the way refugees such as Nastaran justified the life adversities:

Nasrin: what do you think about your decision and now in the situation you are at the moment? How do you feel about your move?

Nastaran: I feel happy, if it's like we, any time, anymore, I'm going to choose this one, I'm not very, it's like upset or why I choose this one or something. I'm very happy I am here, but we need to solve it for ourselves, and it's different country, different language, different culture, different people. It's not my people. So I found a very good friend, like, they, like, helped us much to gain the situation here, at the moment, this job I have... Immigration is tough but enjoyable, we like it. Although we are going mad, but it's fine (laughs). I swear to god, when I tell my mum that I'm taking Citalopram, she gets surprised and asks me why? I answer well, because of difficulty, all the stress, she says relax take it easy. I tell her, I'm relax but (laughs) too much pressure on me (laughs).

Nastaran's narrative, evidently, illustrated two opposing phenomena: madness and happiness. These two appeared to be intertwined without causing any conflicts. Nastaran, who lived a comfortable lifestyle as a manager in Iran, currently a refugee, took a realistic approach towards her migration that was grow gradually, despite paying a huge price of dealing with enormous daily stressors. She expressed her sense of gratitude for her current career, perceived it as a great achievement in this country, a paid position as an apprentice despite its far lower position than her specialized managerial job in Iran. In other words, her emphasis was on the positive aspects of her life rather than dwelling on the losses. The frequent laughs while talking about the psychological pressures and the embodied consequences might display her tendency to minimize and normalize the everyday stresses. She, similar to six other Iranian women encountering psychological problems in diaspora, attempted to justify the multiple stressors to the differences encompassing language, culture, people, and the weather to alleviate the scale of the issues. She moved back and forth between the life pressures she had to endure and the gratitude of residing in Britain. Nastaran, believed a problem solving approach was the best answer to the daily life hassles, simultaneously was uninterested in concealing the embodied health and mental health issues that eventually took her to see a GP who prescribed her medications. The implications of migration for others was the escalation of the pre-existing mental health issues. For instance, for Tarane, a former asylum seeker, then refugee and now a proud British citizen, whose approach to her mental health problem, was to focus on the solutions and maintain a positive outlook to life:

I had this mood problem but maybe here it was deteriorated, because if I had any problem prior to the migration, the problems in here were added and escalated them that is why I speak to a counsellor, seeing them, taking medications and through all these, pushing myself trying to help myself. If I didn't have depression and back pain, I would definitely go to the gym more often, because as long as I'm there I feel so good, a sense of youthfulness, I feel I'm still strong... I'm hoping my depression could be sorted by medication, counselling that have been a great help. They have the NHS which really value people...

Tarane, a housewife, clearly emphasized the role of migration with its associated problems as the catalyst of her depression compounded with her physical health: back pain, as the obstacles to engaging in regular physical activity. Whilst she was not in denial about her suffering, she pointed to her efforts in alleviating her mental health issues, medication and counselling. Tarane, Samira and Rohi appeared to be resourceful and 'strong' in the battle with their illnesses by challenging themselves, manifested in the expression of 'push' and trying to 'help myself' rather than being a passive recipients of their health issues. Her attempt in drawing a positive picture of her depression, by stressing on hope than despair, combined with the sense of gratitude for accessing the NHS facilities, were the representations of her agency and positive outlook towards migration. The availability of resources has outweighed the pain and misery of her illnesses. Gyms, for Tarane, were the sites for engaging with physical activity, gaining sense of happiness, strength, and youthfulness. Nastaran and Tarane presented perceived the gains as huge while viewing the problems as resolvable or at least manageable. The sense of agency, identifiable in the accounts of some of Iranian women participants in the Chapter 6 where they required women to set some time for participating in physical activity reappeared here. They actively pursued every avenues in identifying solutions, attempted to draw on the positive aspects of life in diaspora, or a balanced picture, in spite of their suffering that was seen as the inevitable consequences of migration.

Resorting to the NHS facilities and the GPs were not the only coping strategies. As a matter of fact, the coping mechanisms of Iranian women participants facing a range of health and mental health issues came at varieties. Some took initiatives by blending spirituality deriving from eastern philosophy and practices and Western approaches, for

instance, by attending poetry class, group discussions and activities offered by various organizations within the Iranian community as well as watching Farsi speaking TV channels. Rohi explained the reasons behind her varying social engagements:

Um, meditation mostly because of my characteristics, which I, by nature, hereditary, I used to be a very very sensitive and caring person, still am, with the slightest problem in the family, a relative's illness, with everything I used to feel overwhelmed ... until I joined the (meditation) group ... then I spoke to Dr Azita Sayani, ... a very famous psychologist, in the USA... I spoke to her 4-5 times from here. I called the US and spoke to her over the phone, she gave me some techniques which to a certain degree was effective for me, then started going to the psychology classes and Mawlana classes. Well, Masnavi is a psychology book, it's so thorough and over the time I always wished to be in Iran, despite having my sister here, although she is busy running a lab, but I see her every two weeks and also I meet some of my friends who are like sisters to me, but I always wished to be in Iran, so I worked on myself by listening to Masnavi, going to psychology and Mawlana classes. They transformed my life.

Rohi, who earlier identified her neck ache, backache and other physical health issues for limiting her mobility, was still seemingly obliged herself to be active indoors and in the community. In her narrative, she initially drew on her own characteristics, being a sensitive person about other's life problems, and the impact of life in diaspora on her identity for lack of sense of belonging as stated 'wished to be in Iran'. Rohi's problem solving approach to her misery was taking an active approach by identifying every opportunities in the Farsi speaking environments from talking therapy to an Iranian psychotherapist to attending psychology discussion group, meditation and spiritual therapy - Persian poem, Mawlana that collectively 'transformed' her life probably, psychologically. In fact, part of Rohi's activities outside her home was to soothe her dissatisfaction with life originated from her migration.

