

ORIGINAL PAPER

## Appearance comparison as a mediator between perceived parental body talk, sociocultural attitudes, and young adults' body dissatisfaction

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### Abstract

Body dissatisfaction (BD) is a prevalent issue, especially among adolescents and young adults, influenced by various sociocultural factors. The current study examined the association between perceived parental body talk and sociocultural attitudes towards appearance, and young adults' BD levels, focusing on the mediating role of appearance comparison. Participants were 236 Turkish adults between the ages of 18 and 35 ( $M = 24$ ,  $SD = 3.70$ ) who completed an online survey including the Negative Body Talk Scale, Sociocultural Attitudes Towards Appearance Questionnaire-4 Revised, Physical Appearance Comparison Scale-Revised, and Body-Cathexis Scale. Data were analyzed using two simple mediation analyses and a multiple predictor mediation model, using the SPSS PROCESS macro and JASP software. Results indicated that frequency of parental body talk and their sociocultural attitudes, as reported by young adult participants, were positively related to BD, with appearance comparison mediating these relationships. In the multiple predictor model, indirect effects of both parental sociocultural attitudes and body talk on young adults' BD through appearance comparison were significant. These findings highlight the critical role of parental behaviors and pressures in understanding young adults' body image experiences and point to the importance of targeting negative body talk, appearance-related pressures, and appearance-based social comparisons in family-oriented interventions.

**Keywords:** body talk, sociocultural attitudes towards appearance, appearance comparison, body dissatisfaction, parents

### Algılanan ebeveyn beden konuşmaları ve sosyokültürel tutumlar ile genç yetişkinlerin beden memnuniyetsizliği arasındaki ilişkide görünüm karşılaştırmanın aracı rolü

#### Öz

Beden memnuniyetsizliği, özellikle ergenler ve genç yetişkinler arasında yaygın olan ve çeşitli sosyokültürel faktörlerden etkilenen bir sorundur. Bu çalışmada ebeveynlerin beden konuşmalarının ve görünüme yönelik sosyokültürel tutumlarının, genç yetişkin bireylerdeki beden memnuniyetsizliği düzeyleri üzerindeki etkisi incelenmiş ve bu ilişkilerde görünüm karşılaştırmanın aracılık rolü test edilmiştir. Çalışmaya 18-35 yaş arası 236 yetişkin katılmıştır ( $Ort_{yaş} = 24$ ,  $SS = 3.70$ ). Katılımcılardan Olumsuz Beden Konuşmaları Ölçeği, Görünüme Yönelik Sosyokültürel Tutumlar Anketi-4 Revize formu, Fiziksel Görünüm Karşılaştırma Ölçeği-Revize formu ve Vücut Algısı Ölçeği'nden oluşan çevrimiçi anketleri doldurmaları istenmiştir. Veriler iki basit aracılık modeli ve bir çoklu yordayıcılı aracılık modeli ile test edilmiş ve veri analizinde SPSS PROCESS makrosu ve JASP kullanılmıştır. Sonuçlar, katılımcıların bildirdiği ebeveynlerin beden konuşmaları ve görünüme dair sosyokültürel tutumlarının beden memnuniyetsizliği ile pozitif yönde ilişkili olduğunu göstermiştir. Ayrıca görünüm karşılaştırması bu ilişkilere aracılık etmiştir. Çoklu yordayıcılı modelde, ebeveynlerin sosyokültürel tutumlarının ve bedenle ilgili konuşmalarının, genç yetişkinlerin beden memnuniyetsizliği üzerindeki dolaylı etkilerinin görünüm karşılaştırması yoluyla anlamlı olduğu görülmüştür. Bu bulgular, genç yetişkinlerin beden imajı deneyimlerini anlamada ebeveyn davranışları ve baskılarının kritik rolünü vurgulamakta ve aile odaklı müdahalelerde olumsuz beden konuşmalarının, dış görünüşle ilgili baskıların ve görünüme dayalı sosyal karşılaştırmaların hedeflenmesinin önemine işaret etmektedir.

**Anahtar Kelimeler:** beden konuşmaları, görünüme yönelik sosyokültürel tutumlar, görünüm karşılaştırma, beden memnuniyetsizliği, ebeveynler

## INTRODUCTION

Body dissatisfaction (BD) refers to a person's negative evaluation of their physical appearance. It is a subjective assessment of one's own body, including dissatisfaction with certain body parts, size, shape, weight, and muscularity (Stice & Shaw, 2002). All age groups and genders are affected by BD (Clark & Tiggemann, 2008; Engeln-Maddox et al., 2012; Schaefer & Blodgett Salafia, 2014). To illustrate, at the age of five, girls indicated that they wanted thinner bodies, signaling the early presence of BD (Perez et al., 2018). Similarly, in a study with Turkish children aged between 9 and 11, high levels of BD and a desire to be thinner were found (Arslan et al., 2023). Research gen-

erally indicates that women report higher levels of dissatisfaction than men (Engeln et al., 2013), which is also seen in the Turkish samples, with Turkish women reporting lower body satisfaction levels than Turkish men (Pehlivan et al., 2025; Şanlıer et al., 2016; Tayfur & Evrensel, 2020). However, in recent decades, BD among men has also risen, with 43% reporting dissatisfaction in some studies (Blashill, 2011). BD is associated with unhealthy weight control behaviors, decreased self-esteem, and rumination about appearance, and is identified as a major contributor to the development of eating disorders (Chen et al., 2007; Rodgers & Chabrol, 2009; Stice & Shaw, 2002).

