



Role of food preoccupation and current dieting in the associations of parental feeding practices to emotional eating in young adults: A moderated mediation study



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ABSTRACT

Parental feeding practices reflecting coercive control are related to children's later eating behaviors, but the mechanisms underlying these effects remain poorly understood. This study examined the relationships between recalled childhood experiences of parental pressure to eat and restriction and current food preoccupation, dieting, and emotional eating in a racially diverse sample of college students ($N = 711$). Results revealed that parental restriction, but not pressure to eat, was associated with more emotional eating ($r = 0.18, p < 0.0001$). Food preoccupation mediated the association between restriction and emotional eating (95% CI [3.6495–7.2231]); however, a moderated mediation model revealed that the strength of the indirect effect of restrictive feeding on emotional eating through food preoccupation was significantly different for dieters and non-dieters (index of moderated mediation = 1.79, Boot SE = 0.79; 95% bias-corrected bootstrap CI [−3.5490 to −0.4515]). These findings provide unique insight into the mechanisms linking parental feeding practices with emotional eating in young adulthood. Future studies attempting to clarify the processes through which child feeding practices impact later eating behaviors should consider the role of current dieting.

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1. Introduction

Child feeding practices used by parents are related to both child weight status and eating behaviors during childhood. Feeding practices that reflect coercive control, such as pressuring children to eat, restricting children's access and consumption of unhealthy foods, and using food to influence children's behaviors or regulate their emotions, appear especially detrimental to the development of healthy eating patterns and weight (Lansigan, Emond, & Gilbert-Diamond, 2015; Shloim, Edelson, Martin, & Hetherington, 2015; Vaughn et al., 2016; Ventura & Birch, 2008). Cross-sectional and experimental studies have established associations between these

feeding practices and increased child preference for restricted foods, heightened responsiveness to the presence of palatable foods, and eating beyond satiety when restricted foods are made available (Galloway, Fiorito, Francis, & Birch, 2006; Jansen et al., 2012). In longitudinal investigations, coercive control feeding practices have been shown to contribute to excessive weight gain (for restriction only) and problematic eating behaviors during childhood and adolescence (Birch, Fisher, & Davison, 2003; Houldcroft, Farrow, & Haycraft, 2016; Hughes, Power, O'Connor, Orlet Fisher, & Chen, 2016; Rodgers et al., 2013).

Available evidence suggests that childhood feeding experiences continue to adversely affect individuals' food preferences, dietary habits, and eating behaviors into adulthood (Batsell, Brown, Ansfield, & Paschall, 2002; Brunstrom, Mitchell, & Baguley, 2005; Wadhwa, Capaldi Phillips, Wilkie, & Boggess, 2015). For example, adults who recollect being forced to clean their plates as children or were frequently rewarded or punished with food are more likely to

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be overweight and to display obesity-promoting eating behaviors, such as emotional eating or binge eating (Puhl & Schwartz, 2003). More recently, studies using retrospective reports of parental feeding practices have documented associations between controlling feeding practices and maladaptive eating behaviors in college students. For example, parental pressure to eat during childhood is associated with lower levels of intuitive eating (i.e., less sensitivity to internal hunger and satiety cues) and more disordered eating behaviors, such as binge eating or eating in response to the experience of negative emotions (i.e., emotional eating) (Ellis, Galloway, Webb, Martz, & Farrow, 2016). Parental restriction and using food to influence children's behaviors or regulate their emotions (i.e., emotional regulation feeding; Vaughn et al., 2016) during childhood are also associated with emotional eating in college students (Galloway, Farrow, & Martz, 2010; Tan, Ruhl, Chow, & Ellis, 2016). These findings are concerning, given evidence that emotional eating relates to increased fatty food intake and higher body mass index in adults (Camilleri et al., 2014; Cartwright et al., 2003; Konttinen, Mannisto, Sarlio-Lahteenkorva, Silventoinen, & Haukka, 2010; van Strien, Herman, & Verheijden, 2012).