In this chapter, I explored other meanings attached to physical activity and diet of the women of different ages. It also shed light on the women's competences in accessing relevant services (meanings and competences) in overcoming mental health problems. I began with younger age, Shayeste, as one of four migrant women with toddler and how

their daily physical activity due to motherhood was confined to daily gentle walks within her locality to school, shops etc. that seemingly would not yield the expected ideal body weight and shape. This view was a representation of Westernized perspective of Iranian women migrant participants about body shape (Abdollahi and Mann, 2001). She, simultaneously, was realistic and flexible about her circumstances (Johnson et al., 2004). Westernized ideal body weight was also manifested in the narratives and practices of midlife Iranian migrant women in this study, such as Rohi, who appeared to be obsessive with her weight management. Similarly, six other midlife women, were conscious of their body weight through monitoring their daily food intake. This supports the findings of Newton et al. (2017) that midlife women tend to continue to pursue weight management goals even among those with relatively healthy body weight. The study attribute these practices to the high exposure to the body weight ideals glorified by media that likewise, appealed to Middle Eastern Iranian women participants too. The perspectives and daily practices of food and dieting of midlife Iranian migrant women respondents such as Rohi, and Fateme are consistent with the views of mainstream British women who consider the positive role of ageing in improving awareness of healthy pathways and attention to body shape, weight and appearance through focusing on exercise and food (Johnson et al., 2004).

The approaches of the respondents towards their mental health problems resonated their power and agency as well as their access to the relevant resources in the UK society. This led the women to construct certain realities of migration, ageing, health and mental health. The women tended to normalize the problems and focus on the solutions and growth. This do not support the ample empirical evidences magnifying the daily life issues of Iranian migrants portrayed as a group trapped in the mountains of crippling linguistics, psychological, financial, social and occupational problems (Gholizadeh et al., 2011; Shishegar et al., 2015; Dossa, 2004). Iranian migrant women in Western countries are worse off. The group are presented as a bunch of migrants feeling miserable, unable to learn English, nor are capable of locating any resources in the host country (Gholizadeh et al., 2011). In this study, although, I have presented recurrent psychological pressures and experiences of hardship, noted by six refugees and one migrant, that supports the findings of other studies involving Iranian migrants in the West, the study participants, tended to see the issues as the inevitable consequences of migration (meanings). Furthermore, they perceived the issues would be resolved or alleviated if they identify and utilize the useful resources, services, and/or strategies (materials and competences).

The younger participants tended to focus on family (Shayeste and three others with young children), meanwhile, some midlife Iranian women, in particular, focused on their health in their everyday routines. In the event of encountering physical health problems, for instance, when the mobility was affected by different illnesses, they strived to continue with leading an independent and active life. Weight control through restricting calorie intake simultaneously eating healthy food (competences) considered pivotal for achieving a healthy body (meanings). Further to this, those with mental health issues endeavored to focus on the solutions they perceived helpful while holding positive outlook towards life in diaspora, viewing themselves as powerful social actors who were able to actively seek help within the existing social structure (Giddens, 1984) that from their view resulted in transformative or relatively positive outcomes. This availability of resources supports Shove et al.'s (2012) claim that it is not only the role of self but the access to the competence and materials are equally important for continuity or change of any one practice.

9. Discussion

9.1. Introduction

In this chapter, I will demonstrate the major and nuanced themes discussed over Chapters 3-8, on the role of migration on the Iranian women migrant participants' physical activity and dietary practices. The overarching and nuanced themes informed by the social practice theory while taking into consideration other philosophical concepts communitarianism and individualism. The findings are compared and contrasted with the relevant literature to illustrate the application of social practice and its dynamic, the study methodology, and the diverse sample, in answering the research questions. I then reveal the contributions of this study to the body of knowledge within the fields of physical activity and diet in the context of migration. I will ultimately propose a number of agenda for the future research.

9.2. Answering the research questions

This thesis aimed to understand the role of migration for women who moved from Iran, a Middle Eastern country, to Britain, a Western country and how this move influenced their practices of physical activity and diet. It was informed by social practice theory that proposes performing any practices such as cooking, eating, walking, driving, required people (practitioners or carriers) to actively combine the elements that these practices are made of (Shove et al., 2012, p. 14). In conceptualizing the dynamics of practices, Shove et al. (2007) categorize elements into three key groups namely materials (things, infrastructure, technologies, tangible physical entities, and body itself), competences (skills, know-how and techniques) and meanings (social significance, cultural norms, emotions, aspirations, and motivation). They maintain that practices are the consequences of interconnections of these elements (Shove et al., 2012). I reiterate several key points highlighted in Chapter 2 in which practices are social and in order to happen recursively they need to be embedded into the everyday life and 'the ordering society' (2007). Furthermore, the elements change over time that it highlights the importance of the life course of practices in understanding why and how practices emerge, sustain, transform and disappear (Blue et al., 2016). In following the main propositions of social practice theory, I reviewed the historical development of physical activity in Iran in Chapter 3 and the history of food consumptions of Iranians in Chapter 4 with specific focus on women. Across Chapter 3-8, I also presented the testimonies of Iranian participants, which

included their views, and experiences of physical activity and food in Iran and in Britain. At the end of each chapter, I compared the findings with the relevant literature while distinguishing and identifying the elements related to performing physical activity in both Iran and the UK. Then I showed how migration led to the initiation and improvement of physical activity for some women in this study. This was due to the individualistic society of Britain and the importance of being physically active (meanings), access to the gyms, smooth pavements (materials), learning to use bikes, swim, scheduling some time for walking regularly (competences). Whereas migration resulted in the diminished physical activity of some recent migrants due to their lower socio-economic status (financial restrictions, loss of social network) and other issues in accessing resources (materials), this group, however, were physically active in Iran. Similarly, in applying social practice theory, I identified the elements influencing dietary practices of Iranian women, for instance, the significance of food (meanings), the women's cooking skills (competences) and the food context and infrastructure in London (materials) that contributed to the continuity with practising and eating Iranian traditional food amongst the respondents.