Among various social and psychological influences, family attitudes and communication are considered one of

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Received: Mar 31, 2025 · Revised: Jun 5/Aug 1, 2025 · Accepted: Aug 5, 2025 · Published Online: Dec 29, 2025

Author Note: The data analyzed in this study were collected as part of the first author's master's thesis study.

Association of Clinical Psychology Research 2026

the most important mechanisms that predict BD and eating disorder symptoms among young individuals (Hart & Chow, 2020). Therefore, a deeper understanding of parents' influence on their children's BD appears to be an important target for addressing body image concerns and preventing the development of eating disorders.

### Parental Attitudes Towards Appearance and Body Talk

One of the influences that might contribute to BD is sociocultural attitudes toward appearance (SATA). Family members, peers, and media play key roles in promoting the cultural ideal of being thin by endorsing behaviors and comments that promote this ideal. SATAs are culturally determined influences regarding body image, leading individuals to internalize society's appearance ideals as their own, pressuring them towards achieving this ideal (Thompson & Stice, 2001). These sociocultural pressures can shape young individuals' body perception and contribute to BD (Rodgers & Chabrol, 2009). For example, in a study with Turkish adults, pressures from media and peers, and the internalization of body ideals were negatively associated with body satisfaction in both men and women (Burkut, 2024).

Sociocultural attitudes spread through socialization, with parents being a key influence as children socialize in families first (Clark & Tiggemann, 2008) and encounter their parents' attitudes before they come across media and peers (Ricciardelli et al., 2000). Therefore, parents and caregivers have an important role in the transmission of sociocultural body ideal messages to their children (McCabe & Ricciardelli, 2001). According to a recent study by Nebel-Schwalm (2024), parental sociocultural pressures were associated with BD, and men who were exposed to greater pressure from their parents experienced higher levels of BD. Similarly, a study by Chng and Fassnacht (2016) found that negative weight-related comments from mothers were associated with BD among Singaporean young adults. In a study with Turkish men, parents' comments, teasing, criticism, and attitudes influenced by sociocultural factors were found to affect their children's perception of their body and weight, thus contributing to BD (Selvi, 2018).

Family is often the primary environment where discussions about weight, body, and food occur. Therefore, family communication about body shape and weight might be one of the ways through which parents influence their children's body image. Body talk is defined as mostly negative comments about one's body (e.g., height, skin tone), focuses on body and weight ideals formed by societal expectations or personal desires (Arroyo & Harwood, 2012), and has been associated with BD (Arroyo & Harwood, 2012; Engeln et al., 2013). Body talk contains statements about all types of weight, body type, and appearance, such as "*I am short*" or "*I am not in shape*" (Engeln-Maddox et al., 2012). Fat talk is a form of negative, belittling type of body talk, encompassing self-critical statements about one's appearance, generally focusing on weight and body shape (Arroyo & Harwood, 2012; Sharpe et al., 2013). The term "negative family body talk" refers to negative body-related

conversations within families, involving negative statements from family members about their own bodies (MacDonald et al., 2015; Yang et al., 2023). Research suggests that negative family body talk is very common. For example, a study found that 76% of parents reported using fat talk around their children (Lydecker et al., 2018).

Previous evidence indicates that overhearing others' fat talk is associated with greater BD (Engeln-Maddox et al., 2012). Hearing other people's comments and criticism about their bodies can make individuals more aware and concerned about their own bodies (Barbeau et al., 2022), contributing to BD. An experimental study by Engeln et al. (2013) showed that men who heard fat talk reported higher levels of BD compared to those who engaged in it, indicating adverse effects of hearing others' fat talk on BD. Research on the effects of parental fat talk on children is limited. When parents express their dissatisfaction with their bodies, they may indirectly convey messages that promote the thin ideal and, through modeling, reinforce their children's drive for thinness (Abraczinskas et al., 2012). In one of the previous studies, parental fat talk was associated with children's BD and eating pathology (Lydecker et al., 2018). Similarly, a recent study showed that exposure to family body talk while growing up is associated with higher levels of BD in adulthood (Berge et al., 2025). Based on findings highlighting the critical impact of family attitudes and body talk on children, examining mechanisms, like appearance comparison, through which parental factors influence young adults' body image, becomes particularly important.

