

Perceived Parenting Styles and Body Dissatisfaction among Women

¹Ayesha Shahid Sheikh*, ²Tazvin Ijaz, ³Sara Zaheer

¹University of the Punjab, ²Government College University Lahore, ³University of Central Punjab, Lahore

This research paper explores the relationship between perceived parenting styles and body dissatisfaction. It is based on a study conducted on adult women ($N=308$) to explore the relationship between both the variables. Stratified sampling was used to collect data and women belonging to different occupations were included in the study. The Body Dissatisfaction Scale (BDSS), (Tariq & Ijaz, 2010) and Perceived Parenting Styles (PPSS), (Anwar & Ijaz, 2010) were used in the study. The results of the study indicate that controlling parenting style of both mother and father lead to higher body dissatisfaction among women as compared to nurturing parenting style. A significant relationship among higher education and higher body dissatisfaction was also found as the results revealed that women with less education were less dissatisfied with their bodies. There was a significant difference among the body dissatisfaction of both working and non-working women.

Keywords: body dissatisfaction; perceived parenting styles; Pakistani women

A negative perception of one's own physical appearance is called body dissatisfaction (Stice & Shaw, 2002). It might arise in comparison to an ideal body image that a person has in mind. The dissatisfaction is thought to increase if the person thinks that his/her body type or body size is not satisfactory. Body dissatisfaction includes not liking one's facial features, hair, weight, height etc. (Furnham, et al, 2007). Body dissatisfaction can lead to high health risks ranging from the use of diet pills, steroids, disordered eating, excessive exercise to low self-esteem, psychiatric illness, eating disorders and much more (Burlew & Shurts, 2013). Body dissatisfaction is also reported to generate depression and anxiety among people (Keski & Mustelin, 2016). A few decades ago, the media started to show more women who had lean and slim bodies as a trademark of ideal bodies. The trend shift of ideal body type was seen in the case of males as well, where they wanted to have thinner, but more muscular bodies as this was appreciated by the society (Robinson, 2004).

Women with a distorted body image are found to have related psychological problems including depression, eating disorders and anxiety. Many researches on disorders relating to body dissatisfaction among women have already been conducted (Presnell et al., 2004). In comparison, adult males are found to have less anxiety and depression in relation to body dissatisfaction. Despite this, it male models and actors are also portrayed as young, tall and muscular beings (Hobza et al., 2007).

An individual's social functioning is also seen to be affected by body dissatisfaction. This condition is associated with low self-esteem and confidence. The media favours the slender figures rather than bulky bodies. This overall transformation of bodies has established a culture of thin bodies being appreciated rather than the curvaceous bodies, in the whole world (Grabe et al., 2008)

Culture plays an important role in providing the values and personality building of the people living in them. In the Asian culture, women are protected by men and guided by them as well. Thus, to have this role satisfied, men are encouraged to have hard, chivalrous and sturdier forms, while women are encouraged to have the thinner and frail body types to fulfil the requirements of the society that have been established since ages years (Wardle et al., 2006).

The most important aspect of having a slim figure and good features in Pakistani culture is to find a good matrimonial proposal for a girl in future. A perfect body, hair, figure and complexion

*Correspondence concerning this article should be addressed to Ms. Ayesha Shahid Sheikh, Centre for Clinical Psychology, University of the Punjab, Lahore, Pakistan. Email: ayeshasheikh37@hotmail.com

have been regarded important aspects of woman. Therefore, females with a not so perfect figure, fair complexion and good hair not only find it hard to get better proposals, but also become more distressed causing more body dissatisfaction (Mahmud & Crittenden, 2007; Knauss et al., 2007).

Gender difference plays a role when it comes to body dissatisfaction as women are seen to be more dissatisfied with their bodies in comparison to males. This also not only affects their personal life, but also hampers their social and occupational life (Grogan, 2007). Studies have indicated that the other psychological problems such as low self-esteem and anxiety are also associated with the body dissatisfaction in an individual and are more prominent in women than men (Eisenberg et al., 2006).

In Pakistani culture the gender role and gender physique are quite different from each other. Personality building and development is greatly influenced by parenting practices. Research suggests that parenting styles and individual's family plays a vital role in generating body dissatisfaction among women (Taqi et al., 2008).

