



Family influence on disordered eating: The role of body image dissatisfaction[☆]

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ABSTRACT

Research has linked an appearance-focused family culture (including parental commentary about weight/size) with increased disordered eating and body image dissatisfaction in daughters. Since body image dissatisfaction is also a risk factor for disordered eating, body image dissatisfaction may contribute to the link between family focus on appearance and disordered eating. This correlational study included a sample of 268 college women who completed the Family Influence Scale, Bulimia Test – Revised, Body Shape Questionnaire, and a series of items about their parents' comments about their weight/size. Both family appearance focus and daughters' body image dissatisfaction predicted increased disordered eating in daughters. Additionally, body image dissatisfaction partially mediated the influence of family appearance focus on daughters' disordered eating. No specific type of parental comments regarding weight/size emerged as a superior predictor of eating disturbance, but encouragement to control weight/size was a stronger predictor of body dissatisfaction than other types of parental comments.

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Introduction

The family represents an important social institution through which values, behaviors, and attitudes are transmitted over time (Parke & Buriel, 2008). According to learning theorists (e.g., Bandura & McDonald, 1963), adults, including family members, can influence children's behavior through modeling and contingencies placed upon behavior via rewards and punishments. In addition, research suggests that those closest to an individual may have a particularly powerful influence on what the individual perceives as normative (see Killeya-Jones, Costanzo, Malone, Quinlan, & Miller-Johnson, 2007), making behaviors of others to whom one is close, such as parents, particularly important in development. The influence of one's family and the role that parents play in development extends into the adolescent and early adult years (e.g., Aquilino & Supple, 2001). Not surprisingly, researchers have explored various mechanisms through which family experiences might place some young women at risk for eating disorders. Although some studies link family dynamics (e.g., Minuchin, Rosman, & Baker, 1978) with disordered eating, the "culture" of a family with regard to emphasis on appearance, thinness, eating, and weight may play a particularly important role

in the development of disordered eating (e.g., Kluck, 2008; Wertheim, Martin, Prior, Sanson, & Smart, 2002).

Family behavior, disordered eating, and body image dissatisfaction

Research suggests that various aspects of family behavior related to food and weight (e.g., expressed attitudes towards appearance, comments about body size) are associated with increased rates of problematic eating in children (for a review, see Golan & Crow, 2004). A general tendency for a family to focus on appearance and attractiveness is related to greater difficulties with disordered eating and weight concerns among daughters (e.g., Davis, Shuster, Blackmore, & Fox, 2004; Field, Camargo, Taylor, Berkey, Roberts, & Colditz, 2001; Laliberte, Boland, & Lechner, 1999).

In the quest to identify risk factors for disordered eating, researchers have also explored specific behaviors that family members may exhibit such as parents' modeling of dieting and their own disordered eating behaviors (e.g., Keel, Heatherton, Harnden, & Hornig, 1997; Kichler & Crowther, 2001; Stice, Agras, & Hammer, 1999). Included in this group of family behaviors that may create an appearance-focused culture are verbal comments parents make about their daughter's body size or appearance which may increase or decrease the likelihood of the daughter engaging in a certain behavior. For example, mother and (less strongly) father teasing (MacBrayer, Smith, McCarthy, Demos, & Simmons, 2001), negative comments, and criticism about appearance or weight (Baker, Whisman, & Brownell, 2000; Smolak, Levine, & Schermer, 1999; Vincent & McCabe, 2000) are linked with

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increased disordered eating in daughters. Similarly, encouragement to diet and lose weight from both mothers and (less consistently) fathers is associated with daughters' disordered eating (e.g., Benedikt, Wertheim, & Love, 1998; Keel et al., 1997; Vincent & McCabe, 2000; Wertheim et al., 2002). What is particularly concerning about the link between encouragement to diet and disordered eating is that parents may perceive verbal encouragement to diet and lose weight as a caring behavior and they may view teasing about weight and size as neutral comments made during family bonding. Yet, both parental encouragement to diet and lose weight and parental teasing have been linked with negative consequences for daughters (i.e., development of disordered eating).

There is little research on the specific mechanisms through which a family appearance-focused environment (i.e., emphasis on appearance and thinness) works to place some individuals at risk for eating disorders. Research exploring specific pathways through which parental behaviors operate could help clarify why some young women in appearance-focused families develop disordered eating while others do not.

Body image dissatisfaction may be one of several mechanisms through which a family's emphasis on thinness leads to eating disorders and related concerns. Body image dissatisfaction, a subjective negative self-evaluation about one's body (Cash & Pruzinsky, 2002), is common among women (see Thompson, Heinberg, Altabe, & Tantleff-Dunn, 1999). Studies suggest that high levels of body image dissatisfaction place individuals at risk for subclinical disordered eating and development of a clinically diagnosable eating disorder (e.g., Mora-Giral, Raich-Escursell, Segues, Torras-Claraso, & Huon, 2004; Shaw, Stice, & Springer, 2004).