### Appearance Comparison as a Mechanism between Family Influences and BD

Appearance comparison is a factor that appears to contribute directly to BD and is also considered a mechanism in the relationship between sociocultural influences and body image issues (Chen et al., 2007). According to the social comparison theory, people make evaluations about themselves by comparing themselves with others (Festinger, 1954; Schaefer & Blodgett Salafia, 2014). Appearance-related social comparison indicates people's tendency to make appearance-based comparisons by comparing their physical appearance to others to obtain information about highly valued attributes and societal expectations linked to appearance, to form a judgment about their own appearance (Kakar et al., 2023; Schaefer & Blodgett Salafia, 2014). Following the social comparison theory, if a person compares their appearance to others, specifically to those who are believed to be more attractive, that person's risk for experiencing BD is higher than others (Vander Wal & Thelen, 2000). Furthermore, previous research indicated that high levels of physical appearance comparison were related to decreased body satisfaction (Chen et al., 2007; Schaefer & Blodgett Salafia, 2014; Schaefer & Thompson, 2014).

The role of appearance comparison as a mechanism between sociocultural influences and BD and eating disturbances is highlighted in the Tripartite Influence Model (TIM; Thompson, Heinberg, et al., 1999). TIM is a sociocultural model that offers a conceptual framework for

comprehending the relationships between different risk factors and mechanisms of influence on BD (Karazsia & Crowther, 2009). The model constitutes three primary sources of sociocultural influence which are peers, parents, and media (Chen et al., 2007) which influence BD and eating disturbances both directly, and indirectly through two primarily mediational mechanisms, social appearance comparison and thin-ideal/appearance ideal internalization (Chen et al., 2007; Thompson, Heinberg, et al., 1999). In other words, social appearance comparison is one of the mediational mechanisms linking sociocultural influences and body image issues.

TTIM highlights the importance of parental influences on the development of body image and eating behaviors, especially through appearance comparison (Schaefer & Blodgett Salafia, 2014). Being exposed to sociocultural influences and attitudes of family, peers and/or media increases the possibility of internalizing the ideals towards appearance and accepting those as personal standards and goals (Kakar et al., 2023), resulting in making appearance-based comparisons. Since these appearance ideals are hard to achieve, when individuals do not meet them, they begin to feel dissatisfied with their own bodies. Supporting the TTIM, Keery et al. (2004) found that appearance comparison mediates the relationship between sociocultural influences and BD. Similarly, in a recent study, Deek et al. (2024) showed that fat talk and appearance pressures by mothers are associated with appearance comparison and BD in their daughters aged 18-25, and appearance comparison mediated the relationship between body talk and BD. Overall, TTIM and related research suggest that sociocultural influences, such as parental attitudes, play a role in the emergence of BD, and appearance comparison may be one of the mechanisms in this relationship.

### The Present Study

The current study aimed to understand parental influences on BD in Turkish young adults, specifically focusing on the effects of perceived parental body talk and SATA on young adults' body image. Furthermore, the study investigated the mediating role of appearance comparison in the association between these parental influences and BD. The present study was designed to target several gaps in previous research. First, existing studies have mostly focused on the effects of direct statements made by parents to their children (Yang et al., 2023); yet the effects of hearing negative body talk from parents are still an understudied area of research. To address this gap, we assessed parents' frequency of body talk, as reported by their young adult children. Secondly, most studies on BD focused on female participants, particularly parents' influence on their daughters, or mother-and-daughter dyads (Barbeau et al., 2022; Hart & Chow, 2020), and there is limited research on BD in males and the influence of both parents on their sons. To address this gap, we included both male and female participants in our sample. Thirdly, we assessed the influence of parental body talk, as perceived by young adults, on BD, rather than focusing solely on maternal influences.

Even though body image is a very culture-specific to-

pic and tied to societal norms, the theories and research on body image mostly reflect Western populations, highlighting a significant gap in knowledge regarding non-Western contexts. Recently, there seems to be a growing interest in investigating body ideals in non-Western contexts, and several research studies have focused on Middle-Eastern, Asian, and Indian as well as Turkish populations (e.g., Deek et al., 2024; Kakar et al., 2023; Ozbek et al., 2024; Pehlivan et al., 2025; Tayfur & Evrensel, 2020; Yang et al., 2023). As far as we know, no study has investigated parental body talk in a Turkish sample. This study aims to investigate the influence of parents on BD within a non-Western Turkish sample. Since Turkey is geographically positioned between Asia and Europe, it harbors both Western and Eastern values (Cihan et al., 2016). Even though the thin ideal is a Western standard, with increasing Westernization, body image issues and eating disorders are on the rise in Turkey, yet remain relatively understudied (Ozbek et al., 2024). Researching non-Western populations like Turkey will help us assess the universality of previous findings on BD and develop culture-sensitive assessment tools and therapeutic approaches to address body image issues. We expected that perceived parental body talk would be positively associated with participants' BD level, and appearance comparison would mediate this relationship. Secondly, we expected that perceived parental SATA would be positively associated with BD levels, and appearance comparison would mediate this relationship. Lastly, in the model with two predictors, we expected that appearance comparison would mediate the relationship between perceived parental body talk and SATA, and BD.

