

A Sociological Analysis on Eating Disorders Among Anorexia and Bulimia Nervosa Patients and Primary School and University Students as Risk Groups in Turkey II: Family Structure

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Abstract

Nutrition patterns mentioned in the context of this research are also gained in family. Therefore, family also creates an atmosphere in which effective factors leading towards nutrition disorders occur spontaneously. The present research consists of sampling groups made up of patients suffering from anorexia and bulimia nervosa and students at adolescence and young adulthood periods which are accepted as risk groups. The aim is to point out the risk factors potentially existent in family structures of adolescents and of young adults for whom no diagnosis of these diseases has yet been made. This study focuses on how family sets a model in terms of ideal weight and weight control and investigates the relations between family's way of rearing children and sharing responsibilities. According to the findings of the research, family is not referred to as reason for these diseases. However, it can be regarded as a factor preparing the conditions giving rise to the development of the problems in question.

Key Words : family's way of rearing children, sharing responsibilities, eating disorders, family atmosphere.

Özet

Beslenme alışkanlıktan temel olarak aile içinde kazanılmaktadır. Dolayısıyla aile, beslenme bozukluğuna giden süreçte etkili olan faktörlerin kendiliğinden oluştuğu bir atmosferi de yaratmaktadır. Araştırma hasta grubu ile risk grubu olarak gördüğümüz ergenlik ve gençlik

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dönemindeki öğrencileri kapsamaktadır. Amacımız, anorexia ve bulimia nevrosa hastalarının aile yapısına ilişkin literatürdeki ve sahadaki bulgulardan yola çıkarak, risk oluşturuvcu faktörlerin hastalık tanısı konulmamış ergenlerin ve gençlerin aile yapılarındaki varlığına işaret etmektir. Çalışmamızda kilo problemi ve kilo kontrolü ile ebeveynin rol modeli oluşturması, çocuk bakım tarzı, aile içi sorumluluk paylaşımı arasındaki ilişkiler test edilmiştir. Sonuçta, ailenin doğrudan hastalığın nedeni olarak gösterilememesine karşın hastalığa giden süreçte kendiliğinden hazırlayıcı bir ortam oluşturduğu görülmektedir.

Anahtar Kelimeler: Aile ve sosyalizasyon, sorumlulukların paylaşımı, aile ve beslenme bozukluğu,

1. Introduction

Just as the case in the acquisition of many other social behaviours, most studies consider family as one of the basic factors in eating/nutrition disorders related to anorexia and bulimia nervosa. Theories of socialization indicate that family has a primary importance in the socialization process of individual. Family is the only and the most important social model for the child's individual and social development during his early years. Individual's experiences with his family, situations in which opportunities are provided for him, and social objects are effective in his acquisition of certain behaviours (Rheingold 1997: 787).

Social and cultural factors in society are unified within family. Family not only forms the content of individual development but also transmits cultural values to the next generation (Moorey 1991:51).

From the sociological point of view, family is a system of roles. In this sense, it is possible to say that there is a set of more or less organised relations among family members. The most important one of these relations is the parental roles of mother and father who are responsible for child's socialization. Data collected in the context health sociology reveal that there are significant correlations between health and the nature or practice of these roles. This study also indicates that there is a correlation between these roles and the behaviour of nutrition disorder.

2. Family Structure: (Exerting authority, rearing child and sharing responsibilities in family) and Nutrition Disorder

Families consciously or unconsciously employ different methods while they are leading their children towards desired behaviours during the socialization process. Methods used to teach children what is right or wrong are either punishments or rewards. In order to make children learn, families apply some methods, sometimes motivating, sometimes restricting, or sometimes discouraging. For example, rewarding may be either in the form of giving the child a material object he wants, or

providing him the social support through warm and friendly attitude. Preference between rewarding and punishment is closely related to the type of authority parents apply on their child. The nature of authority is the basic variable in rearing children.

Baumrind identifies three different ways of rearing children in terms of the authority which members of the family apply (Cuceloglu 1991:363). These are: 1. Conscious authority 2. Coercive authority 3. Unlimited tolerance (leaving child totally free, without interfering in anything with him).