With the above points, I answer the research questions raised in Chapter 1. The answers are informed by social practice theory and considering the importance of two philosophical concepts, individualism and communitarianism. I initially raised a broad research question 'What is the role of migration on the perception and experiences of physical activity and dietary practices of Iranian migrant women in London?' I also presented four subsidiary research questions. To avoid repetitions, it is commonsense to start with answering the subsidiary questions because each one covers certain aspect of migration that simultaneously addresses the main research question. At the end of this section, I will argue that why social practice theory in examining two disparate fields of physical activity and diet of Iranian migrant women in Britain is more valuable than linking these two into the obesity framework.

In answering the first subsidiary question 'What role does socio-economic status play on the physical activity and dietary practices of Iranian women in the UK?', this study found that new arrivals (those who have been living around ten years or less in the UK), mostly refugees and few migrants of urban dwellers, enjoyed many social and financial privileges in Iran. This group exercised regularly together with their family, friends and wider social network. They tended to inspire one another in keeping physically active. For instance, the women highlighted going mountain climbing, walking in the park, or picnicking

together. Migration, given the women's language barriers, and unfamiliarity with different social structure in the UK resulted in losing the privileges they used to hold in Iran. It was the beginning of facing multiple losses for the study participants for instance, loss of their jobs, at least for the first few years, and loss of social capital (social network, and status). Their diminished socio-economic status in diaspora changed their day-to-day priorities with detrimental effect on the opportunities to engage in physical activity. What this study showed was that the women's restricted family budget or financial resources resulted in not being able to afford the costs of gyms membership and associated childcare. This caused them to remain at home with subsequent negative effect on their physical activity levels. This is incongruent with the findings of Delavari et al. (2013) who found that Iranian migrants in Australia became sedentary only at the initial stages of migration but upon assimilation into the new society they felt more motivated to exercise.

Those women from traditional family background did not share similar experiences with the recent study participants. The testimony of this group indicated that their resettlement in Britain, a country with individualistic principles (Sinha, 2008) was a transformative experience. This was because migration for the women who grew up in an oppressive environment liberated them from the pressures of the social group, cultural norms, and their community, which imposed restriction on their physical activity. Furthermore, the women's spouses played a positive role in promoting physical activity for their wives in many ways. The health promotion strategies of Iranian men for their spouses were through verbal encouragement (meanings and values attached to physical activity) and/or practical support (improving women's competence and skills by training their spouses on how to ride a bike and setting up a home gym or materials). The sense of freedom and the support from significant others led the respondents to construct a new perspective of their gender and improve their agency. The women believed that a woman, wife, and mother required to be powerful, a decision maker and manage their time effectively by setting aside some of their time on physical activity in spite of busy daily schedules. This also challenges the established discourse identifying the lack of previous experience of physical activity to be, in part, responsible for the low participation in physical activity among women of minority ethnic groups in Britain (Jepson et al, 2008; Koshoedo et al, 2015; Grace et al, 2008). The discrepancy between the findings of this study and above studies that mostly conducted in South Asian communities in Britain signifies the heterogeneous nature of the non-White ethnic minorities that has been lumped into the

broad category of BME encompassing a wide range of ethnicities, races, languages, religions, and past experiences. Moreover, Iranian migrants in this study recursively exhibited the influence of Westernisation that was visible through their positive remarks about mixed gender gyms, Western women exercising in public and institutional membership.

The contrasting experiences of migration for two different groups were evident in this study. In fact, migration was a blessing for the women from traditional Iranian backgrounds, as it liberated them, simultaneously, disadvantaged middle class recent migrants who benefited from the collectivist culture and supportive community in Iran. This suggested that migration was not totally a negative or positive experience for all participants since they had unique life experiences depending on their social class, economic status, the time of departure from Iran, and their legal status in Britain. This study found that being an asylum seeker or a refugee was more associated with enduring life pressures, due to the loss of privileges they have held in Iran and the limited access to support in the UK compared to other migrant counterparts.

In answering the second part of the question, this study found that in spite of the lower socio-economic status of the recent migrants in Britain, their dietary practices were less negatively affected. This was first and foremost due to the significance of food (meaning) to the women, not only as a necessity to their own and family's survival (Belasco, 1999) but it was seen as a means to flourish. Food for those women living with their child (ren), spouses and other family members carried multiple meanings and manifested in their commensal eating. It usually comprised a traditional Iranian meal prepared at home from scratch and usually eaten in the company of all or some of family members. The value attached to practicing Iranian traditional diet would amount to spend considerable time and effort on preparing a dish for the family. It also served to unite the family around the table, strengthen their sense of identity, transmit Iranian food culture to their children, fulfil the women's moral responsibility in safeguarding their family's well-being and refresh the memories of Iran. The cumulative values attached to food (social, cultural and ethical meanings), combined with the women's competence in cooking or desire to improve their cooking skills inspired them to overcome any obstacles along the way. This explains why the women's diet was less vulnerable to the financial constraints initiated by migration, since they would prefer to spend the family budget on food (materials), because food was linked to raising healthy family and children in particular. This supports

Pred's argument that migration might bring certain priorities and projects that concentrates the time, energy, and competences of the people to certain direction and not others (Pred, 1981).

The second study sub-question was 'How do stress and other psychological consequences of migration shape Iranian women's perceptions and experiences of physical activity and dietary practices?'. This study showed that similar to the previous question, food was less negatively affected by stress, although for some who underwent enormous daily life pressures food became a friend but the magnitude of the issue was not substantial. Nonetheless, the women's motivation for participation in physical activity was negatively affected due to the mounting life pressures deriving from migration. An array of issues comprising unfamiliarity with many aspects of life in Britain, such as English language, the legal system, finding suitable accommodation, job hunting, weather, and inability to make meaningful bonds with the host people, would subsequently deprioritize the necessity of physical activity in the women's daily routines. Moreover, the human element in inspiring one another in engaging in physical activity was an important feature for Iranian women migrants coming from a collectivist culture. The recent migrant women provided ample examples of performing physical activity in Iran in the community. This signifies the influence of community and group membership in promoting interactions with one another that increases the carriers or practitioners (Crossley, 2006) who tend to boost the women's motivation to participate. On the contrary, the issue of fragmented community of Iranians in London (Spellman, 2004) posed an obstacle to the women's ability to familiarise themselves with British society. This resulted in their social isolation with implications for their well-being and subsequent impact on their motivation to engage in physical activity. In a nutshell, the study found that stress and psychological pressures, especially for the new arrivals, who were unfamiliar with many aspect of British society such as weather, language, culture and resources, led them to become sedentary whereas this group used to lead an active lifestyle in Iran. As the women became familiarised with the new environment they began to seek solutions for their mental health problems through social activities and intermittent participation in physical activity that directly improved their moods and sense of well-being.