## METHODS

### Participants

Initially, the survey was completed by 258 Turkish adults. The inclusion criteria for participating in this study were being a native Turkish speaker, being between 18 and 35 years old, and passing the attention check questions. After excluding participants who failed the attention check questions, the final sample consisted of 236 adults between the ages of 18 to 35, with a mean age of 24 ( $SD = 3.70$ ). In the sample, 72.5% ( $n = 171$ ) of the participants were female, 27.1% ( $n = 64$ ) were male, and one participant selected the "other" option. 44.1% ( $n = 104$ ) perceived their socioeconomic status (SES) as middle, 28.8% ( $n = 68$ ) perceived as high, and 27.2% ( $n = 64$ ) perceived their SES as low. In terms of relationship status, 51.7% ( $n = 122$ ) of the participants reported being single and 41.5% ( $n = 98$ ) reported being in a romantic relationship. 6.8% ( $n = 16$ ) of participants were married. While 55.1% ( $n = 130$ ) of the participants were not living with their parents, 44.9% ( $n = 106$ ) reported that they were living with them. The mean body mass index (BMI) was calculated as 23.06 ( $SD = 3.94$ ), which falls within the normal range based on the criteria that were formed by the World Health Organization (2024). Demographic information can be seen in Table 1.

**Table 1. Descriptive Statistics of the Sample** ( $N = 236$ )

Variables		N	%
Gender	Female	171	72.5
	Male	64	27.1
	Other	1	0.4
Socioeconomic status	Low	64	27.1
	Middle	104	44.1
	High	68	28.8
Relationship status	Single	122	51.7
	In a relationship	98	41.5
	Married	16	6.8
Living with parents	Yes	106	44.9
	No	130	55.1
Dieting	Yes, in the past	121	51.3
	Yes, currently	37	15.7
	No, never	78	33.1
Body Mass Index	Underweight	16	6.8
	Normal	156	66.1
	Overweight	47	19.9
	Obese/Extremely obese	17	7.2
History of Psychiatric Diagnosis	Yes	90	38.1
	No	146	61.9

## Measures

**Demographic Information Form** The first part of the survey consisted of questions about participants' demographic characteristics to obtain descriptive information about the sample. The form included items on gender, age, education level, SES, and relationship status of the participants, whether they were living with their parents or not, history of dieting, and the frequency of exercise. Participants were also asked to report on their weight and height to calculate their BMI. Lastly, participants were asked whether they had received a psychiatric diagnosis in the past to provide further descriptive data.

**Negative Body Talk Scale (NBTS)** The original NBTS assesses individuals' levels of talking negatively about their own bodies with 13 items divided into two subscales (i.e., body concern and body comparison). The questionnaire is rated on a 7-point Likert-type scale (1 = "never", 7 = "always"), with higher scores indicating a higher frequency of negative body talk. Subscale scores are computed by summing the items corresponding to body concern and body comparison dimensions, and the total score is obtained by summing the responses to all items (Engeln-Maddox et al., 2012). The NBTS was adapted into Turkish by Bayköse & Yazıcı (2019), and its Cronbach's alpha value was reported as .92.

In this study, based on the lack of scales measuring parental body talk in Turkish, a modified version of the NBTS was used for measuring parental body talk. Accordingly, the instructions of the NBTS were revised by asking participants to think about their *parents'* body talk and rate how much their *mothers* and *fathers* talked about their own bodies and weight. Furthermore, given that items 1, 4, 6, 7, and 9 referred specifically to the female gender (e.g., "I wish my body looked like hers"), following previous studies (e.g., Arroyo & Brunner, 2016; Hooper et al., 2023), these items were modified to be inclusive of both genders (e.g., "I wish my body looked like his/hers"). Modified instructions

and items are presented in Appendix as supplementary materials. In the current study, the total scale score for the modified NBTS was used to assess perceived parental body talk, and the overall Cronbach's alpha value was .91.

**Sociocultural Attitudes Towards Appearance Questionnaire-4 Revised (SATAQ-4R)** SATAQ-4R was developed by Schaefer et al. (2017) to measure pressures towards appearance and internalization of ideals about appearance for both women and men. The original version contains 31 items with a 5-point Likert-type scale (1 = "definitely disagree" and 5 = "definitely agree") and it consists of 7 subscales. In the current study, only the pressures-family subscale was used for assessing parents' attitudes toward appearance, with higher scores on this subscale indicating a greater level of perceived pressures from family towards societal standards of appearance. The questionnaire was adapted into Turkish by Cihan et al. (2016), and Cronbach's alpha value was .86 for the pressures-family subscale. In the current study, the Cronbach's alpha value of the pressures-family subscale was .87.

**Physical Appearance Comparison Scale-Revised (PACS-R)** We used the revised version of the original scale (Thompson et al., 1991), as developed by Schaefer and Thompson (2014), to assess how much a person compares their physical appearance to other people. PACS-R contains 11 items which are rated on a 5-point Likert scale (0 = "Never", 4 = "Always"). Total scale scores are obtained by summing the scores of all items. Higher scores suggest a greater inclination towards making comparisons based on appearance. The PACS-R was adapted into Turkish by Acar (2020), and its Cronbach's alpha value was reported as .91. In the present study, the Cronbach's alpha value of the scale was .96.