It is seen that all kinds of parents operate in different ways, as they have set some arrays or guidelines that they implement while bringing up their children (Burlew, 2011). The prenatal styles are influenced by the cultural patterns and living styles of the parents living at a place or the culture they belong to (Checa et al., 2018). Parents also influence the personality of the children by giving them space or comfort in their childhood. The parenting style thus actually is the technique by which the parents answer to the requirements of youngsters and through these practices they organize the behavior of their offspring (Wolfradt et al., 2003).

Most of the time, children face problems and lifelong issues such as depression, eating disorders and lack of confidence due to unhealthy parenting patterns. This leads to the conclusion parenting has life-long effects when it comes to the future of the family. Children require a balanced care and nourishment. Defective parenting techniques can lead children to live an unbalanced life in future (Burlew & Shurts, 2013).

Personality building and thought patterns of children are based on parenting styles. Parents practice authoritarian, authoritative and permissive parenting styles. Body dissatisfaction is also a product of parenting styles leading to psychological problems if not treated in the early times (Grogan, 2001). There is a difference in both western and eastern parenting styles. Pakistan and other Asian countries train girls to be obedient and dutiful. In eastern cultures parents have the authority to decide things for their children and the children have to stick by those rules and decisions made for them. In the western culture children exercise privacy and parents don't interfere in their lives without permission. Contrastingly in Asian cultures parents involve themselves in personal matters of children as a sign of concern and affection (Futterman et al., 1999).

Over controlling behavior of parents creates a hindrance in the positive wellbeing of children. This can make children habitual of seeking escape from situations and look for options that save them from the implementation of strict rules. Studies have revealed that the female children are prone to develop low self-esteem, lower body image and lack of socialization as well at times if their parents implement harsh parenting styles on them. The major determinants of body dissatisfaction are media, culture and peer pressure (Savage et al., 2007). Studies suggest that eating disorders, aggression, depression and low self-esteem can be a product of strict parenting including both authoritarian and permissive styles. Body dissatisfaction can have devastating effects on the social life of an individual, and it can also have a negative impact on a person's quality of life as it creates stress and tension regarding their body image. In extreme cases body

dissatisfaction is also found to cause social phobia in individuals (Newmark et al., 2006).

The rationale of conducting the present study was to get an insight about the patterns of body dissatisfaction in adult women of Pakistan. The research also gave an insight about the severity of the problem and its relation to certain parenting styles of society as well. This study might be useful in unveiling the contributing factors of perceived parenting styles on the body dissatisfaction faced by the people.

Method

Correlational study design was used in the present research. It is a quantitative research design which is used to explore the relationship between two variables. The sample consisted of 308 women that were divided into different strata. The strata were made so that each strata differed from the other. The sample consisted of women who were divided into stratas by marital status and occupation.

The study employed a sampling method known as stratified random sampling to ensure a systematic and representative selection of participants. In this approach, the female population was categorized into distinct groups based on both marital status and occupation. These categories, or strata, were further divided into subgroups. Specifically, the subgroups encompassed married women, unmarried women, working women, students, and housewives. The key objective of this stratification was to account for the diversity within the female population, considering the varied roles and statuses that individuals may hold. By organizing participants into these strata and sub strata, the sampling strategy aimed to capture a comprehensive and nuanced representation of the target demographic. It is important to note that the process of randomization in this context involves the random assignment of participants to different strata, ensuring that each subgroup is proportionally and randomly represented in the final sample. This randomization helps mitigate potential biases and enhances the generalizability of the study's findings to the broader population of women with diverse marital and occupational backgrounds.

The participants who were selected for the main study were in the age range of 18 to 34 years old and belonged to the age group of young adulthood. The participants whose age was less than 18 and more than 34 were exempted from the main study.

Assessment Measures *Demographic Questionnaire*

A demographic questionnaire was designed and tailored for the present research after reviewing previous literature. The literature review showed that age and education played important roles in the cognitive structure and dissatisfaction about one's body image and were included in the demographic variables. Along with that birth order, siblings, education of parents, monthly income and profession were also included as they also play a significant role in the manifestation of dissatisfaction with one's body type according to research literature.

Body Dissatisfaction Scale (BDS)

Tariq and Ijaz (2012) developed an indigenous scale of body dissatisfaction which was developed to assess the degree of satisfaction with different areas of body parts. High test retest reliability ($r=.910$) was calculated along with high validity. The scale had three female related factors for body dissatisfaction that are body weight, body shape, and facial features. The concurrent validity of the scale was found to be 0.79.