2.1. Conscious Authority: In families where the conscious authority is applied, the child is appreciated. As a result, parents show love, interest and sensitivity to the child's needs and give him emotional support. The child is explained clearly about what he can do and what he should not do. If the child does not obey these rules, he is severely punished depending on the type of his faulty behaviour.

In the present study, this attitude has been conceptualised as a model of pleasantly harsh, egalitarianistic behaviour. The responsibility shared between parents in this type of families is also egalitarian. In terms of both child-rearing and household duties, parents display sharing and communicative roles. So, this type of family does not show traditional role distribution

2.2. Coercive Authority; Families exerting this type of authority only expect their children to obey them. They do not care about their children's personal features. The only aim is to make children strictly obey the prescribed rules. They do not allow their children to develop their own personal views. They take strict disciplinary actions. This understanding may also include physical violence. Parents are dictators. The boundary between what should be done and what should not be done is very clear and most of the time, it is crystallized.

In the present study, this attitude has been conceptualised as a coercive authoritative model. In this model, the relation between parents is also constructed according to strict definitions. The role distribution has a traditional and conservative structure. Communication within family is one-way and closed. Since there is a clear-cut distinction between the roles of mother and father, one of the parents - either father or mother- may perform the role of the coercive authority.

2.3. Unlimited tolerance: In this type of families, everything the child wants is done. The child's behaviours are not interfered at all. The child is left totally free. So, his inconvenient behaviours are not punished at all.

This attitude has been conceptualised in this study as a model of behaviour which leaves the child totally free. In this model, the nature of parental roles on the relations between the parents and the child is not defined. Everything within the family seems to

be going on well but behind this picture, members of family do not understand what the other needs and there is usually a communication barrier among them.

Attitudes in these three categories which are conceptualised in the present study may sometimes be observed altogether in certain family structures, creating a mixed model of behaviour. For example, the mother may be egalitarian and the father authoritative or although there is an egalitarianistic model in the general sense, mostly the mother may be the one providing emotional support within the family.

In sum, the important dimension of the problem is by whom and how the authority is shown. In other words, the person whom the child sees as a role model is very important. In this frame, whether the authority is exerted by mother or father, and whether it is equally shared by parents and the type of teaching method all affect the child's behavioural intentions, including his social and emotional development as well as his nutrition habits, which will be discussed within the framework of the present study.

Many studies reveal that individuals having eating disorders come from families where their emotional, physical and spiritual needs are not met. In this type of families, relations are restricted, emotions are not expressed and mostly the mother determines the emotional relations, whereas the father performs only the role of providing family income. Moreover, certain problems such as eating disorders (going on a continuous diet and the like), drug addiction, alcoholism and depression may be observed in the history of family (Hall and Cohn 1992: 22-24).

On the other hand, some scientists believe that there is no a single type of family or interaction style which can be combined with this disease. The following points are also observed in families having eating disorders: Adaptation problems are seen frequently. Not every problem can be expressed, they are intended to be hidden under the cover term, over-politeness. Although pleasure is seen at the surface, disappointments are reflected in terms of status and occupation but real feelings are kept as secrets. The idea of sacrificing oneself for other family members is widely accepted. A hidden alienation between the child and the parents is seen under the image of harmony. Over-protectiveness, strictness, over-standing as a protector of the other family members, not being able to express and solve conflicts, weak communication, over-criticizing are observed in this type of families (Moorey 1991, Ackard and Sztoimer 2001). So, a one-to-one correlative interaction between the above-mentioned types of authority and nutrition disorder should not be expected. In terms of general definitions, details within the relations pose difficulties in the definition of the problems. Nutrition habits and intentions within the family may be the sources of the development of nutrition disorder.

While parents may be a role model with their behaviours as they control their own

weight, they may directly affect their children's eating habits negatively or positively by using positive or negative reinforcements. For example, according to a research carried out in New Zealand, it was found out that 18% of young people were encouraged to go on a diet by their families (Ackard and Sztainer 2001). Unhealthy nutrition habits such as going on a diet, vomiting, using dietetic tablets and fasting are also encouraged by the effect of culture through the mediation of some families. According to another study, -mostly mothers interfere in their children's choices of food, whereas fathers interfere -mostly in the amount of dessert or oil in the food eaten by the child (Ackard and Sztainer 2001). It is again mostly the mothers who support the idea that being slim is an important asset for a woman (Hall and Cohn 1992:22-24). In other words, the effect of families on nutrition or weight control may be either negative or positive.