In answering the third subsidiary research question 'How important are English language skills for engaging in physical activity and in influencing dietary practices of Iranian

women in the UK?’ The findings of this study indicated that apart from two recent asylum seeking and refugee participants who were unable to speak English, the remainder were able to independently meet their day-to-day social and communication needs including navigating their neighbourhood for accessing food. Of 22 participants, 21 were either in education or obtained a college or university degree in the UK. Yet, acquiring English language proficiency is beyond just managing the daily communications, since the women are required to be adequately proficient in English language to be able to secure a paid employment. This contributes to the increased sources of family income that positively influences participation in physical activity. In relation to food, poor English skills did not influence the women’s diet since they tended to devote their limited budget to food and eating a healthy diet. There was also no evidence to suggest that those with poor English could not locate food stores, hence, access to the everyday and traditional Iranian food was not affected.

Lastly in answering the sub-question ‘How does the physical environmental shape experiences of physical activity and dietary practices of Iranian women?’, this study showed that the food environment and infrastructure in London was far more diverse and accessible than the physical activity resources. Iranian women respondents frequently noted that windy and rainy British weather was a challenge to their pace of walking specifically for those with young child (ren). Although, some intended to integrate walking into their daily routines by taking their school age child to school. This highlighted the role of gyms which was accessible to some but not all. Those who succeeded in joining a discounted gym perceived British society as a fair place for migrants, especially the disadvantaged. In contrast, inadequate distribution of low cost gyms in different boroughs of London left many to give up the practice they used to do regularly in Iran. The practising Muslim women participants faced similar challenge in accessing segregated swimming pools that resulted in their intermittent participation in the type of physical activity they accessed in Iran. In support of previous studies among BME groups in the UK, this thesis showed that the issue of uneven distribution of segregated and low costs physical activity and sport facilities continues to deprive BME women with religious affiliation from participation in regular physical activity (Jepson et al., 2008; Koshoedo et al., 2015).

Contrary to the issues involved with physical activity infrastructure (materials), food contexts, both physical (materials) and social in London were described by the women as

rich and multicultural. The testimony of the respondents indicated that many recent and long-standing respondents, regardless of their legal and financial statuses, enjoyed visiting ethnic food stores, in addition to the chain supermarkets, offering foodstuffs (fresh and raw food: meat, fruits and vegetables, as well as many food products consumed in Iran) at lower prices than the chain supermarkets. This privilege related to residing in the capital city and contributed to the women's continuity with practising Iranian traditional food. Shopping at ethnic food stores also brought social pleasure to the women for interacting with other ethnic groups managing different food stores.

The great satisfaction with food environment in Britain frequently voiced by the study participants was in contrast with the experiences of Iranian migrants in Sweden for their limited access to or high prices of leafy vegetables, Sabzi Khordan (Ahlqvist and Wirfalt, 2000). Further, it has been reported that lack of access to fruits and vegetables for the Iranian migrants in Australia was the reason for resorting to fast food (Delavari et al., 2013). Other studies suggested that migrants, due to the higher prices of healthy food, consumed cheaper food products high in sugar, fat, salt, and sweetened beverages (Kockturk, 2004; Vallianatos and Rain, 2008).

Having answered the subsidiary questions, I now bring back the main overarching question 'What is the role of migration in the perception and experiences of physical activity and dietary practices of Iranian migrant women in London?'. This could be answered by merging the above points in light of social practice theory and two concepts of individualism and communitarianism, in which physical activity for those from oppressed family backgrounds was improved greatly. This group felt their migration was corresponded with greater motivation and sense of freedom (new meanings) and were competent to specify some of their daily time and energy to physical activity. More particularly, they tended to integrate daily walking, swimming, cycling (competences) and locating some physical activity resources in the community or installing some sports equipment at home (materials). While for the recent migrants, their motivation to engage in physical activity (meanings) was diminished. This was due to the presence of other competing priorities and financial constraints (materials) compounded with their inability to locate resources because of their poor information seeking strategies and social isolation (competences). Conversely, life in Britain improved the respondents' dietary practices considerably. This experience lies in the significance of food to the Iranian women respondents who attributed cultural, social and ethical values to eating healthy

diet (meanings). Moreover, this individualistic society enabled the women to manipulate traditional Iranian recipes they perceived as unhealthy (competences). Secondly, they were keen to cook and improve their cooking skills (competences) and felt proud of raising family with their homemade traditional food (meanings). The abundance of chain groceries and ethnic food stores in London provided them with the raw and fresh food products (materials) necessary to prepare their ideal food. I have summarised the key elements shaping the physical activity and food practices of Iranian women in Britain in Table 2.