Perceived Parental Styles Scale (PPSS)

Anwar and Ijaz (2008) developed this indigenous scale which has two subscales that are

the father subscale and mother subscale. The father subscale has 30 items and has the test-retest reliability of .97 ($p < .001$). The mother subscale has 28 items with the test-retest reliability of .978 ($p < .001$). The scale was rated on the four-point scale from 0 to 3. The current study showed high reliability for the scale that was found to be .94 and .93 for father and mother scale respectively

Procedure

Initially the relevant authors were contacted to seek permission for using their tools in the study. Later on, a sampling strategy was formalized which focused on data collection for the research project. After identifying the areas of interest, permissions were sought from the institutes where the data was to be collected. Before administering the scale, the participants' consent was taken. Participants who fitted the inclusion criteria of the study were approached for responses. The participants were debriefed about the purpose of the study beforehand.

The data ($N=308$) was taken from public sector universities, offices, colleges and from housewives by approaching the target places. The average time taken to complete the whole protocol by a single participant was found to be 15 minutes. The scale was in Urdu language so that most of the participants would not find any difficulty in responding to the items.

Results

The following section includes the results gained by the research and the findings associated with the hypothesis being formulated initially. It focuses on the hypothesis testing of the variables. This section gives description of the demographic factors related to the target population of the current study including the age, education and other descriptive variables.

Table 1

Frequency and Distribution of Body Dissatisfaction Among the Female Adults

<i>(N=308) BDS scores</i>	<i>N</i>	<i>%</i>
Normal	184	59.7
Borderline	50	16.2
Mild	23	7.5
Moderate	28	9.1
Severe	23	7.5

Note. f= frequency, %=percentage, BDS = Body dissatisfaction scale.

The results of the frequency percentage analysis of the body dissatisfaction showed that around 16.6 percent of the sample showed the symptoms of body dissatisfaction that were categorized as moderate to severe symptoms. While another percentage of 23.7% showed the mild symptoms of body dissatisfaction according to the statistical analysis.

It was hypothesized that controlling parenting styles in father will lead to higher body dissatisfaction among women than the permissive and nurturing parenting styles. A linear regression analysis with enter method was performed in order to test the above three hypotheses and to consider the relation of the variables, the results are as follows.

Table 2

Linear Regression Analysis of Parenting Styles of Father With the Body Dissatisfaction Among Women (N =308)

Factors	B	Body Dissatisfaction		t
		SEB	B	
Nurturing Father	.00	.01	.01	1.3
Controlling Father	.05	.01	.16	2.7**
Permissive Father	-.10	.02	-.26	-3.7***
R ²	.56			
ΔR	.62			

Note. R² = Coefficient of determinance; ΔR² = change in the coefficient of determinance, *p <.05. **p <.01.

The simple regression analysis shows that there is a significant positive correlation between parenting style of father and body dissatisfaction among women. The model showed that parenting style of father accounted for 56 % of the variance in body dissatisfaction.

Further, it was hypothesized that controlling parenting styles in mother would lead to higher body dissatisfaction among women than the guidance and nurturing parenting styles.

In order to test the hypothesis, linear regression analysis was run and the information between the two variables was gathered.

Table 3

Simple Regression Analysis of Parenting Styles of Mother with the Body Dissatisfaction among Women (N =308)

Factors	B	Body dissatisfaction		t
		SEB	B	
Nurturing mother	-.5	.02	-.23	-2.1*
Guiding mother	.01	.02	.96	.81
Controlling mother	.07	.02	.23	3.5***
R ²	.51			
ΔR	.63			

Note.; R² = Coefficient of determinance; ΔR² = change in the coefficient of determinance, *p <.05. **p <.01.

Regression analysis showed that the model was overall significant and the nurturing mother parenting style and controlling mother parenting style are significant predictors of body dissatisfaction. It accounted for 51% of the variance in body dissatisfaction.

The independent sample t-test was run in order to see the relationship between the two variables in which body dissatisfaction was taken as the dependent variable while the marital status was chosen as the independent variable.