A limited number of studies emphasizes the potential effect of the family's eating patterns. Another study focuses on the relation between nutrition disorder and the type of the family meals during the early childhood. It was also found out that the mealtimes of bulimics was more stressful and quarrelsome. Weight control and dieting are highly emphasized in this type of families. A greater amount of food is also used as a means of rewarding and punishment. In other words, the early period, when the child first meets with food, may be the first signal of the negative relation with nutrition disorder. In this context, the frequency of family meals might be thought as an effective factor in the development of nutrition disorder. Studies emphasize the importance of the frequency of family meals eaten with all family members. With the increase in this frequency, a decrease in the bulimic behaviour has been recorded. A family atmosphere encouraging freedom and harmony is thought to be quite effective on the subject.

Moreover, the family, in a sense, is the owner and conveyor of the culture. It is a kind of mediator between the child and the society. In this context, Palazolli and Bruch emphasize the stress which is lived within family depending on the change in the status and the role of woman (Moorey 1991:56).

Eating disorders such as bulimia and anorexia may be discussed as the reflections of great pressure on women to make the others pleased and to make their self values valid by controlling their own physical appearances. This pressure is also related with the application process of role models which are required both by male-dominant world of occupations, and the roles prescribed for girls within the family. Today, women have to meet the requirements of both their professions and womanhood roles. In this context, the behaviour of nutrition disorder may be evaluated as the extreme point of the reaction against this kind of role conflicts (Moorey 1991:41).

Some families continuously produce this tension. They both require their daughters to have an academic priority in terms of 'success' and to perform traditional roles which women are generally expected to perform (Moorey 1991:57).

In conclusion, this type of families is chromosomes of patriarchal society and in these families, the position of women is characterised together with the position of women in male-dominant society. In this sense, nutrition disorders may be thought as a kind of 'protesting' movement against gender expectations by using woman's body (Moorey 1991:58). The emphasized relationship here between gender and nutrition disorders was examined in the previous study.

In families where anorexia and bulimia are seen, the intention of seeing their children as 'ideal' children is frequently found (Hall and Cohn 1992:22-24). In this frame, many researches may be said to emphasize especially the family-child relation within the family. However, an increase in developmental problems underlying anorexia nervosa especially in a certain form of mother-child relation is defined. This type of mothers is over-anxious and they continuously deal with their children's health. An extreme appreciation of their children is generally combined with the high level of expectations (Moorey 1991:52). Children in this structure are forced to be good, admirable, self-confident and seemingly free (Hall and Cohn 1992:24) of mo

Mothers of these children think and make decisions instead of their children. So these children are faced with serious problems in their personal autonomy. They become dependent being conditioned with the idea that 'my mother knows the best'. As a matter of fact, patients frequently indicate that they feel as if they are forced to lead another person's life. These individuals cannot develop and perform adulthood roles in their adolescence period just because of their mothers' over-protectiveness (Thomsen et al., 2001).

The focus of this study is the role system of the family, especially of mother and father in the process in which the individual becomes anorexia nervosa or bulimia nervosa patient. In this context, the aim is to show that factors which are effective in this process ending with these diseases are formed unconsciously most of the time in family atmosphere and if they are triggered by another factor, they reach at the highest point. However, it is not possible to say that these factors would always end up with these diseases in every individual. But determining the level of these risks in the family atmosphere is thought to be an important contribution to the understanding and prevention of these diseases.

3. Method Of The Research

Since the basic aim of this study is to determine the sociological risk factors effective in the process leading to nutrition disorders, the sample group of the study consists of the basic risk groups such as adolescents, young adults at university and patients suffering from these diseases. Within the frame of this study, only anorexia nervosa and bulimia nervosa, which are contemporary problems in terms of nutrition disorders, are focused on.

The sampling group of adolescents as a risk group has been selected from the % grade students at Beytepe primary school at Hacettepe University. The sampling group of the university students has been selected from the students of the Faculty of Letters and the School of Economics and Management at Hacettepe University and from the students of the School of Economics and Management at Başkent University.