It stands to reason that daughters raised in families that are more appearance-focused may be simultaneously more cognizant and concerned about their own physical appearance and how that appearance fits with familial and societal standards. Parents may focus on appearance due to their own body image dissatisfaction and may send messages to their daughters that they value thinness, such as when a parent encourages a child to diet. Research has linked body image dissatisfaction and history of maladaptive eating attitudes among mothers with increased body image dissatisfaction in daughters (Kichler & Crowther, 2001; Sanftner, Crowther, Crawford, & Watts, 1996; Smolak et al., 1999). This is consistent with the idea that mothers' focus on physical appearance may have negative consequences for daughters. In addition, mothers' disapproval of daughters' figures and encouragement to diet from mothers (Benedikt et al., 1998), have been linked with increased body image dissatisfaction in daughters even after controlling for body size. Teasing and negative feedback about appearance from fathers and mothers were also associated with increased body image dissatisfaction in daughters (Schwartz, Phares, Tantleff-Dunn, & Thompson, 1999). Thus, there appears to be a link between maternal and, to a lesser extent, paternal behaviors suggestive of a family appearance-focused culture and increased body image dissatisfaction in daughters.

The present study

Research linking specific parental behaviors (i.e., emphasis on appearance, commentary about body size and appearance) with body image dissatisfaction (Sanftner et al., 1996; Smolak et al., 1999) and disordered eating (e.g., Davis et al., 2004; Field et al., 2001; Laliberte et al., 1999) suggests that a family culture that emphasizes appearance and thinness might be associated with both increased disordered eating and body image dissatisfaction. In addition to the direct effect of family focus on appearance on the development of disordered eating, an indirect effect may occur as

family focus on appearance and thinness influences body image dissatisfaction, which subsequently increases risk for disordered eating. As such, it was expected that in addition to the influence that family focus on appearance and thinness/attractiveness has on the development of disordered eating behaviors, an appearance-focused family culture would indirectly effect disordered eating through increased body image dissatisfaction.

In addition, some types of parental comments, one aspect of the family culture, related to daughters' weight may have particularly problematic effects. Some types of parental comments about daughters' body size and appearance have been linked with body image dissatisfaction and disordered eating (e.g., Keel et al., 1997; Schwartz et al., 1999; Vincent & McCabe, 2000). Research evaluating the relative contributions of these different types of comments from parents on the development of disordered eating in daughters is lacking. Thus, a secondary aim of the study was to explore the relative strength of the relationship between specific types of parental comments with problems linked to eating disorders concerns among daughters (e.g., disordered eating, body image dissatisfaction) in previous research. Without research regarding the potential intentions of various types of appearance commentary, one can only speculate about intentions and the effects of such commentary. Criticism may reflect more distant and less supportive relationships (research links family dynamics with disordered eating, see Minuchin et al., 1978). Therefore, one might expect perceived criticism to be the best predictor of disordered eating and body image dissatisfaction among various types of parental commentary. It is possible that encouragement to diet and control weight reflects a focus upon health and a desire to be helpful if parents are concerned about their child's weight and health (research indicates that mothers become concerned if they believe their daughters are gaining weight, see McCabe, Ricciardelli, Stanford, Holt, Keegan, & Miller, 2007). As such, perceived encouragement to control weight was expected to be a weaker predictor, compared to parental criticism and teasing, of disordered eating and body image dissatisfaction.

Method

Participants

A sample of 268 never-married college women, ranging in age from 16 to 24 ($M = 18.83$; $SD = 1.21$), enrolled in introductory psychology courses, was recruited to participate in part of a larger study in exchange for class credit (Kluck, 2008). Participants' mean weight (136.57 lbs; $SD = 22.73$) and height (65.32 in., approximately 5'5"; $SD = 2.96$) resulted in a mean body mass index (BMI) of 22.50 ($SD = 3.73$). Participants predominantly self-identified as Caucasian (82.8%), with 6.3% identifying as Hispanic, 4.9% identifying as African American, 2.6% identifying as Asian American, and 3% identifying with other racial backgrounds. The majority of participants (85.0%) came from households in which their biological parents were married or in which one or both parents were remarried. In addition, the average age at which participants reported having last lived with their parents was 18.06 ($SD = 0.68$) which means that participants had, on average, last lived with their parents less than one-year prior to the study.

Measures

The Body Shape Questionnaire (BSQ; Cooper, Taylor, Cooper, & Fairburn, 1987) is a 34-item self-report measure designed to assess an individual's level of dissatisfaction with weight and shape, fear of gaining weight, and desire to lose weight (e.g., "I would prefer for my legs to be thinner than they currently are," "Has being with thin women made you feel self-conscious about your shape?"). The

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