Table 4

Mean, Standard Deviation, and t Value of Marital Status and Body Dissatisfaction in Women (N=308)

		Marital status		t(308)	p
		Unmarried	Married		
BDS	M	23.35	27.85	1.98	.26
	SD	1.4	1.2		

Note. BDS = Body dissatisfaction scale; M = mean; SD = standard deviation. ***p < .001

The independent sample t- test was applied to find the differences in the total score of dissatisfaction and marital status. There was no significant difference in the body dissatisfaction among married and un married women. The results revealed that the both groups had the same amount of body dissatisfaction despite the marital status.

It was hypothesized that there was a significant level of difference in the body dissatisfaction among women with different occupations i.e. doctors, educationists, lawyers, managers and housewives. To test the hypothesis, one-way analysis of variance was run and the results were computed.

Table 5

One-Way Analysis of Variance of Body Dissatisfaction Scale Total and Occupation of Women Sample (N =308)

Source	SS	Df	MS	<i>f</i>	<i>p</i>
Between group	2623.49	3	874.449	3.47	016**
Within group	76507.72	304	251.67		
Total	79131.22	307			

Note. N = 308. SS = sum of square; *df* = degree of freedom; MS = mean square ; ***p* < .05

The analysis of variance between the different occupations and body dissatisfaction total shows significant difference, in body dissatisfaction among women. The post hoc analysis done through Tukey test revealed that there was a significant difference between the working women and the non-working women.it was also seen that there was a significant difference between the body dissatisfaction of students and the women who were house wives.

Discussion

A large number of people in society are concerned about the appearance and the features of the self. All societies and cultures have different perspectives about body ideals. The people of every society try to attain body ideals that are pursued by that particular society in order to feel secure and idealized in the eyes of other people. When there is a discrepancy between the ideal body type and the body image of an individual, then a person might feel dissatisfaction about his or her own body.

The concept of body dissatisfaction is significantly used in the west as there have been many researches which were conducted in order to support the presence of body dissatisfaction among people of various age groups. Body dissatisfaction has proven to arise from different factors such as depression, health issues, parental, societal and peer related pressures according to previous literature. In Pakistan the concept is not an old one. It is seen that body dissatisfaction started emerging in the past years and it has become a subject of major concern in recent years. The role of the media in promoting kinds of body ideals and societal pressures have been found to be the most common reasons for eliciting this concept in the female population.

The present study was conducted amongst the female population to detect body dissatisfaction and the effect of perceived parental styles on the phenomenon as it had been observed in previous research that women were more likely to develop body dissatisfaction in their lifetime at certain levels. The sample size of young female adults was chosen as the previous researchers also reported that early adulthood was the age when women went for various procedures in order to look beautiful in order to find the best match for their marriage proposals

(Garcia et al., 2019).

It was seen that 16.6 % of the sample showed symptoms of body dissatisfaction ranging from moderate to severe, which can be correlated to the fact that there has been an incidence of rise in dissatisfaction about the body in women who are adults. It can also be related to the fact that girls or women are more likely to develop dissatisfaction about their body when they are in their young adulthood like in the case of a sample which comprises younger adult females of Pakistan (Tiggemann, 2004). It was also seen that 23.7 percent of the sample showed borderline and mild symptoms of body dissatisfaction. This high percentage also indicates that women are becoming more concerned about their body types and are most often dissatisfied with their own physique (Karazsia et al., 2017).

Here in our culture this kind of result may indicate a high percentage of dissatisfaction with one's body due to multiple reasons. A few of the basic reasons may be the role of media, society and family pressure of the person. It is also seen that the people tending to develop lack of satisfaction with their body as they grow up, particularly in case of women, do so as they are bound by the society to look presentable so that they can find the male for their marriage. It is also a common norm in Pakistani society to look for possible marriage proposals for girls as soon as they turn 18 to 20 years. This can be related to the fact that around 24 percent of girls in Pakistan get married before reaching the age of 18 years which comes under child marriage (Chatterjee, 2014). For this purpose, they are expected by mothers and society to carry themselves well in order to look flawless and like an ideal woman. These reasons could explain the possible high rate of dissatisfaction which was seen in the sample as the sample belonged to the age group of young adult women (Quitkat et al., 2019).

The results supported our hypothesis and it was comprehended through the analysis that the women who perceived their fathers to be controlling had the greater number of symptoms of body dissatisfaction than any other type of parenting style. These results were supported by various studies which showed that the parents, especially fathers, contributed a lot in bringing about psychological problems and their symptoms in children (Wang et al., 2019).