87 8th grade students out of a total of 180 enrolled students in 2001-2002 academic year, 356 students out of 8301 students at the Faculty of Letters and the School of Economics and Management at Hacettepe University and 100 students out of 700 students at the School of Economics and Management at Başkent University participated in this study. In the evaluation process of questionnaires applied to primary school and university students, only 443 questionnaires were found appropriate for evaluation.

The most difficult part of the research was to get in touch with patients. In the sampling group for Ankara, as a result of correspondences made with Gazi University Hospital, Numune Hospital, Ankara Higher Specialisation Hospital, Ankara Social Security Hospital, İbn-i Sina Hospital of Ankara University, Başkent Hospital, Bayındır Hospital and Güven Hospital, it was found out that there was either no application to hospitals with this disease or there was not a psychiatry service of the hospital, or in some cases, researches were not allowed due to the private psychological conditions of patients. Most probably, suffering individuals did not accept themselves as patients. At the preparation stage of the research when getting permission from the hospitals was needed, it was seen that there had been limited application. Since it was a widespread behaviour, going on a diet was accepted as a very ordinary and usual type of behaviour but it was later thought that it had a risk of turning into a disease when continued seriously for a long time. In consequence, the research had to be limited with four patients treated at the Psychiatry Service of Hacettepe University Hospital. A questionnaire including sociological variables indicated in the literature was applied to this sampling group consisting of four patients. Interviews with them were also made. Among these sociological variables, structure of the family, relations within the family, type of authority within family and the roles of parents were studied.

The questionnaire for primary school students included 70 questions. The one for university students and patients had 71 questions, which consisted of close- and open-ended question types. The relationships between the variables mentioned below were tested:

- Parents set a model for the behaviour of weight control.
- Mothers warn their daughters, rather than their sons, of going on a diet.

- The frequency of weight problem is high among the children of families in which coercive authority is exerted.
- The level of dieting behaviour is high among the children of families in which mostly mothers take disciplinary actions.
- The more mothers give emotional support, the higher level of dieting behaviour is observed, particularly among girls.
- The more frequently family members have their meals together, the less children have a weight problem.

4. Findings

In this part of the study, the frequency distribution of nutrition patterns of patients, primary school and university students and relations among variables are analysed.

4.1. Patients

Considering nutrition disorder and family structure, findings about 4 anorexia nervosa patients treated in the service of psychiatry are as follows:

All of the women patients are between 20-24 years of age. Two of them were born in big cities, one of them in a city and one of them in a county. One of these patients is divorced and the other three are single. Three patients are university graduates and one of them is a high school graduate. Two of them have occupations (one of them is a nurse, the other is a businesswoman), one of them is a student and the other is unemployed. The mothers of three patients are primary school graduates; the mother of one patient is a high school graduate. The fathers of two patients graduated from high school, one of them from secondary school and the other from primary school. The mothers of three patients are housewives; the other's mother deals with trade as an occupation.

The monthly income of one of the families is between 250 and 500 million TL., whereas the income of two families is between 750 million and 1 billion TL., the income of the other's family is above 2 billion TL per month. Only one of the patients has a rent income besides her regular monthly income. Houses of three patients belong to their families. The other lives in a rental house. Houses of two patients are flat, the house of one patient is a squatter's house and the other's is a duplex. Houses of two patients are heated by stove, the other two patients' houses by central heating system.

The structural features of the patients' families can be summarised as follows: One of the patients lives together only with her parents, two of them with their parents and brothers and sisters, the other with her mother and elder brother. One of the

patients comes from a broken family, the other three from nuclear families. Two of the patients are the youngest children of their families, two of them have elders and younger. While growing up, three patients reported that their mothers made decisions about them. One patient indicated that since her father had died, she made decisions together with her mother.

In their growing up period, it was found out that parents of two patients took disciplinary actions together, the mother for one patient, and the father for the other. Three of the patients defined their parents as pleasantly harsh and egalitarian, the other patient defined her mother as pleasantly harsh and her father as coercive.

Considering unapproved behaviours, all of the patients reported that their mothers warned them orally most of the time, or they scolded them even though they did not use punishment or violence.