**Body-Cathexis Scale (BCS)** The BCS was developed by Secord & Jourard (1953) and consists of 40 items that measure satisfaction or dissatisfaction towards 40 different body parts or their function. The items are rated on a five-point Likert-type scale (1 = "strong negative", and 5 = "strong positive"). Total scale scores are computed by summing all item scores, with higher scores indicating a greater level of BD. The BCS was adapted into Turkish by Hovardaoğlu (1993). The Turkish version's Cronbach's alpha value was .91, and the split-half reliability value was .75 (Hovardaoğlu, 1993). In the current study, Cronbach's alpha value of the scale was .92.

## Procedure

The present study was approved by İzmir University of Economics Social Sciences and Humanities Ethics Committee (Date: 29.01.2024, Number: B.30.2.İEU.0.05.05-020-353). Participants were recruited through convenience sampling via announcements made on various social media networks. The study survey was distributed through an online link to a Google Forms survey. All participation was voluntary, and participants signed an informed consent form.

**Table 2. Descriptive Statistics, Cronbach's Alpha Coefficients, and Pearson Correlation Coefficients among the Study Variables ( $N = 236$ )**

Variable	1	2	3	4
1. Parental Body Talk	1			
2. Parents' SATA	.336**	1		
3. Appearance Comparison	.491**	.448**	1	
4. Body Dissatisfaction	.278**	.266**	.416**	1
$\alpha$	.91	.87	.96	.92
$M$	45.54	9.79	21.79	102.15
$SD$	17.93	4.66	12.97	22.85
Range	13-91	4-20	2-46	41-162

**Note.** \*\* $p < .01$ , \* $p < .05$ , SATA: Sociocultural Attitudes Towards Appearance

**Data Analysis**

Descriptive statistics and Pearson correlations were calculated by using SPSS version 21. First, two simple mediation analyses were utilized to measure the mediating effect of appearance comparison in the relationship between parental body talk and BD, and between parents' SATA and BD, using PROCESS v4.2 Model 4 (Hayes, 2013). Furthermore, to examine the whole model, a multiple predictor mediation model was performed using JASP 0.19.1 (JASP Team, 2023). In this model, parental SATA and body talk were added in the model as predictors, BD was the outcome, and appearance comparison was the mediator. In all mediation models, gender and BMI were added as covariates to statistically control their effects. The significance of mediators and the indirect effects were determined by 5,000 bootstrap samples, with 95% bias-corrected percentile confidence intervals (CI).

**RESULTS**

**Preliminary Analyses**

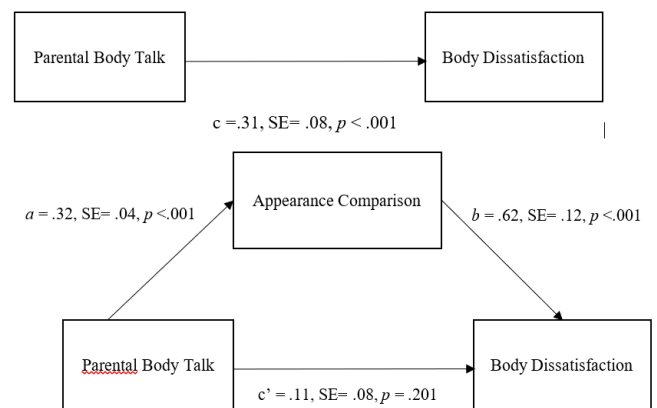
Pearson correlation coefficients were computed to evaluate the relationship between the study variables (see Table 2). According to the results, BD and parental body talk were positively correlated ( $r = .27, p < .001$ ), which means that higher levels of parental body talk, as reported by participants, were associated with greater dissatisfaction with the body. Furthermore, BD was positively correlated with parents' SATA ( $r = .26, p < .001$ ), which indicates that participants who reported higher levels of parental pressures reported greater BD. Moreover, there was a positive correlation between BD and appearance comparison ( $r = .41, p < .001$ ), which suggests that higher BD levels were associated with greater appearance comparison. Furthermore, there was a positive correlation between parental body talk and their SATA ( $r = .33, p < .001$ ). This indicates that higher levels of parental body talk were associated with higher levels of parents' SATA. Likewise, parental body talk was positively correlated with appearance comparison ( $r = .49, p < .001$ ), which means that participants who reported high levels of parental body talk also reported greater appearance comparison. Lastly, parents'

SATA and appearance comparison were positively correlated ( $r = .44, p < .001$ ), suggesting that high levels of parental pressure were associated with greater appearance comparison in young adults.

**Simple Mediation Analyses**

Our results testing the mediating role of appearance comparison in the relationship between perceived parental body talk and BD, after statistically controlling BMI and gender, indicated that parental body talk was significantly and positively associated with appearance comparison (a path;  $b = .32, t = 7.59, p < .001$ ) and explained 27% of its variance together with BMI and gender. Furthermore, appearance comparison was significantly and positively associated with BD (b path;  $b = .62, t = 5.07, p < .001$ ) and explained 18% of its variance together with body talk and the covariates. When appearance comparison was not in the model, parental body talk was significantly related to BD (c path,  $b = .31, t = 3.77, p < .001$ ) and explained 8% of its variance. When the mediator, appearance comparison, was in the model, the link between parental body talk and BD was not significant (c' path,  $b = .11, t = 1.28, p = .201$ ).