It was also revealed that the nurturing and permissive parenting style in fathers did not contribute to the symptoms of body dissatisfaction and did not account for the severity of the symptoms in the sample. This was again supported by the previous research which stated that the nurturing parenting style in fathers contributes to greater self-confidence and self-esteem in children and also provides them with good mental health (Steele & McKinney, 2019). The results can be explained with the help of the cultural differences where the fathers with nurturing and permissive parenting style are considered to be the ones having a healthy relationship with their children that boost their confidence as well. It can also be correlated to the fact that those female children having exposure to authoritarian parenting styles were more likely to feel dissatisfied with the body, along with developing eating disorders (Enten & Golan, 2009).

It was seen that the women belonging to the sample indeed showed high scores on body dissatisfaction with the fathers who were permissive in nature of their parenting styles. It can be related to the fact that the permissive styles of parenting do not allow the children to regulate themselves in the healthy way that results in many psychological problems including a low body self-image leading to dissatisfaction and lower body self-image resulting in a discrepancy between the ideal image and the real one (Pellerone et al., 2017)

It was seen that the women of the sample exhibited a higher score on body dissatisfaction when they perceived their mothers to be more of the controlling type. The results are also validated by studies which showed that these girl children showed more dissatisfaction towards their body type when they were faced with the controlling behaviors of the parents (Garcia et al., 2020). Thus

the dependency of the child and control by the parent can also be a cause of body dissatisfaction particularly when the children find themselves inadequate in taking care of their own self and feeling inferior because of their body types too (Garcia et al., 2019).

The statistical analysis suggested that working women scored higher on body dissatisfaction. This can be related to the fact that women working in different places are more likely to be the focus of their coworkers and are often required to look appealing at their jobs as well which can be a reason for the higher score (Grilo & Masheb, 2005). There was a significant difference between the body dissatisfaction faced by women of different occupations (also corroborated by previous literature) that suggested that the women working in different occupations showed different severities of body dissatisfaction (Mak et al., 2020).

Conclusion

To sum up, it was seen that the results served multiple purposes. First of all, it presented the indication and the severity of the body dissatisfaction present in the female adult population of Pakistani women. Secondly, it showed the relation of various types of perceived parental styles and body dissatisfaction in adult women. It was seen that a major part of the sample showed symptoms of body dissatisfaction. The results also revealed that various parental styles, both in mothers and fathers, related to a high score on body dissatisfaction in women. Along with these it was also discovered that women belonging to higher education had more body dissatisfaction than those with lower education, and it was also seen that working women had more dissatisfaction with their bodies than non- working women.

References

- Amianto, F., Martini, M., Olandese, F., Davico, C., Abbate-Daga, G., Fassino, S., & Vitiello, B. (2021). Affectionless control: A parenting style associated with obesity and binge eating disorder in adulthood. *European Eating Disorders Review*, 29(2), 178-192. <http://doi.org/10.1002/erv.2776>
- Burlew, L. D., & Shurts, W. M. (2013). Men and body image: Current issues and counseling implications. *Journal of Counseling & Development*, 91(4), 428-435. <http://doi.org/10.1002/j.1556-6676.2013.00098.x>
- Checa, P., & Abundis-Gutierrez, A. (2018). Parenting styles, academic achievement and the influence of culture. *Psychology and Psychotherapy: Research Study*, 1(4), 1-3.
- Duke, R. E., Bryson, S., Hammer, L. D., & Agras, W. S. (2004). The relationship between parental factors at infancy and parent-reported control over children's eating at age 7. *Appetite*, 43(3), 247-252. Retrieved <http://www.sciencedirect.com/science/article/pii/S0195666304000959>
- Durkin, S. J., Paxton, S. J., & Sorbello, M. (2007). An integrative model of the impact of exposure to idealized female images on adolescent girls' body satisfaction. *Journal of Applied Social Psychology*, 37, 1092–1117. [http://doi.org/10.1016/s1075-2935\(04\)00016-9](http://doi.org/10.1016/s1075-2935(04)00016-9)
- Eisenberg, M. E., Neumark-Sztainer, D., & Paxton, S. J. (2006). Five-year change in body satisfaction among adolescents. *Journal of Psychosomatic Research*, 61(4), 521-527. <http://doi.org/10.1016/j.jpsychores.2006.05.007>
- Enten, R. S., & Golan, M. (2009). Parenting styles and eating disorder pathology. *Appetite*, 52(3), 784-787. <http://doi.org/10.1016/j.appet.2009.03.012>
- Furnham, A., Badmin, N., & Sneade, I. (2002). Body image dissatisfaction: Gender differences in