9.3. Table 2, summary of contribution of social practice theory to physical activity and food of Iranian women migrant

Physical activity/ food practices	Materials	Competences	Meanings
Physical activity: Women of traditional backgrounds	Those from repressed backgrounds were allowed to access resources (bike, home and public gyms)	Competent in performing physical activity, improving skills in cycling, swimming, and allocating time to walking	Personal and social significance of physical activity, sense of freedom, happiness, achieving health and well-being,
Physical activity: Recent arrivals Mostly refugees, few migrants	New arrivals experienced lower socio-economic status, restricted access to the appropriate gyms	Poor information seeking and social isolation, intermittent participation in physical activity	Less significant for new arrivals, deprioritization of physical activity due to other competing daily life demands, less physically active
Food practices of the Iranian women irrespective of their migration history	Accessible food resources: chain supermarkets, ethnic food stores, cheaper food prices in UK than in Iran	Competent in cooking, desire to improve knowledge and skills in preparing healthy traditional Iranian food	Cultural and social significance of food, direct link between food and health, food taken as the first priority
Comparison of physical activity and food practices	Widespread, and diverse food resources compared with uneven distribution of suitable physical activity facilities	More competent in cooking skills, and negotiating food in the family than locating physical activity resources, and allocating time to physical activity	Greater social, cultural and ethical significance of practising a healthy and traditional Iranian diet than performing physical activity

At the end of this section, it should be noted that the application of social practice theory to physical activity and diet, as two separate fields, is superior to combining these two into the obesity framework. Social practice and its dynamics has guided me to distinguish the key elements (materials, competences, and meanings) related to physical activity and diet separately. I have also showed how the interconnections between the elements have led to the initiation or improvement of physical activity for some participants but the break in the links between the elements has resulted in diminishing the physical activity levels of others. I have also demonstrated the findings, in which the interconnection of the elements associated with food, improved the women's dietary practices. Should I have pursued my initial plan, exploring physical activity and diet with reference to obesity, I would have narrowed the scope of my study to the effects of physical activity and food on the Iranian women's weight, body shape, size and the occurrence or the absence of obesity. Although body shape and weight were not the main study's agenda, many participants spoke of their attention to the impact of food on weight through reducing their calorie intake and monitoring their eating. They also perceived effective physical activity should lead to weight loss or burning huge calories. Furthermore, the application of social practice theory to the physical activity and diet has revealed various meanings, purposes and benefits associated with each practice irrespective of weight and body shape. In relation to physical activity, for instance, I showed that the women were competent or presented their sense of agency to use smooth pavements (competency and materials) and walk their children to school on a daily basis. This group, despite being dissatisfied with their body shape, and weight were proud of engaging in physical activity (meanings and competences). I detailed the purposes of attending gyms for the Iranian women respondents who described gyms (materials) as the spaces for extending their social network, improving their health, achieving a sense of happiness, and youth (meanings) especially when accompanied with their family members. The social and psychological benefits of joining gyms had no relevance to weight loss or body shape. This implies that gyms were also seen as the social hub boosting their mental well-being and sense of belonging. In relation to diet, I detailed the meanings attached to consuming traditional Iranian food for the study participants including transmitting Iranian culture to the next generation, enhancing the women's sense of identity, fulfilling their ethical responsibilities, and safeguarding the family health and well-being that neither had the slightest relevance to obesity.

9.4. Contribution to academic knowledge

In this thesis, I presented the application of social practice theory and the concepts related to individualism and communitarianism to physical activity and food. The other strengths of this study, is the diverse study sample in which 22 Iranian women migrant of first generation with varying ages (24 to 64), educational, occupational, marital and legal statuses, family size, and length of residence in Britain participated in individual in-depth interviews. This heterogeneous sample yielded diverse views and experiences related to physical activity and diet in both Iran and Britain without forcing the findings to fit into the dominant themes in the literature as totally satisfied/depressed, liberated/pressured, marginalized/assimilated, physically active/sedentary, eating healthy/unhealthy diet (Delavari et al., 2013; Dossa, 2004; Persson et al., 2012; Gholizadeh et al., 2011; Caperchione et al., 2008). This thesis has several contributions to academic knowledge as it follows;

The first contribution of this thesis highlights the initiation of physical activity for those coming from oppressed upbringing. This study has shown that the women's resettlement in an individualistic society with less interferences of others led them to deconstruct the previous gender role expectations advocating women to spend their free time at home. As a result, they reconstructed subjective concept of gender that required them to be responsible adults, plan their time and incorporate physical activity into their daily routines. They refuted the sense of being victimized of their past life experiences and viewed their migration as a transformative opportunity. This was evidenced through the women's active pursuit of learning new skills such as riding a bike, planning their time to walk regularly to school, to library and other places and avoid being sedentary (competences). This finding challenges the dominant discourse assuming that the absence of previous experiences of physical activity from childhood through adulthood would be carried on in diaspora (Koshoedo, et al., 2015).

The second contribution of this research relates to the pivotal and positive role of the respondents' spouses in inspiring their wives towards integration into the host society through institutional membership. The findings of this study showed that the Iranian men's supportive roles were beyond sharing some household responsibilities, feeding children and cooking (Harbottle, 2000). The verbal reassurance and encouragement, in addition to practical support for their spouses enabled the women to participate in social,

educational, and occupational domains. In relation to physical activity, they offered a range of support from setting up a home gym to the role of a sport instructor, and a companion. This phenomenon was in stark contrast with previous findings that men or other family members discouraged women of minority ethnic background from participating in physical activity since they would see no value attached to joining a gym (Gholizadeh, et al., 2011). The reason for this discrepancy was the different data collection methods, in which Gholizadeh et al. only used focus groups with three ethnic groups that would not give sufficient time to the individual participant to express their views, experiences and routines (Furst et al., 1996). Whereas, in this study I focused on only Iranian women who participated in the lengthy individual interviews with some who expressed their views in several interviews (see Table 1). The other methodological differences was the composition of these two study samples as Gholizadeh et al. only recruited women from low-socio-economic backgrounds, but this study included a diverse sample of Iranian women migrant that I earlier described. Moreover, in Britain, the findings of this study is incongruent with research in South Asian communities in which the male spouses presented dissatisfaction towards their wives spending time outside home for the sake of physical activity since women were culturally expected to remain at home serving husband and children (Babakus and Thompson, 2012). This might also be related to the cultural differences and heterogeneous nature of different ethnic groups (Gatineau and Mathrani, 2011).

