

# The role of culture on parenting boys as a potential risk factor in the development of male eating disorders during adolescence in Turkey

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The eating disorder (ED) field has made significant progress in successfully translating research on risk factors for the development of EDs into preventive interventions with documented efficacy in reducing ED symptomatology, as well as the future onset of EDs.<sup>1</sup> However, as the etiologic underpinnings of ED vary in male adolescents as compared to female adolescents this remains an area to be investigated and has been a hot topic in the recent literature.<sup>2</sup> This paper provides an international perspective for the role of culture on parenting boys as an etiological factor for the development of male EDs during adolescence.

Despite the fact that of all psychiatric illnesses eating disorders are the most gendered; recent evidence suggests that males comprise approximately 1 in 4 presentations of bulimia nervosa (BN) and anorexia nervosa (AN).<sup>3</sup> It is likely that due to a female-oriented conceptual and diagnostic framework being used, the prevalence rates of traditional male EDs in adolescents cited in most previous research is underestimated.<sup>3</sup> However, consideration of the age of ED onset among males is important for assessing the etiology and type of ED. The body type that is mostly idealized and internalized among young adult males centers on muscularity. The widespread screening and assessment strategy for thinness-oriented ED does not take into account differences in body

image among males.<sup>4</sup> On the other hand, in younger patients with the inclusion of avoidant/restrictive food intake disorder (ARFID) as an ED in the DSM-5<sup>5</sup> specialty ED clinics have reported preadolescent male presentation of ARFID to comprise more than one-third of ARFID cases. Across all ages, sexual minority status may be a contributing risk factor for male ED. Further, particularly in adolescent males, the rates of psychiatric and/or medical comorbidity were reported very high.<sup>6,7</sup>

Given the multiple clinical presentations of male EDs, it is inevitable that any single risk factor is likely to have a complex relationship with eventual ED presentation, in interaction with multiple other factors. However, at the Adolescent Medicine and Adolescent Psychiatry Clinics of Hacettepe University Children's Hospital in Turkey, an increasing number of male adolescents with EDs were noted to have mothers with specific parenting behaviors.<sup>7</sup> While the role of parenting style in the development of disordered eating behaviors and EDs has been reported<sup>8,9</sup>, little information about the impact of culture on parenting behaviors is available and the mother-son relationship represents a potentially promising area for further ED research, especially when mothers favor sons over daughters as a cultural phenomenon.

During the past year (January 1<sup>st</sup>-December 31<sup>st</sup>, 2020), the number of newly diagnosed eating disorder cases that have applied to the Adolescent Medicine Clinic was 42 (39 female and 3 male adolescents). The male/female ratio was 1/13. Although it would be very

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informative to conduct studies looking at the impact of culture on parenting behaviors as a risk factor for EDs among adolescent males, the small number of male cases seen in our clinics has made this unachievable.

Studies have shown that the male child has a unique status for Turkish families. Recently, it was reported that most adult Turkish children perceived that their mothers favored sons because of higher filial expectations from sons.<sup>10</sup> Norms of filial responsibilities have been very prominent in Turkish society and expectations are also gendered that there is an understanding of sons as the “old-age insurance” in Turkish society.<sup>11</sup> Expectancies concerning economic assistance and security and the fact that sons have ‘the privilege’ of carrying on the family name has led to a preference for sons over daughters. Accordingly, it is very common that mothers favor boys over girls in Turkey and mothers are more responsible in the upbringing of a child than fathers.<sup>10</sup>

In recent years, we have followed a small handful, albeit dramatic cases of male EDs with a multidisciplinary team of Adolescent Medicine and Child and Adolescent Psychiatry. Some of the ED cases of male adolescents in our clinic were evaluated to be the results of certain parenting styles of their mothers in our culture such as over-valuing the male child and being more controlling over them.<sup>7</sup> In adolescence, the adolescent-parent relationship needs to change with the young individual’s efforts to be more independent, but on the other hand, the supportive emotional bond with the parents is also important.<sup>12</sup> However, the aforementioned parenting style restrains the psychological autonomy of male adolescents, leading to problems with separation and individuation as in most female ED cases.<sup>13</sup> Our clinical implication is that an important factor for developing an ED specific to the adolescent age group in males could be the cultural differences in parenting boys in different populations. While sexual minority status may be the foremost risk factor for male ED during adolescence in most western cultures,<sup>14</sup> it does

not seem to be the most frequent risk factor in our clinic though we still have cases of sexual minority individuals.

The psychometric analyses of Parental Bonding Instrument (PBI) with discrepant results in different cultures provide evidence that parenting styles vary grossly in Western and Eastern cultures.<sup>15</sup> The PBI<sup>16</sup> is a widely-used assessment tool for measuring parental characteristics that affect the parent-child relationship and was initially developed for Western populations where it is best represented either by a two-factor model (care and overprotection) or a three-factor model (care, overprotection, and autonomy).<sup>17</sup> Studies with PBI from Eastern cultures (i.e. Japanese, Chinese) supported a four-factor model that included an “indifference factor” which was very different from those among Western populations. The indifference factor reflected aspects of parenting specific to Eastern cultures, which tend to value group cohesion over individualization and independence.<sup>15,18</sup> The four-factor model may apply to most Eastern cultures, but yet more research is needed to generalize.