Four of the patients indicated that they were just warned by their fathers who actually did not react negatively when the patients had unapproved behaviours.

Regarding responsibilities of their parents at home, only the mothers are found to have carried on the responsibilities of cleaning, washing dishes and doing the laundry. While parents of three patients carried on the responsibilities of raising child together, only the mother of one patient carried this responsibility on her own.

In terms of helping the patients with their homework while they were going to the school, parents of three patients took the responsibility together.

Parents of four patients carried on responsibilities together while dealing with their children's problems.

When the relationship between parents was examined, parents of two patients were reported to be getting along well with each other, parents of the other two quarrelled frequently, but made peace immediately after the quarrel.

All of the patients reported that their parents shared their problems with them and also with each other.

Three of the patients stated that they shared their own problems with their mothers. One of them reported that she shared her problems with her brothers or sisters. One of the patients whose father had died stated that she wanted to resemble her father, two of them their mothers, one of them both her mother and father.

Three of the patients said that while growing up, they spent most of their time with their mothers, while one of them did not.

Two of the patients defined their weights as normal, one of them as slim, whereas the other as over-weight when they were between 11-14 years of age. Her peers heavily affected the patient who said that she was over-weight between these ages.

Although all of the patients are extremely slim now in terms of their height and weight, two of them consider themselves normal and the other two slim. Three of the patients are still anxious about their bodies and weights. However, these three patients reported that they did not see parts of their bodies as fat, only one patient complained about her belly.

Three of the patients stated that they wanted to resemble very slim people in terms of weight and body image, the other one wished to resemble people with normal weight. On the other hand, all of them idealise men at normal weight. Two of the patients reported that they were warned by their mothers and friends to diet, only one of them said that she was warned only by her friends and her boy friend.

In sum, all of the patients are women between the ages of 20 and 24, having higher education. They come from nuclear families living in cities and having a moderate level socio-economic background. There has been pleasantly harsh and egalitarianistic type of authority in their families. However, although their families seemed to have a mixed model, traditional household responsibilities were carried by their mothers, on the other hand, problems of the children were shared by both parents together. Nonetheless, the patients generally shared their problems with their mothers and spent most of their time with them.

42. One Way Frequency Distribution Of Primary School And University Students

42.1. Demographic/Socio-economic features of the sampling group:

44% of the 8th grade students participating in the research are girls and 42% are boys. 59.3% of the university students are females, whereas 40.7% are males.

Regarding their places of birth, 74.0% of the primary school students were born in big cities, 18.7% in cities, 5.3% in counties, 1.3% abroad. There is no student born in a village. 86.7% of them were raised in big cities until the time of their present age. In this situation, it may be thought that urban values have an effect on making students adapting to these values or adapting themselves to these values.

Among university students, 51.7% were born in one of the three big cities (Ankara, Istanbul, İzmir). 28.9% were born in other cities, 13.5% were born in counties. 56.2% of them lived in one of the three big cities during most of their lives. This ratio is followed by 29.2% of the students who lived in other cities most of the time. The lowest ratio, 0.3%, is of the students who lived in villages. In both groups, it is seen that most of the students were born and raised in three big cities.

Regarding their families' monthly income, 29.3% have an income between 750-999 million TL., 28% between 1 and 1,499 billion TL., 16% between 1,5 and 1,999 billion

TL. and 12% 2 billion TL. and the above. 9.3% of the students have income between 500 and 749 billion TL. 4% of the students marked the answer 'I don't know' for family monthly income. 1.3% did not respond this question at all.

To the question 'whether their families have another income besides their regular monthly income', 20% of the primary school students gave the answer 'no', 21,3% 'rent income', 12% 'income gathered from currency', 10.7% from 'stock share - bond', and 5.3% from 'interest', and 5.3% from 'gold and jewellery'.

74.7% of the primary school students' families are house owners, 17.7% live in a rental house, 6.7% in a residence house, 51.3% in a house of their relatives without paying rent. 76% of the students' families stay at flat, 24% at dublex-triplex house. 24.5% of the students live at a higher socio-economic level district, 38.5% at moderate socio-economic level district, whereas 29.2% at low socio-economic level district. According to these results, the socio-economic level of the primary school students is said to be mid-high level.