- eating attitudes, self-esteem, and reasons for exercise. *The Journal of Psychology*, 136(6), 581-596. <http://doi.org/10.1080/00223980209604820>
- Futterman Collier, A., McClure, F. H., Collier, J., Otto, C., & Polloi, A. (1999). Culture-specific views of child maltreatment and parenting styles in a Pacific-island community. *Child Abuse & Neglect*, 23(3), 229-244. [http://doi.org/10.1016/s0145-2134\(98\)00129-](http://doi.org/10.1016/s0145-2134(98)00129-)
- Garcia, O. F., Fuentes, M. C., Gracia, E., Serra, E., & Garcia, F. (2020). Parenting warmth and strictness across three generations: Parenting styles and psychosocial adjustment. *International Journal of Environmental Research and Public Health*, 17(20), 7487. <http://doi.org/10.3390/ijerph17207487>
- Garcia, P. R. J. M., Sharma, P., De Massis, A., Wright, M., & Scholes, L. (2019). Perceived parental behaviors and next-generation engagement in family firms: A social cognitive perspective. *Entrepreneurship Theory and Practice*, 43(2), 224-243. <http://doi.org/10.1177/1042258717731632>
- Gardner, R. M., Stark, K., Friedman, B. N., & Jackson, N. A. (2000). Predictors of eating disorder scores in children ages 6 through 14: A longitudinal study. *Journal of Psychosomatic Research*, 49, 199-205. [http://doi.org/10.1016/s0022-3999\(00\)00172-0](http://doi.org/10.1016/s0022-3999(00)00172-0)
- Grabe, S., & Hyde, J. S. (2006). Ethnicity and body dissatisfaction among women in the United States: A meta-analysis. *Psychological Bulletin*, 132(4), 622. <http://doi.org/10.1037/0033-2909.132.4.622>
- Grabe, S., Ward, L. M., & Hyde, J. S. (2008). The role of the media in body image concerns among women: A meta-analysis of experimental and correlational studies. *Psychological Bulletin*, 134(3), 460. <http://doi.org/10.1037/0033-2909.134.3.460>
- Grogan, S. (2007). *Body image: Understanding body dissatisfaction in men, women, and children*. Routledge. <http://doi.org/10.4324/9780203134979>
- Heider, N., Spruyt, A., & De Houwer, J. (2018). Body dissatisfaction revisited: On the importance of implicit beliefs about actual and ideal body image. *Psychologica Belgica*, 57(4), 158. <http://doi.org/10.5334/pb.391>
- Hobza, C. L., Walker, K. E., Yakushko, O., & Peugh, J. L. (2007). What about men? Social comparison and the effects of media images on body and self-esteem. *Psychology of Men & Masculinity*, 8(3), 161. <http://doi.org/10.1037/1524-9220.8.3.161>
- Jones, D. C. (2004). Body image among adolescent girls and boys: A longitudinal study. *Developmental Psychology*, 40, 823-835. <http://doi.org/10.1037/0012-1649.40.5.823>
- Karazsia, B. T., Murnen, S. K., & Tylka, T. L. (2017). Is body dissatisfaction changing across time? A cross-temporal meta-analysis. *Psychological Bulletin*, 143(3), 293. <http://doi.org/10.1037/bul0000081>
- Keski-Rahkonen, A., & Mustelin, L. (2016). Epidemiology of eating disorders in Europe: Prevalence, incidence, comorbidity, course, consequences, and risk factors. *Current Opinion in Psychiatry*, 29(6), 340-345. <http://doi.org/10.1097/ycp.0000000000000278>
- Knauss, C., Paxton, S. J., & Alsaker, F. D. (2007). Relationships amongst body dissatisfaction, internalisation of the media body ideal, and perceived pressure from media in adolescent girls and boys. *Body Image*, 4(4), 353-360. <http://doi.org/10.1016/j.bodyim.2007.06.007>

