



# Eating- and weight-related factors associated with depressive symptoms in emerging adulthood



Jennine S. Rawana\*, Meghan L. McPhie, Behzad Hassibi<sup>1</sup>

Department of Psychology, York University, 4700 Keele Street, Toronto, Ontario, M3J 1P3, Canada

## ARTICLE INFO

### Article history:

Received 5 July 2013

Accepted 11 April 2016

Available online 13 April 2016

### Keywords:

Depression

Emerging adults

Risk factors

Body image

Body appreciation

## ABSTRACT

Research suggests that eating- and weight-related disturbances (EWRDs) are key factors associated with depressive symptoms. However, it is unclear how EWRDs, and to a greater extent body appreciation, are associated with depressive symptoms among emerging adults. This study investigated the association between EWRDs, body appreciation, and depressive symptoms among emerging adults. Female ( $n = 473$ ) and male ( $n = 135$ ) emerging adults completed measures of restrained eating, emotional eating, external eating, drive for muscularity, body appreciation, and depressive symptoms. Hierarchical multiple regression analyses, performed separately for women and men, found that restrained eating was significantly related to depressive symptoms among both genders, whereas emotional and external eating were significantly associated with depressive symptoms in women only. Body appreciation was negatively associated with depressive symptoms in both genders. The findings highlight the need for clinicians to assess for EWRDs and promote positive body appreciation among emerging adults.

© 2016 Elsevier Ltd. All rights reserved.

## 1. Introduction

Depression is a significant issue that has been recognized as one of the leading causes of disability worldwide (World Health Organization, 2008). It has been estimated that approximately 16% of individuals will experience major depressive disorder (MDD) at some point during their lifetime (Kessler et al., 2003). Prevalence rates of depression have been found to vary widely based on age, with adolescence representing a period of vulnerability in which depression is most likely to first emerge (Hankin, 2006; Jacobs, Reinecke, Gollan, & Kane, 2008). Numerous trajectory studies have found that depressive symptoms peak in adolescence and then decline during the transition into emerging adulthood (Ge, Natsuaki, & Conger, 2006; Natsuaki, Biehl, & Ge, 2009). However, other studies have documented elevated rates of depressive symptoms among emerging adults (i.e., broadly individuals between the ages of 18–29; Kessler & Walters, 1998; Wang et al., 2010). Moreover, a study conducted by Tanner et al. (2007) found that lifetime depression prevalence rates increased from 8.8% to 31% during emerging adulthood, representing a greater increase than other psychiatric disorders. Thus, depression is a concerning issue in emerging adulthood, although it is unclear how depressive symptoms and their associated

risk and protective factors may change from adolescence to emerging adulthood.

Depression rates have also been found to vary by gender, with women being much more likely to experience depression compared to men (Hankin & Abramson, 1999). This gender difference emerges in early adolescence and continues into adulthood, where twice as many women are depressed in comparison to men (Hankin, 2006). A variety of theories have been put forth to account for the consistent gender difference in risk for depression, with some researchers suggesting that women face more pressures to achieve an idealized body type than men, which may make them vulnerable to depressed mood when dealing with negative life events (Bearman & Stice, 2008; Fredrickson & Roberts, 1997).

Although genetic predisposition, cognitive vulnerabilities, lack of social support, and stressful life events are all general factors that have repeatedly been demonstrated in the literature to be associated with depression (Hankin, 2006; Jacobs et al., 2008), eating- and weight-related disturbances (EWRDs) are novel risk factors and are receiving increasing attention in the research literature on depression, and may contribute to the observed gender difference in rates of depression. EWRDs can be conceptualized as maladaptive beliefs and behaviors related to eating and physical appearance (Rawana, Morgan, Nguyen, & Craig, 2010). While the link between EWRDs and depression during adolescence has been demonstrated in the literature (Rawana, 2013; Rawana et al., 2010), a paucity of research has examined this relationship in the next stage of development, namely emerging adulthood (Norwood, Rawana, & Brown, 2013). Therefore, the present study sought to examine the relationship between EWRDs and depressive

\* Corresponding author.

E-mail address: rawana@yorku.ca (J.S. Rawana).

<sup>1</sup> Present address: Faculty of Law, McGill University, 845 Sherbrooke Street West, Montreal, Quebec H3A 0G4, Canada.

symptoms during emerging adulthood. Further, in addition to clarifying the role of negative constructs (i.e., EWRDs) and their association with depressive symptoms, the present study also examined the role of positive body image, namely an appreciation for one's body.

### 1.1. Emerging adulthood

Emerging adulthood refers to the period of development taking place from the late adolescent years to the mid-to-late twenties (i.e., 18–29), with a focus on the 18–25 age range (Arnett, 2000). This time frame presents unique challenges that are vastly different from both adolescence and adulthood. Emerging adulthood is thought to be unique to today's industrialized societies, owing mainly to the delaying of marriage and parenting, as well as the high rates of post-secondary education enrolment (Arnett, 2000). This period is demographically diverse, and marked by personal exploration and growth (Arnett, 2000), and often results in attaining self-sufficiency (i.e., taking responsibility for oneself, independent decision making, etc.) (Arnett, 1997, 1998, 2000). Although emerging adulthood is filled with numerous opportunities for personal growth, individuals' experiences are not always fulfilling or positive. The high rates of depression during emerging adulthood may be reflective of the expanding roles and unique challenges characteristic of this developmental period.