The relationship between culture and parenting is very interesting. Child-rearing behaviors are culturally determined to an extent. Cultural values can affect parenting behaviors which alter the quality of the relationship between mother and child. Although the maternal sensitivity is crucial for the development of a good relationship, expression of this sensitivity in different cultures may vary according to the emphasis on individuation or dependency in that culture.<sup>12</sup> Thus, discrepancies in parenting behaviors across Western and Eastern cultures are not necessarily surprising. While Western cultures traditionally highlight individuality and privacy, Eastern cultures tend to foster collectiveness and view the family as a singular unit.<sup>16</sup> Eastern cultures may view parental control as caring, whereas Western populations would likely view this negatively. An item classified as reflecting overprotection in one culture may be interpreted as reflecting care

in another. E.g. in the Turkish validation study of PBI, the items related to the controlling behaviors are loaded on the care factor instead of the overprotection by a two-factor model ("care/control" and overprotection subscales).<sup>19</sup> Autonomy is not seen as a strong construct in parenting in Eastern cultures as it is in Western ones. However, although authors claim that Eastern and Western cultural differences clearly exist, there may also be other factors specific to various cultures and even transitioning between western and eastern cultures in regards to parenting. With this point of view, it may be more accurate to call some cultures like Turkey as "non-western" instead of eastern.

In Turkey, maternal overprotection of sons and mothers favoring sons over daughters are not new concepts though these greatly differ from urban to rural areas or depending on the region of the family descent. In Turkey, it was reported that disordered eating behaviors increased among adolescent males perceiving parental lack of concern, overprotectiveness or prohibitive control of autonomy.<sup>20</sup> We do not have enough evidence to discuss this as a cause of ED but the clinical implication we do have is that parenting styles of mothers favoring sons over daughters and mother-son relationships are strong correlates of the symptoms of male ED in this age group in our clinical sample though not large. A striking example of this was a 14 years old male patient with AN-restrictive type who was the fourth child to be born after three girls, he proudly explained to us that 'to compensate for this', his parents gave him three names instead of one. Even though he was a teenager, he still co-slept with his mother. When his mother was questioned as to why, she stated that 'she did not want him to get cold at night' and would awake to wrap him up. When the decision was made to admit this patient to the hospital his mother plead with us to help her "only child" ignoring the fact that she had three elder daughters.<sup>7</sup>

Another phenomenon is that the overprotection of mothers might have contributed to enmeshment and restricted boys' needs for

being autonomous and developing a healthy sense of self.<sup>21</sup> A typical example of this was a 17 years old male patient with AN- restrictive type at presentation who had a transition from thinness-oriented to muscularity-oriented ED. This patient became extremely angry and bitter towards his mother during the course of the treatment and openly stated that a majority of his behavior was to punish his mother for her overcontrolling behavior. Although he had an older sister, his mother did not act this way towards her and she refused to change this behavior repeating that he had the utmost importance for her.<sup>7</sup> Therefore, parents should contribute to their children's psychological autonomy and healthy separation-individuation process by supporting their independent decisions and expression of themselves while both providing appropriate acceptance/interest/affection/involvement and control/supervision to their children.

We believe an important point to investigate is why some mothers in Turkey develop parenting styles mentioned above. One hypothesis is that in some cultures, women can gain considerable power in their old age by having sons who support their mother's voice in the household. Therefore, with little need for direct reinforcement from men, women continue to be vulnerable by reinforcing a vicious twist termed the 'patriarchal bargain'.<sup>22</sup> In fact, this term was initially defined by a Turkish author as a tactic in which a woman chooses to accommodate and uphold patriarchal norms, accepting gender roles that disadvantage women overall but maximizing her own power, safety and options. In the end, both girls and boys are harmed from the vulnerability of these mothers and it is crucial to foster change to make daughters and sons more equally valuable to their parents in every culture.

It is also important to point out that mothers are not the sole care takers and paternal parenting styles may also have an impact on ED development in boys. However, in Turkey, the primary care taker who has the most influential caregiving role in the family during

childhood has been shown to be mothers.<sup>23</sup> Thus, we cannot say that mothers are the only ones causing the consequences of this cultural phenomenon because of what they have done. Fathers are also responsible for what they have not done. As a result, we present these clinical observations of certain parenting styles without making a distinction solely for mothers.

In conclusion, we suggest that specific designs for future investigations of risk factors of EDs among adolescent males should include cultural sensitivity that distinguishes western and non-western cultures, as well as the parenting styles for boys, which may act as a risk factor for the development of EDs in males within varying societies.

**Key words:** eating disorder, male, culture, parenting.

#### Author contribution

The authors confirm contribution to the paper as follows: The initial draft of the manuscript was prepared by Nuray Kanbur, Devrim Akdemir and Sinem Akgül contributed equally. Language editing was conducted by Sinem Akgül. All authors approved the final version of the manuscript.

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