Findings showed that the indirect effect of parental body talk on BD through appearance comparison (ab path) was significant;  $b = .19, 95\% \text{ CI } [.108, .297]$ . The standardized indirect effect of parental body talk on BD was  $b = .15, 95\% \text{ CI } [.087, .231]$ . These findings supported our hypothesis that appearance comparison would mediate the relationship between parental body talk and BD (see Figure 1).

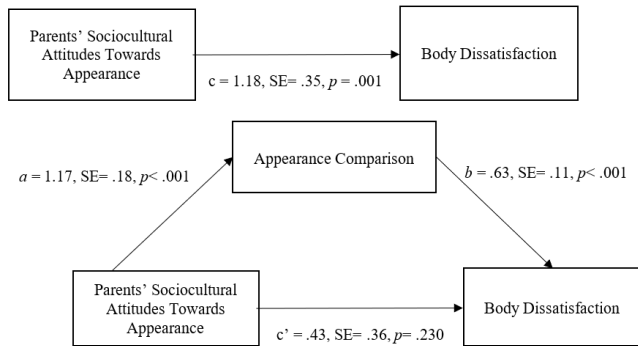


**Figure 1. The Mediation Model for the Role of Appearance Comparison in the Relationship Between Parental Body Talk and Body Dissatisfaction**

The second analysis testing the mediating role of appearance comparison in the relationship between perceived parental SATA and BD showed that, after statistically controlling BMI and gender, parental SATA was significantly related to appearance comparison,  $b = 1.17, t = 6.31, p < .001$  (a path), explaining 22% of its variance together with the covariates. Appearance comparison was significantly linked to BD,  $b = .63, t = 5.36, p < .001$  (b path) and explained 17% of its variance with parental SATA and the covariates. Without the mediator, parents' SATA was significantly associated with BD,  $b = 1.18, t =$

3.33,  $p = .001$  (c path), and explained 7% of its variance. When the mediator was included in the model, parents' SATA was not directly related to BD (c' path,  $b = .43$ ,  $t = 1.20$ ,  $p = .230$ ).b

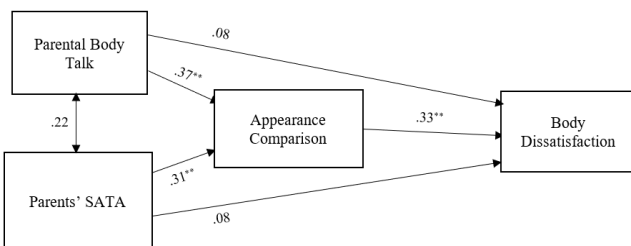
The indirect effect of parental SATA on BD through appearance comparison was significant,  $b = .75$ , 95% CI [.415, .114] (ab path). The standardized indirect effect was  $b = .15$ , 95% CI [.087, .232]. Therefore, supporting our hypothesis, appearance comparison mediated the relationship between parents' SATA and BD (see Figure 2).



**Figure 2. The Mediation Model for the Role of Appearance Comparison in the Relationship Between Parents' Sociocultural Attitudes Towards Appearance and Body Dissatisfaction**

### Multiple Predictor Mediation Model Including Parental SATA and Body Talk

A multiple predictor mediation model was conducted to test the full model with all study variables (see Figure 3). Standardized regression coefficients of the relationships between variables are displayed in Figure 3, and unstandardized results can be seen in Table 3.



**Figure 3. Standardized Path Coefficients for the Model Examining the Role of Appearance Comparison Between Parental Body Talk and Sociocultural Attitudes, and Body Dissatisfaction.** Note. The effects of gender and body mass index were statistically controlled, \*\*\* $p < .001$ ; SATA: Sociocultural Attitudes Towards Appearance.

Findings showed that the specific indirect effect of parental body talk on BD through appearance comparison was significant (indirect effect = .15, CI [.08, .25],  $p < .001$ ). Likewise, the specific indirect effect of parents' SATA on BD through appearance comparison was significant (indirect effect = .05, CI [.02, .09],  $p < .001$ ). Moreover, the direct effect of parental body talk on BD (direct effect = .10, CI [-.07, .28],  $p = .245$ ) was not significant. Similarly, the direct effect of parents' SATA on BD was also not significant (direct effect = .38, CI [-.30, 1.03],  $p =$

.282). Furthermore, the total effect of parental body talk on BD (total effect = .25, CI [.08, .43],  $p = .002$ ) and the total effect of parents' SATA on BD were significant (total effect = .89, CI [.12, 1.58],  $p = .013$ ). The results indicate that appearance comparison significantly mediated the association between parents' SATA and body talk, and participants' BD. The model explained 33% of the variance in appearance comparison and 18% of the variance in BD.

## DISCUSSION

The current study examined the relationships between parental influences (i.e., perceived parental body talk and SATA) and participants' BD, focusing on the mediating role of appearance comparison as a mechanism between parental variables and BD. Our findings indicated that perceived parental body talk and SATA are positively associated with appearance comparison and BD. Furthermore, appearance comparison mediated the relationship between parental body talk and BD, and parents' sociocultural pressures and BD in young adults, after statistically controlling for gender and BMI. This suggests that being frequently exposed to parents' body talk and perceiving higher levels of pressure regarding appearance from parents are associated with a greater likelihood of comparing appearance to others, which in turn might contribute to greater BD.