### 1.2. Eating- and weight-related disturbances and depression

Eating- and weight-related disturbances (EWRDs) can be defined as dysfunctional and maladaptive attitudes, behaviors, and cognitions related to physical appearance and eating, that are less severe than symptoms of clinical eating disorders (Rawana et al., 2010). Adolescence and young adulthood represent a time period in which physical appearance and perceived attractiveness take on increasing importance, especially among women (Pesa, Syre, & Jones, 2000). Problems with weight or eating during adolescence have been shown to be related to an increased risk for a variety of mental and physical consequences during emerging adulthood (Johnson, Cohen, Kasen, & Brook, 2002; Ohring, Graber, & Brooks-Gunn, 2002). Recent research has also documented a specific link between EWRDs and depression (Rawana, 2013; Rawana & Morgan, 2011; Stice & Bearman, 2001). In a longitudinal study involving a large sample of adolescent boys and girls, Paxton, Neumark-Sztainer, Hannan, and Eisenberg (2006) found that body dissatisfaction was a prospective risk factor for depression and low self-esteem over a five-year period. The link between negative body image and adverse psychosocial consequences, particularly in girls, has been found in several other studies (Bearman & Stice, 2008; Stice, Presnell, & Spangler, 2002).

There are three common types of EWRDs that are well-documented and clinically meaningful in the literature that will be examined in the current study. These EWRDs are emotional eating (i.e., eating based on one's emotions), external eating (i.e., eating based on external cues such as smell), and restrained eating (i.e., restricting caloric intake). There have been mixed findings as to which of these EWRDs are specifically related to depressed mood. Ouwens, Van Strien, and Van Leeuwe (2009) found that a direct, positive association existed between emotional eating and depression among women; however, no such relationship was found between external eating and depression. This link between emotional eating and depressive symptoms has also been demonstrated in other studies, including those that used a sample with men (e.g., Elfhag & Morey, 2008). Past findings for restrained eating meanwhile are conflicting. On the one hand, Elfhag and Morey (2008) found no relation between restrained eating and depressive symptoms. However, a study by Harrell and Jackson (2008) found restrained eating to be linked with depressive symptoms among female college students, with rumination mediating the relationship between the two variables. Therefore, eating disturbances, particularly emotional eating, appear to put one at significant risk for depressive symptoms. While these findings have repeatedly been demonstrated in samples

of adolescents and adults, additional research is needed using emerging adult samples, especially given the unclear prevalence and nature of depressive symptoms among this age group.

A review of the existing literature on EWRDs and depression suggests that there is also a need to focus on elucidating positive constructs pertaining to eating- and weight-related behaviors that may be associated with lower levels of depression (Rawana et al., 2010). One such construct is body appreciation, which is the focus on positive aspects of one's body image or appearance. Body appreciation is characterized by positive regard and acceptance of one's body regardless of actual size and appearance, attending to the body's needs, living a healthy lifestyle, and generally disregarding media pressures (Avalos, Tylka, & Wood-Barcalow, 2005). In validation studies of the Body Appreciation Scale (BAS), findings indicated that, among college women, body appreciation was positively associated with self-esteem, proactive coping, and optimism above and beyond body dissatisfaction, supporting the notion that body appreciation is distinct from body dissatisfaction (Avalos et al., 2005). To date, the BAS is the only known measure that assesses multiple characteristics of positive body image. Subsequent researchers using the BAS have found that female undergraduates with higher body appreciation are less likely to consider undergoing cosmetic surgery (Swami, 2009), and that body appreciation positively predicts intuitive eating but not depressive symptoms among college women (Iannantuono & Tylka, 2012). In order to contribute to the growing research on the association between body appreciation and mental health issues, and with the BAS measure in particular, it is important to examine the role of body appreciation in the relation between unhealthy eating- and weight-related behaviors and depressive symptoms. As such, the current study will examine the association between EWRDs and depressive symptoms in emerging adulthood, while considering the contribution of body appreciation to this relationship.

In addition to focusing on adolescents and adults, initial research on the topic of EWRDs and depression has almost exclusively included female populations. To date, this issue still persists with studies being unproportionately conducted with female samples (e.g., Ohring et al., 2002; Presnell, Stice, Seidel, & Madeley, 2009). However, in recent years, it has been demonstrated that men are also affected by issues of body image (Ata, Ludden, & Lally, 2007; Furham & Calnan, 1998). In particular, it appears that while beauty and attractiveness in women is linked to a thin body type (Stice, Hayward, Cameron, Killen, & Taylor, 2000), men have the opposite concern, in that there is increasing societal pressure and depiction in the media of an ideal muscular body type for men (Ata et al., 2007). This increase in muscularity portrayals is not limited to standard modes of media such as television; there has been a documented increase in the size of modern action figures (Pope, Olivardia, Gruber, & Borowiecki, 1999), as well as Playgirl centerfolds (Leit, Pope, & Gray, 2001).

The unrealistic depictions in the media have contributed to a "drive for muscularity" in young men; a preoccupation with achieving the big, muscular body type that is often portrayed (McCreary & Sasse, 2000). It is believed that mass media and societal standards have both a direct impact on body image dissatisfaction, as well as an indirect impact via appearance comparison, and the internalization of the muscular standard (Lawler & Nixon, 2011). Some researchers have reported that men appear to be particularly concerned with areas above the waist, such as the arms and chest (McCabe & Ricciardelli, 2004). Others however, point out that caution must be taken in order to avoid oversimplification. Ridgeway and Tylka (2005) conducted a study with thirty undergraduate college men in which leanness and height, in addition to muscularity, emerged as key characteristics of the ideal body shape. Part of the reason for this pursuit of the ideal body type is the message men receive: appearance is important, and attractiveness leads to success (Gillen & Lefkowitz, 2009). These messages and the drive for muscularity may be well-founded in terms of potential gains, as individuals who are taller and non-obese in comparison to their peers have been

Download English Version:

<https://daneshyari.com/en/article/906198>

Download Persian Version:

<https://daneshyari.com/article/906198>

[Daneshyari.com](https://daneshyari.com)