The third contribution of this thesis refers to the lack of link between watching the exercisers and performing physical activity, which demonstrated a discrepancy between this study and findings of Delavari et al.'s (2013). The current study respondents shared similar perspectives with Iranian migrants in Australia, as both admired the physically active Westerners in public for their willpower and perseverance in participation. Unlike the Iranian migrants in Australia, who felt these observations boosted their motivation to be more physically active; observations were not directly turned to action for Iranian migrant women in this study. The findings indicated that physical activity simultaneously was affected by so many adversities arising in the women's real life especially for those who were involved in motherhood, child rearing, multiple stressors and health and mental health issues that would create practical obstacles, irrespective of their interest. This suggests that behaviour change is a far more complex process in which it involves several stages from observation and contemplation to action and maintenance (Prochaska and DiClemente, 1983). Moreover, Shove et al. (2012) argue that access to resources

(materials) and know-how of the situation, that means knowing where, what and how to locate relevant resources (competences), could immensely influence physical activity.

The fourth contribution of this thesis signifies the role of social network on the continuity and discontinuity of physical activity. This study showed that in the absence of inspiring people in the women's network such as extended family, relatives, old school friends, and colleagues - both competences (knowing where, and how) to engage in physical activity and motivation (meanings) to participation were diminished in Britain. Resettlement in the individualistic society of Britain, in the face of fragmented Iranian community negatively affected Iranian women social life (Malek, 2015). This study has added to the previous findings on the consequences of living in fragmented Iranian community in which the migrant women were disadvantaged from the support of long-standing Iranians. The lack of community cohesion led to the diminished opportunities for the recent arrivals to go out for physical activity whilst they would regularly practice physical activity in group prior to their migration.

The fifth contribution of the study to the body of knowledge relates to the application of the element-based social practice theory (Shove et al., 2007; Shove et al., 2012) to physical activity and diet in an under-researched group of migrants, Iranian women. In applying social practice theory to physical activity and food, as two disparate practices, I showed the dissimilar food infrastructure/resources compared with the resources for physical activity (materials). Moreover, the respondents attributed greater values (meanings) to food than physical activity that resulted in colonizing their energy, time, and resources to food especially amongst those living with family members. Despite the adversities diminishing the motivation of some Iranian migrant women respondents in engaging in physical activity (meanings), they were highly motivated or competent to cook healthy dishes, to purchase healthy food, to meticulously navigate their local neighbourhood and beyond in search of bargains and quality food (competences) to ensure that they raise healthy families. This is in contrast with the experiences of Iranian migrants in Australia who identified the poor food culture and resources in the country as the underlying reason for resorting to fast food and consuming less fruits and vegetables (Delavari et al., 2013). The food patterns of the study participants also did not support the other migrants' women who lacked sufficient budget for purchasing nor did they have the knowledge of preparing healthy food (Gholizadeh et al., 2011). Most of the women in this study acknowledged that the widespread healthy eating messages in British society

enhanced their knowledge and skills in preparing healthy foods (competence). The most important element as other studies indicated was the women's easy access to healthy and diverse food infrastructure (materials) (Bailey et al., 2015; Brown and Paszkiewicz, 2017). The cumulative effects of access to materials, competences with great meanings attached to food resulted in the women reporting that they consume more fresh fruits and vegetables, limited fat and salt in Britain than in Iran. One of the underlying reasons for eating a healthy diet was the stronger link the women made between food and health compared with physical activity and health (meanings). The other motive for practising healthy diet more frequently than physical activity was the disparate nature of these two and their requirement (materials). For instance, food was prepared at home (space) and for the whole family given the Iranian women were either competent in cooking or developed their skills after their marriage (great competence). While physical activity benefited only the woman (less significant meaning). Further, they mostly preferred to perform physical activity outside their home (public resources). Hence, it was more likely to be negatively affected by many adversities such as lack of motivation (meanings), the weather, lack of access to the suitable spaces/gyms, financial resources and childcare support (limited materials). On the contrary, the time and labour invested in preparing food was highly valued (great meaning) since it fulfilled the women's moral responsibility of raising healthy children (Crawford, 2010), enhanced their sense of competency, while commensal eating united the family around the table that ultimately improved their wellbeing (Harbottle, 2000). It is worth comparing the results of applying social practice theory with structuration theory of Giddens. In the previous chapters, in several occasions, I showed the role of agency, and self (Giddens, 1984) in which the women felt empowered by their migration in setting some time for engaging in physical activity. In addition, they presented their agency in modifying the recipes they identified as unhealthy, and were competent in negotiating food with their children. In Chapter 8, some women appeared as social actors in resolving their health and mental health issues. Furthermore, access to the resources in diminishing the women's pain and misery played a role and perhaps explained why the women remained optimistic despite suffering. This is to reiterate Shove et al.'s (2012) argument on the superiority of social practice over structuration theory for its comprehensive framework, and clear identification of important elements in change and continuity of practices. In relation to Welch's (2017) criticism of social practice theory, arguing that it overlooks personal factors such as motivation and emotions in individual's behaviour change, again the above points explain why motivation to engage in healthy eating was stronger than performing physical

activity. Additionally, as I noted earlier, the respondents have showed that their emotions and motivations in practising physical activity was closely associated with their social environment (limited social support and networks), financial constraints (materials) and lack of awareness of the available physical activity resources in their locality (competences). For instance, the new arrivals' diminished motivation to participate in physical activity in Britain was related to the absence of inspiring people in their social network. Going to the gyms, as a highly valued way of engaging in physical activity, was also negatively affected by their lower socio-economic status emanating from migration. In summary, in this study, personal factors (motivation, and emotions) were considerably shaped by the social and material resources.

The sixth contribution illuminates the nuanced differences between the findings of this study related to those with religious adherence and other Muslim women from minority ethnic backgrounds, predominantly members of South Asian communities, in Britain (Lawton et al., 2006; Jepson et al., 2008; Koshoedo, 2015). The difference was that Iranian women did not abstain from attending mixed gender sports facilities offering exercise classes and machines. This was due to the women's tendency to integrate into different spheres of British society, seen as a necessity to successful migration (Spellman, 2004). What the respondents shared with other women with Islamic affiliation was disapproval of both groups in attending mixed gender swimming pools and the lack of equal distribution of or accessibility of segregated swimming pools in different neighborhoods (Jepson et al., 2008; Koshoedo, 2015). Although some still tended to take the burden and travel to other neighbourhood due to the enjoyable experience of swimming in the company of their children, the participation, however, was intermittent.