According to our results, appearance comparison appears to be a key mechanism between parental variables and BD. Our findings align with TTIM, indicating that individuals may internalize parents' sociocultural pressures and appearance ideals conveyed through their body talk, which contributes to BD by prompting these individuals to engage in appearance comparisons. Additionally, our findings are also consistent with the social learning theory (Bandura, 1977) and social comparison theory (Festinger, 1954). When children are exposed to their parents' attitudes toward appearance or body talk, they might learn their parents' body image ideals through observational learning. This process may lead children to adopt similar beliefs about the ideal body and the importance of appearance. Influenced by societal appearance standards and ideals, individuals may begin to focus on their perceived shortcomings and engage in self-degrading comparisons to others or an ideal appearance/body (Wang et al., 2022). This focus on appearance and resulting negative self-evaluation may lead to increased levels of BD, as well as higher levels of anxiety, feelings of inadequacy, and depressive symptoms (Smolak & Stein, 2006; Thompson, Covert, & Stormer, 1999). Overall, engaging in appearance comparisons is likely to have a negative impact on mental health and well-being, making it a critical issue to address.

Our findings are consistent with previous research indicating that appearance comparison may serve as a pathway in the relationship between parents' SATA and BD (e.g., Keery et al., 2004) and between parental body talk and BD (e.g., Deek et al., 2024). For example, Deek et al. (2023) investigated the influence of Australian mothers' and sisters' influence on young adult women's BD and eating disorder symptoms, showing that appearance comparison partially mediates the link between mothers' and

**Table 3. Unstandardized Regression Weights of the Multiple Predictor Mediation Model**

	Path	B	S.E.	p	Confidence Interval	
					Lower	Upper
Appearance Comparison	---> BD	.581	.127	< .001	.332	.861
Parental Body Talk	---> BD	.101	.087	.245	-.074	.281
Parents' SATA	---> BD	.389	.362	.282	-.307	1.03
Parental Body Talk	---> Appearance Comparison	.266	.041	< .001	.185	.346
Parents' SATA	---> Appearance Comparison	.871	.177	< .001	.496	1.21
BMI	---> Parental Body Talk	1.06	.303	< .001	.469	1.63
Gender	---> Parental Body Talk	-9.11	2.68	< .001	-13.8	-4.09
BMI	---> Parents' SATA	.630	.071	< .001	.493	.755
Gender	---> Parents' SATA	-1.93	.627	.002	-3.12	-.654
BMI	---> Appearance Comparison	.066	.214	.758	-.334	.453
Gender	---> Appearance Comparison	-2.82	1.69	.095	-6.15	.484
BMI	---> BD	.120	.417	.774	-.707	.930
Gender	---> BD	-1.13	3.31	.732	-7.38	5.75

**Note.** SATA: Sociocultural Attitudes Towards Appearance, BD: Body Dissatisfaction

sisters' SATA and women's BD but mediates the relationship between mothers' and sisters' body talk and women's BD, in turn predicting problematic eating. The present study extends these findings by demonstrating that appearance comparison appears to be a central mechanism in a non-Western context like Turkey. Furthermore, our findings posit that the links between parental body talk and sociocultural pressures are evident in a mixed-gender sample, and when the influences of both parents, not just mothers, are considered.

A notable strength of the current study is having a Turkish sample, as there is limited knowledge about BD and its contributing factors within this cultural context. Previous studies on Turkish adolescents (Doğan et al., 2018) and adults (Selvi, 2018) indicated a positive association between parents' attitudes or pressures about weight and appearance, and participants' BD. However, this study, as far as the researchers know, is the first study conducted on parental body talk and the first to test body talk using the TTIM framework on a Turkish sample. Previous studies typically focus on Western appearance ideals and how families' attitudes and behaviors, shaped by these ideals, affect children (Deek et al., 2024; Kakar et al., 2023). The results of this study indicate that Turkish appearance ideals bear traces of Western influences, and even though Turkey is a different cultural context, appearance comparison serves as a mechanism between perceived parental attitudes and body talk, and young adults' BD.

The findings of this study warrant several limitations. To begin with, the cross-sectional and correlational design of this study precludes forming any causal relationships and determining the direction of the relationships between the study's variables. Further research should consider employing experimental or longitudinal designs. Another limitation is that parental body talk tendencies and attitudes were reported by the participants, not the actual parents, which may be affected by reporting biases. Future research should include surveys or in-depth interviews completed by both parents and their children or use direct observation to capture parents' discussions about appearance for a more accurate description of parental attitudes and behavior. Additionally, due to the lack of a reliable and valid questionnaire in Turkish that was designed to evaluate parental body talk, we had to modify the instruct-