- Konopka, A., Rek-Owodziń, K., Pełka-Wysiecka, J., & Samochowiec, J. (2018). Parenting style in the family and the risk of psychopathology. *Advances in Hygiene and Experimental Medicine*, 72, 924-931.
- Latif, A., Khan, S., & Farooq, W. (2011). Impact of media on the development of eating disorders in young females of Pakistan. *International Journal of Psychological Studies*, 3(1), p122. <http://doi.org/10.5539/ijps.v3n1p122>
- Mahmud, N., & Crittenden, N. (2007). A comparative study of body image of Australian and Pakistani young females. *British Journal of Psychology*, 98(2), 187-197. <http://doi.org/10.1348/000712606x112446>
- Mak, M. C. K., Yin, L., Li, M., Cheung, R. Y. H., & Oon, P. T. (2020). The relation between parenting stress and child behavior problems: Negative parenting styles as a mediator. *Journal of Child and Family Studies*, 29, 2993-3003. <http://doi.org/10.1007/s10826-020-01824-z>
- Pellerone, M., Ramaci, T., Granà, R., & Craparo, G. (2017). Identity development, parenting styles, body uneasiness, and disgust toward food. A perspective of integration and research. *Clinical Neuropsychiatry*, 14(4).
- Presnell, K., Bearman, S. K., & Stice, E. (2004). Risk factors for body dissatisfaction in adolescent boys and girls: A prospective study. *International Journal of Eating Disorders*, 36, 389–401. <http://doi.org/10.1002/eat.20045>
- Quittkat, H. L., Hartmann, A. S., Düsing, R., Buhlmann, U., & Vocks, S. (2019). Body dissatisfaction, importance of appearance, and body appreciation in men and women over the lifespan. *Frontiers in Psychiatry*, 10, 864. <http://doi.org/10.3389/fpsy.2019.00864>
- Robinson, K., & Ferraro, F. R. (2004). The relationship between types of female athletic participation and female body type. *The Journal of Psychology*, 138(2), 115-128.
- Ralph-Nearman, C., & Filik, R. (2018). New body scales reveal body dissatisfaction, thin-ideal, and muscularity-ideal in males. *American Journal of Men's Health*, 12(4), 740-750.
- Savage, J. S., Fisher, J. O., & Birch, L. L. (2007). Parental influence on eating behavior: Conception to adolescence. *The Journal of Law, Medicine & Ethics*, 35(1), 22-34. <http://doi.org/10.1111/j.1748-720x.2007.00111.x>
- Steele, E. H., & McKinney, C. (2019). Emerging adult psychological problems and parenting style: Moderation by parent-child relationship quality. *Personality and Individual Differences*, 146, 201-208.
- Taqi, A. M., Shaikh, M., Gowani, S. A., Shahid, F., Khan, A., Tayyeb, S. M., ... & Naqvi, H. A. (2008). Body Dysmorphic Disorder: Gender differences and prevalence in a Pakistani medical student population. *BMC Psychiatry*, 8(1), 20. <http://doi.org/10.1186/1471-244x-8-20>
- Tiggemann, M. (2004). Body image across the adult life span: Stability and change. *Body Image*, 1(1), 29-41. [http://doi.org/10.1016/S1740-1445\(03\)00013-4](http://doi.org/10.1016/S1740-1445(03)00013-4)
- Wang, S. B., Haynos, A. F., Wall, M. M., Chen, C., Eisenberg, M. E., & Neumark-Sztainer, D. (2019). Fifteen-year prevalence, trajectories, and predictors of body dissatisfaction from adolescence to middle adulthood. *Clinical Psychological Science*, 7(6), 1403-1415.

<http://doi.org/10.1177/2167702619858021>

- Wardle, J., Haase, A. M., & Steptoe, A. (2006). Body image and weight control in young adults: international comparisons in university students from 22 countries. *International Journal of Obesity*, 30(4), 644-651. <http://doi.org/10.1038/sj.ijo.0803050>
- Yaffe, Y. (2020). Systematic review of the differences between mothers and fathers in parenting styles and practices. *Current Psychology*, 1-14. <http://doi.org/10.1007/s12144-020-01001-4>
- Tariq, M., & Ijaz, T. (2015). Development of Body Dissatisfaction Scale for University Students. *Pakistan Journal of Psychological Research*, 30(2). <http://dx.doi.org/10.1016/j.jpsychores.2006.05.007>