The seventh contribution of this thesis emphasizes the coping mechanisms of the women enduring daily stresses, health and mental health issues. What this study shared with the previously cited ones was the complications originated from migration such as lack of social support (Lipson, 1992), financial issues (Lipson, 1992; Akhaven 2007) and enduring immense stressors (Gholizadeh et al., 2015). The application of social practice and its dynamics added that the respondents were highly motivated (meanings) and competent in identifying effective solutions (resources) to their daily life hassles and/or illnesses (competences). The women tended to see their health complications as the inevitable manifestations of humans' life (meanings) that have been intensified by migration. They simultaneously acknowledged the availability of various resources such

as the NHS services, Iranian communities' initiatives, online resources and certain TV channels (materials) giving them the knowledge and skills (competences) required for managing or transforming their stress and pain. Among midlife Iranian women and those with health and mental health problems, health was not taken for granted but a responsibility. To achieve this, they endeavored to remain physically and socially active, eat a healthy diet, monitor their weight, consider their achievements and remain optimistic about the prospect of their efforts. This was in contrast with the dominant discourse within the literature portraying a gloomy picture of migration (Dossa, 2004; Shishegar, 2015), in particular, amongst Iranian women who appeared frustrated and were unable to find solutions for their everyday life issues (Gholizadeh et al., 2011; Caperchione et al., 2009).

9.5. Further research agenda

Following on from the themes discussed, in terms of physical activity and food practices among Iranian women, a few other research agenda could be explored in the future. Firstly, the study site, residing in London played a major role in accessing food, public transport, parks, Iranian schools, and different charities for the participants that not only expanded their opportunities to navigate resources but due to the established Iranian migrant community in the capital city, they were able to connect with other Iranians. Hence, further exploration on the physical activity level and patterns, food practices and the well-being of Iranians in other UK cities with sizeable community of Iranians could shed light on to the role of place on these practices for Iranian migrants.

Given I excluded the Iranian women under the age of 24, further studies with the inclusion of younger Iranian women, in particular second generation are recommended to understand the intergenerational dynamics within the Iranian migrant families and how it affects the younger generation's daily life practices. In approaching the second generation of Iranians, it is useful to understand how the time spent at school, speaking different languages, socializing in different spheres with different ethnic groups where they exposed to a variety of foods might impact on the family dynamics especially relationships with their parents of first generation of Iranians.

Further research on Iranian migrant men who remained in the shadow, in spite of the apparent positive role of Iranian men frequently noted by the women, it is useful to explore the perception and experiences of Iranian men about the study subjects. Had I

included men along with women I could have achieved different narratives of migration. This idea arose over the course of disseminating my study and recruitment process when I received phone calls and was approached by some Iranian men willing to share their experience of migration but were critical for being excluded in this study.

Of the last suggestion, it would be helpful if further research could directly engage on the impact of Iranian institutions and the way they approach Iranians especially recent migrants who felt isolated, very vulnerable to the consequences of migration adversities, and not confident to communicate with the members of the host society. An exploratory study on the negotiation methods between Iranian institutions and local authorities and beyond in improving the lives of Iranian migrants would be more helpful.

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Appendix A: Ethical approval

EXTERNAL AND STRATEGIC DEVELOPMENT SERVICES

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Quality Assurance and Enhancement



02 June 2015

Dear Nasrin

Project Title:	An exploratory and explanatory study on the physical activity and dietary behaviours of Iranian and Afghan immigrant and refugee women in the United Kingdom
Researcher(s):	Nasrin Soltani
Principal Investigator:	Dr Symeon Dagkas
Reference Number:	UREC_1415_90

I am writing to confirm the outcome of your application to the University Research Ethics Committee (UREC), which was considered at the meeting on **Wednesday 20th May 2015**.

The decision made by members of the Committee is **Approved**. The Committee's response is based on the protocol described in the application form and supporting documentation. Your study has received ethical approval from the date of this letter.

Should any significant adverse events or considerable changes occur in connection with this research project that may consequently alter relevant ethical considerations, this must be reported immediately to UREC. Subsequent to such changes an Ethical Amendment Form should be completed and submitted to UREC.

Approved Research Site

I am pleased to confirm that the approval of the proposed research applies to the following research site.

Research Site	Principal Investigator / Local Collaborator
Public locations mutually agreed with participants	Dr Symeon Dagkas

Approved Documents

The final list of documents reviewed and approved by the Committee is as follows:

Document	Version	Date
UREC application form	1.0	05 May 2015
Participant information sheet	1.0	05 May 2015
Consent form	1.0	05 May 2015
Recruitment advertisement	1.0	05 May 2015



Interview questions	1.0	05 May 2015
Demographic questions	1.0	05 May 2015

Approval is given on the understanding that the [UEL Code of Good Practice in Research](#) is adhered to.

Please note, it is your responsibility to retain this letter for your records.

With the Committee's best wishes for the success of this project.

Yours sincerely,

Rosalind Eccles
University Research Ethics Committee (UREC)
UREC Servicing Officer
Email: researchethics@uel.ac.uk

Appendix B: Project explanation for participants

University of East London
School of Health, Sport and Bioscience
Stratford Campus
Romford Road
London E15 4LZ

The Principal Investigator(s)

Project explanation for participation

Under supervision of

Dr Julie Botticello

J.A.Botticello@uel.ac.uk

PhD student: Nasrin Soltani

u0918390@uel.ac.uk

Consent to Participate in a Research Study

The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate in this study.

Project Title

‘An exploratory study on the Physical activity and dietary behaviours of Iranian immigrant and refugee women in the United Kingdom’

Project Description

Participation in this research is involved in signing the consent form before filling a short questionnaire. The main part of the study is taking part in an individual interview or a focus group in which you are asked to express your opinion about a number of open-ended questions related to physical activity and diet.

