

INTRODUCTION

Controlling parental feeding practices are associated with body image concerns and eating disturbance during young adulthood. There is a relation between childhood parental feeding practices and eating behaviors in young adults (Galloway et al., 2009).

- Student's reports suggested that parental monitoring was correlated with restrained eating (Galloway et al., 2009).
 - Parents recollection of their own feeding practices suggested that restriction and monitoring are correlated to BMI and emotional eating (Galloway et al., 2009).
- Mothers have been widely studied as the primary provider during mealtimes (Saltzman et al., 2019); however, there is little research surrounding the role of fathers in the development of eating behaviors.
- Past research suggests that fathers' feeding practices are dependent upon their relationship with their child (Harris et al., 2020).
 - Due to mothers displaying a larger role during mealtime most fathers demonstrate little involvement (Fielding-Singh, 2017).

CURRENT STUDY

This current study examines college students' retrospective reports of their mothers' and fathers' controlling feeding practices as children.

Hypotheses: Fathers' controlling feeding practices (pressure, restriction for health, and restriction for weight) will be related to body image issues and eating disturbance over and above mothers' controlling feeding practices.

METHODS

Participants and Procedure

60 college students Completed a survey for research exposure credit through SONA

- 76% female, 24% male
- Mean Age: 22.34, Range: 18-34
- 20% Latine, 25% Caucasian, 13% African American/Black, 12% Middle Eastern
- 5% of participants had children
- Mean BMI: 26.4, Range: 18.8-50.04

Measures

Parental Feeding Practices (Retrospective Reports)

Comprehensive Feeding Practices Questionnaire (5-point scale; Musher-Eizenman & Holub, 2007) reported for mother- and father-figures.

- Pressure; 3 items; e.g. "This person believed I should always eat all of the food on my plate."
- Restriction for Health; 4 items; e.g. "This person believed if s/he did not guide or regulate my eating, I would eat too many junk foods."
- Restriction for Weight; 8 items; e.g. "This person restricted the food I ate that might have made me fat."

Problematic Eating Behaviors

Eating Attitudes Test (6-point scale: Garner et al., 1983)

- Dieting; 13 items; e.g. "I feel extremely guilty after eating."
- Bulimia; 6 items; e.g. "I vomit after I have eaten."

The Dutch Eating Behavior Questionnaire (DEBQ; van Strien et al., 1986)

- Dietary Restraint (DR); 10 items; e.g. "Do you watch exactly what you eat?"
- Disinhibited Eating (DE); 10 items; e.g. "Do you have a desire to eat when you are cross?"
- Emotional Eating (EE); 13 items; e.g. "Can you resist eating delicious foods?"

Body Image

Eating Disorder Inventory (6-point scale: Garner et al., 1982)

- Body Dissatisfaction (BD); 9 items; e.g. "I think my hips are too big."
- Body Esteem Scale for Adolescents and Adults (Mendelson et al., 2001)
- Weight Esteem (WE); 8 items; e.g. "Weighing my self depresses me."

PRELIMINARY ANALYSIS

Table 1. Descriptive Correlations Coefficients for study variables

	1	2	3	4	5	6	7	8	9	10	11	12	13
1. Pressure_Mom													
2. Pressure_Dad	.43**												
3. Restriction_Mom	0.16	.32*											
4. Restriction_Dad	0.26	0.23	.69**										
5. RW_Mom	-0.17	0.05	.43**	.27*									
6. RW_Dad	0.08	0.02	.31*	.57**	.40**								
7. Dietary Restraint	0.15	-0.09	0.1	0.23	0.25	.29*							
8. Emotional Eating	.33*	0	-0.04	0.06	0.12	0.21	.43**						
9. Disinhibited Eating	.37**	0	-0.43	0	0.06	0.17	.37**	.68**					
10. Dieting	-0.15	0.21	-0.75	-0.15	-0.25	-0.30*	-0.67**	-0.47**	-0.37**				
11. Bulimia	-0.02	0.2	0.03	-0.02	-0.28*	-0.32*	-0.48*	-0.62*	-0.47**	0.78**			
12. Body Esteem	-0.24	-0.07	-0.06	-0.13	-0.14	-0.33*	-.050*	-0.50**	-0.39**	0.67**	0.55**		
13. Body Dissatisfaction	0.09	0.09	0.06	0.2	0.2	.35**	.52**	0.40**	0.21	-0.63**	-0.55**	-0.80**	

*p < 0.05 (2-tailed), **p < 0.01 (2-tailed), RW - Restriction for Weight

Note. Maternal pressure and maternal and paternal restriction for weight were related to body image and eating concerns.

PRIMARY ANALYSIS

Table 2. Hierarchical Multiple Regression Analyses Predicting Dietary Restraint (DR), Emotional Eating (EE), Disinhibited Eating (DE), Dieting, and Bulimia

Predictors	DR		EE		DE		Dieting		Bulimia	
	ΔR ²	β	ΔR ²	β	ΔR ²	β	ΔR ²	β	ΔR ²	β
Step 1	0.1**		0.18*		0.07		0.13*		0.1	
BMI		0.2		0.42*		0.23		-0.29*		-0.22
Gender		0.26**		0.03		0.13		-0.22		-0.23
Step 2	0.05		0.01		0		0.05		0.08*	
RW_Mom		0.23		0.11		0.02		-0.23		-0.28*
Step 3	0.04		0.02		0.02		0.04		0.05	
RW_Dad		0.22		0.14		0.16		-0.22		-0.231

*p < 0.05, 0.05 ≤ **p < 0.06, RW - Restriction for Weight

Table 3. Hierarchical Multiple Regression Analyses

Predicting Body Esteem (BE) and Body Dissatisfaction (BD)

Predictors	BE		BD	
	ΔR ²	β	ΔR ²	β
Step 1	0.11*		0.09	
BMI		-0.34*		0.29
Gender		0.04		0.09
Step 2	0.01		0.03	
RW_Mom		-0.12		0.18
Step 3	0.07**		0.07*	
RW_Dad		-0.28**		0.29*

Note. Paternal restriction for weight predicted body esteem and body dissatisfaction after controlling for gender, BMI, and maternal restriction for weight.

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DISCUSSION

The effects of controlling feeding practices used in childhood can be observed in adulthood.

In this study, maternal use of pressure during childhood was related to more emotional and disinhibited eating during young adulthood.

- Past research suggests that are cultural determinants which contribute to maternal controlling feeding practices (Cachelin & Thompson, 2013).

Reports of paternal pressure, maternal restriction, and paternal restriction were not related to concurrent body image or eating disturbances.

- Although these practices may not be related to body image or eating disturbances, future research can investigate the other effects of these feeding practices.

Restriction for weight by both moms and dads was related to dieting, bulimia symptoms, lower body esteem, and body dissatisfaction. Restriction for weight by fathers predicted body esteem and body dissatisfaction over and above maternal restriction for weight, gender, and body mass index.

- This research study suggests that paternal controlling feeding practices may be one underlying factor in eating disorder; thus, further research is required to discover whether it could be an etiology.
- Future research can also examine the association between controlling feeding practices and the psychological effects it may have on college students and whether it may affect their school performance.

Overcoming parents' use of controlling feeding practices is one suggestion to help reduce problematic eating behaviors and can be investigated within future research.

The limitations of this study mainly concerned the small sample size; therefore, new findings might be discovered with a larger, more diverse sample.

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