Despite emerging evidence of the long-term impact of controlling child feeding practices, we are aware of only one study that has investigated possible mechanisms linking early feeding experiences with maladaptive eating behaviors in young adults. Drawing on restraint theory (Hill, Weaver, & Blundell, 1991; Polivy & Herman, 1985) and empirical evidence associating food restriction, food preoccupation (i.e., obsessively thinking about food and eating) and obesity-promoting eating behaviors, Tan and colleagues examined food preoccupation as a mediator of associations between recalled parental feeding practices during childhood and current emotional eating in a sample of 97 college students (Tan et al., 2016). In their study, food preoccupation was found to mediate the relationship between emotional regulation feeding in childhood and emotional eating in adulthood, but food preoccupation did not account for the association between parental restriction and emotional eating. Replication of this unexpected result is needed given the strong theoretical and empirical basis informing these hypothesized relationships. Moreover, examination of other controlling feeding practices commonly used by parents, such as pressuring children to eat, is needed to advance the currently small literature exploring the role of food preoccupation in the link between childhood feeding experiences and later emotional eating.

Another important next step for research investigating the mechanisms linking childhood feeding experiences with later eating behaviors is to establish not only *how* childhood feeding experiences impact adults' eating behaviors, but also *under what conditions* these meditational processes occur. For example, it is possible that the mediating effect of food preoccupation observed by Tan and colleagues is not universal across all college students, but instead varies as a result of factors that moderate one or more of the associations between parental feeding practices, food preoccupation, and current eating behavior. Considering potential moderators in the context of meditational models examining the long-term effects of parental feeding practices could identify specific subpopulations of young adults at elevated risk and yield novel information to inform the development of targeted interventions to reduce obesity-promoting eating behaviors such as emotional eating (Karazsia, Berlin, Armstrong, Janicke, & Darling, 2014).

One factor that may act as a moderator of these associations is whether or not individuals are currently dieting to lose weight. Positive relationships between dietary restriction and disinhibited eating behavior have been documented via a variety of affective, cognitive, and physiological pathways (Hagan, Chandler, Wauford, Rybak, & Oswald, 2003; Mason, Heron, Braitman, & Lewis, 2016;

Mathes, Brownley, Mo, & Bulik, 2009; Sherry & Hall, 2009; Stice, 2001). As such, it is plausible that current dieting may alter the relationship between food preoccupation and emotional eating. Illustratively, because dieting may lead to increased negative affect (Stice, 2001), the association between food preoccupation and emotional eating may be stronger among individuals who are actively dieting with the goal of weight loss compared with non-dieters. No prior studies have accounted for the role of current dieting in models exploring the linkages between parental feeding practices and later emotional eating.

This study was designed to advance current understanding of the long-term effects of coercive control parental feeding practices by investigating the conceptual scheme depicted in Fig. 1 in a large and racially diverse sample of college students. First, we examined the associations of recalled parental feeding practices to current emotional eating, and tested whether these relationships are explained by food preoccupation. We expected that individuals who recall more parental pressure to eat and restrictive feeding practices during childhood would report higher preoccupation with food, which, in turn, would relate to greater emotional eating. In other words, we expected that the positive associations between parental feeding practices and current emotional eating would be mediated by food preoccupation (Hypothesis 1). Next, we tested whether current dieting to lose weight moderates the relationship between food preoccupation and emotional eating. We anticipated that the association between food preoccupation and emotional eating would be stronger among dieters compared with non-dieters (Hypothesis 2). Finally, we integrated our mediation and moderation research questions to investigate the possibility of moderated mediation. Assuming current dieting moderates the association between food preoccupation and emotional eating, it is possible that current dieting will conditionally influence the strength of the indirect relationship between parental feeding practices and emotional eating, demonstrating the pattern of moderated mediation depicted in Fig. 1. We anticipated that the mediating effect of food preoccupation would be stronger among dieters compared with non-dieters (Hypothesis 3). In other words, food preoccupation would be more strongly associated with emotional eating when individuals are currently dieting, and as such individuals who experienced high levels of restriction and pressure to eat as children are more likely to engage in emotional eating when they are attempting to lose weight.

2. Methods

2.1. Participants and procedure

Participants included 711 undergraduate students aged 18–23 years attending a mid-sized public university located in the southern United States. Participants were recruited through the Psychology Research Participation System at the university where the research was conducted. This system provides a mechanism for undergraduate students to participate in studies and earn research credits, which they can assign to one or more of their psychology courses in order to receive extra credit points in the course(s). Students who were interested in participating in the study signed up electronically, and were emailed a link to a secure website to provide informed consent and participate in the study. The survey included a demographic questionnaire and measures assessing participants' recollections of how their parents approached feeding them as a child and their current experience of food cravings and eating habits. Participants also provided self-reports of their current height and weight, which were used to determine body mass index (kg/m^2).

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