In the first part of the interview, I would like to ask your attitudes towards and views, the meaning and importance of physical activity and whether you think physical activity/inactivity can impact on your health. I would be interested in knowing whether you have encountered any barriers to physical activity participation in your neighborhood and if you can suggest some solutions for improving physical activity level of women in your community.

In the second part of the interview, I would like to ask about your eating habits including the type of dishes you like to eat, your consumption of carbohydrates, fat, fruits and vegetables, your favorite drinks on a daily basis. I am also interested in knowing what a healthy diet means to you, the effect of diet on health, barriers to and facilitators of maintaining a healthy diet. I would like to know what your body size and shape preferences is and whether it is different from what is common in the UK.

In the last part of the interview, I would like you to share your experience of moving to the United Kingdom and how it has influenced your physical activity and dietary patterns. This interview might take about 45-60 minutes and will be recorded to be analyzed subsequently. Upon preparing the main findings of the study, you along with other participants of this study will be invited to a community event to express your opinion about the results and to what extent you think they need to be changed.

Confidentiality of the Data

This study has received ethical approval from the University of East London Ethical Research Committee. The information you provide for this study will be remained confidential wherein your identity will be removed and replaced by a code that only the principal researcher is able to re-identify it.

The data will be stored in accordance with the University of East London Data Protection Policy in the private computers of the university or researchers.

The results of the study will be published in academic journals or will be presented in the local or international conferences without any reference to your identity.

Location

You are free to suggest a public place to be interviewed, for instance, a community center, a council's meeting room or a quiet cafe to ensure of providing a comfortable atmosphere.

Remuneration

It is likely to provide refreshments for those who take part in this study.

Disclaimer

You are not obliged to take part in this study, and are free to withdraw at any time during the interview and afterwards before the data analysis starts. If you choose to withdraw

from the programme you may do so without disadvantage to yourself and without any obligation to give a reason. However, those who take part in the focus groups are required to know that it is difficult to be excluded from the study once the discussion finishes. If you have any queries regarding the conduct of the programme in which you are being asked to participate, please contact:

Catherine Fieulleateau, Research Integrity and Ethics Manager, Graduate School, EB 1.43,
University of East London, Docklands Campus, London E16 2RD
(Telephone: 020 8223 6683, Email: researchethics@uel.ac.uk).

Appendix C: Participant consent form

UNIVERSITY OF EAST LONDON

Consent to Participate in a Programme Involving the Use of Human Participants.

‘An exploratory study on the Physical activity and dietary behaviors of Iranian immigrant and refugee women in the United Kingdom’

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

I understand that my involvement in this study, and particular data from this research, will remain strictly confidential. Only the researchers involved in the study will have access to the data. It has been explained to me what will happen once the programme has been completed. I hereby freely and fully consent to participate in the study which has been fully explained to me and for the information obtained to be used in relevant research publications.

Having given this consent I understand that I have the right to withdraw from the study at any time without disadvantage to myself and without being obliged to give any reason before the data analysis started.

Participant’s Name (BLOCK CAPITALS)

Participant’s Signature

Investigator’s Name (BLOCK CAPITALS).....

Date:

Appendix D: Personal information questions

Dear participants,

I would appreciate it if you answer the following questions correctly, but you can leave any of the questions blank if feeling uncomfortable answering them. Thanks.

Do you know how old are you?

How many years you have been residing in Britain?

Do you have any children? None one two three or more

What kind of legal status are you holding? British Indefinite Visa

Student Visa Asylum seeker Other legal status Prefer not to say

What is your highest level of education?

Primary school High School College

Bachelor Masters Doctorate

Are you employed? Yes No

If yes, Full time Part time Zero hours

Can you estimate your annual household income? Less than £15000

£15000-30000 £30000-45000 More than £45000 Prefer not to say

8. What languages do you speak at home? English Farsi

9. What languages do you watch TV? English Farsi

10. Have you got any chronic disease? Yes No

Diabetes Heart disease High blood pressure Any other illnesses?

11. What is your weight?

12. What is your height?

13. Do you smoke? Yes No

If yes, how many cigarettes per day?

14. Do you drink alcohol?

If yes how many pint per day?

Appendix E: Interview guide

- 1) How did you find this move? / How did you find living here?
- 2) How do you spend your time?
- 3) What would you do in your free time? /how much time you spend on TV, laptop/computer, reading, and texting?
- 4) How do you describe physical activity? / What does physical activity mean to you?
- 5) Thinking about physical activity, in the last week what kind of physical activity, in what locality, for how long and what time of the day you performed physical activity?
- 6) How does your physical activity here compare with what you would do back home in Iran? If you think of the time you were in your homeland, what changes in your physical activity level you have noticed?
- 7) What reasons would you or someone from your community identify for not participating in physical activity?' (probing for barriers such as cost of gyms, language barrier, lack of social network).
- 8) How did you find your neighbourhood (probing for facilitators and barriers to their physical activity behaviours)?
- 9) Could you suggest some solutions for improving physical activity level of women in your neighbourhood?

To explore dietary behaviours and practices of the participants, the following questions will be asked.

- 1) Tell me about your current diet?
- 2) In the last week, can you tell me what dishes you cooked, or prepared?
- 3) In relation to types of food you consume, what kind of meat you buy/consume ?
- 4) Where do you shop?/What market do you choose for your food shopping?
- 5) In terms of the meal/dishes you cook who is/are the decision maker(s) in your home?
- 6) How do you deal with situations when your family member(s) have different taste and interests?
- 7) To what extent your income might have affect your current diet?
- 8) What is your opinion about the effect of knowledge on your cooking and eating habits?
- 9) How do you describe your diet in Iran? How do you describe your current diet compare with what you would eat in Iran?

- 10) How do you define a healthy diet? To what extent do you think our diet can affect our health?
- 11) What kind of barrier(s) could you identify for maintaining a healthy diet?
- 12) Do you have any solutions for maintaining a healthy diet for Iranian women?
- 13) How do you describe your network? Connections?
- 14) What is your opinion about your quality of life?
- 15) Do you have any more comments to add regarding physical exercise and diet of people in your community?