tions of the NBTS, which was originally developed to assess individuals' own negative body talk. Even though we adapted the instructions to target parental body talk as perceived by young adults, the modified scale may not reflect the context in which parental body talk occurs and the nuances of parental communication about appearance. This limitation highlights the need for the development of instruments specifically designed to evaluate parental body talk in Turkish samples. Additionally, the original NBTS was initially developed and validated using female samples (Bayköse & Yazıcı, 2019; Engeln-Maddox et al., 2012). Therefore, body talk assessed in the present study might primarily reflect maternal influences. This also contributed to the limitation that mothers' and fathers' influences were not investigated separately but evaluated as a whole by participants, limiting the examination of the individual effects that each parent may have on their children. These limitations highlight the need for the development and validation of instruments in Turkish that include items more representative of fathers' body talk and allow for the evaluation of paternal and maternal influences separately. Another limitation is that participants were not asked whether they had lived with both of their parents while growing up. This could have influenced their responses to questions related to parental body talk and sociocultural pressures, particularly if they were raised by a single parent or a non-parent caregiver. Lastly, even though we aimed to include both female and male participants, our sample consisted of participants who were predominantly women of middle socioeconomic status. Despite our efforts to reach out to both genders, male participation remained low, which may be related to a lower willingness among men to participate in research related to body image. We acknowledge that this limitation might have affected the study results and decreased their generalizability to the general population. We suggest that future studies consider more effective strategies in recruiting male participants and participants with diverse socioeconomic backgrounds.

Despite these limitations, we believe that the findings of the current research can provide insights to parents, educators, and mental health professionals. Given that high levels of BD might contribute to the initiation of eating disorders (Chng & Fassnacht, 2016; Stice & Shaw, 2002),

it is important to educate parents about the effect of their attitudes toward appearance ideals and their tendency to engage in body talk on their children. Parents should be aware of the importance of conveying positive body image messages in their daily interactions with others. Additionally, parents can be informed about the negative effects of social comparisons and the importance of avoiding them in the home environment. Educators and school counselors, like families, should be aware of factors contributing to body image issues and be able to provide support and assistance to families and students when necessary. Clinicians should also be conscious of parents' roles in body image issues. Family therapy sessions can be an effective approach to prevent the initiation of eating disorders. In addition, incorporating techniques and homework from Enhanced Cognitive Behavioral Therapy (Fairburn, 2008), solely designed for working with eating disorders and concerns about shape and weight, would be beneficial. This approach could raise awareness around concepts of body image, restructure body talk, and replace negative body remarks in home environments with positive or neutral ones. Furthermore, the negative effects of appearance comparison should be addressed in clinical settings. Self-compassion-based interventions may be helpful to promote body appreciation and encourage individuals to focus on the positive aspects of their bodies.

## Conclusions

In conclusion, this study underscores the significant associations between perceived parental negative body talk, parents' socio-culturally influenced appearance ideals, and young adults' body image perceptions, with appearance comparison serving as a key mediating factor. The findings highlight the importance of parental influences in understanding body image, and emphasize the role of appearance comparison as a potential mechanism linking these influences to BD. It appears that parental influences may affect children's body image perceptions not only directly but also indirectly through promoting appearance comparison. We believe that these findings provide valuable contributions for clinical interventions and future research. Based on study findings, restructuring body talk within the family environment, decreasing parental pressures towards societal ideals of appearance, and reducing appearance comparison could be important targets in promoting a healthier body image among young adults. Future research should consider conducting experimental and/or longitudinal studies to observe the directionality of these relationships and time-dependent effects. Furthermore, including both parents and their young adult children in the sample, using measurement tools that specifically assess parental body talk, and focusing on the influence of mothers and fathers separately would allow for evaluating parental influences more directly and clearly.

## DECLARATIONS

**Ethics Committee Approval:** This study was approved by the Izmir University of Economics Social Sciences and Humanities Ethics Committee (Approval number: B.30.2.İEU.0.05.05-020-

353).

**Conflict of Interest:** The authors declare that there are no relevant financial or non-financial competing interests to report.

**Informed Consent:** All participants provided written informed consent before enrolment in the study.

**Project/Funding:** The authors did not receive any funding for this research.

**Data Sharing/Availability:** The dataset generated and analyzed during the current study are available from the corresponding author upon reasonable request.

**Authors' Contributions:** [Author 1] collected the data and drafted the manuscript. [Author 2] conducted the data analysis and supervised the project. All authors reviewed and approved the final version.

**Use of Artificial Intelligence:** Authors confirm that OpenAI (GPT-4) was used only to correct grammar and improve the clarity of writing.

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## **APPENDICES**

**Modified Instructions for Completing the Negative Body Talk Scale:** Ebeveynlerinizleyken (anne ve babanız), onlardan ne sıklıkla aşağıda yer alan cümleleri (ya da benzer anlamdaki cümleleri) duyarsınız?

**Modified Items of the Negative Body Talk Scale:**

- Item 1:** Keşke benim vücudum da o kadınları/ adamları gibi görünseydi.
- Item 4:** O kadın/ adam harika bir karın bölgesine sahip.
- Item 6:** Benim vücudum neden o kadını/ adamı gibi görünmüyor?
- Item 7:** O kadının/ adamın mükemmel bir vücudu var.
- Item 9:** O kadının/ adamın ne kadar güzel fiziği var.