When the distribution of monthly income of the university students' families is considered, the highest ratio (18.8%) is of families having income between 750 and 999 million TL. It is followed by 18.3% of families having income between 500 and 745 million TL. The ratio of families whose monthly income is 2 billion TL and the above is 16.3%. The ratio of families having an income between 1.5 and 1.999 billion TL. is 7.6%. The ratio of families whose income is between 160 million and 249 million TL is 4.8%. The lowest ratio in this distribution belongs to families having an income lower than 160 million TL (3.1%).

The ratio of families who have another income besides their monthly income is 34.8% with a rent income. The lowest ratio among other incomes belongs to families having income gathered from gold (1.4%). When the two sampling groups are compared, most of the students come from families having middle (mid-low, mid-high) "xvel of income. Lower and higher level of income categories are relatively at a lower ratio.

77.2% of the university students provide their pocket money from their families. The -atio of the university students indicating that they make their own money is 2,2%. The lowest ratio belongs to university students whose needs are provided by their relatives 0,8%). In this case, the ratio of families whose child does not need to work seems to be ligh.

Considering the educational level of the mothers, 50.7% of the primary school students' mothers graduated from university, 24.0% from high school, 6.8% from secondary school. 17,6% have master's or doctorate degrees. 49,3% of the primary school students' fathers graduated from university, 22,6% from high school, 2,6% from primary school. 24.0% of the fathers have master's or doctorate degrees.

The distribution of educational levels of the university students' parents is as follows: 36,9% of the mothers graduated from high school, and 34,6% from university. The lowest ratio, 0,8%, belongs to the mothers who could not complete primary school education. When the distribution of educational levels of infion of educational levels of infns group is examined, it is seen that 49.7% graduated from university, 24,4% from high school. The lowest ratio, 0.3%, is of illiterate fathers.

Mothers' educational levels of the students in the adolescent group consist of university graduates and high school graduates successively. On the contrary, the mothers of the university students are mostly high school graduates. In both groups, it may be said that the educational level of the mothers is high. The fathers of the students in both groups are university graduates. Then, high school graduate fathers come. In this sense, it may also be stated that the educational level of the fathers is considerably high.

In sum, the sampling groups of this study come from higher educated, urban, middle-class families.

422. Features of family structures of the sampling groups: Exerting authority, rearing child and sharing responsibilities in family

According to the answers of the primary school students, 91.9% come from nuclear families, 8% from large families. 25.3% do not have a brother or sister, 60% have two brothers or sisters, 14,6% have 3 or 4 brothers or sisters. 48% are the first child of their families, 17.3% the youngest child of their families. 9.3% have elders and younger. In general sense, the structure of the students' families in this sampling group is nuclear family type.

43.6% of the university students have 3 members in their families, 24.4% have 4. The ratio of the students having 6 or more members in their families is the lowest (3.7%). Similarly, it might be said that most of the university students have nuclear families.

Among university students, the ratio of the students who have two sisters or brothers is the highest (57.6%). It is followed by the ratio of the students (18%) having 3 sisters or brothers. 11% are the single child of their families. The lowest ratio, 1.1%, belongs to students who have 5 brothers or sisters. 45.1% of the university students are the first children in their families, 34.8% the youngest children. 13.5% have elders or younger.

58.1% of the primary school students reported that decisions about them were made by themselves and their parents. 18.9% said that their parents together made decisions, 8% indicated that only their fathers made decisions, 6.7% stated that only their mothers decided on matters related to them. Considering by whom decisions about child were made in family during growing up period, 47.5% of the university students and their

parents made decisions together. 30.1% of parents together made decisions. In the university students group, the ratio of other family members such as grandfather and elder sister making decisions about child is 0.6%. As a result of these findings, related to the values given to child, parents reveal an egalitarianistic approach. The higher educational level of parents and their urban origin might be said to be effective on these results.

For primary school students, 41.3% of the students' parents make decisions about family matters together, 33.3% indicated that they themselves made decisions with their parents. When these two ratios are combined (74.6%), egalitarianistic and shareful approach is said to be widely spread in the family.

56% of the primary school students indicated that their parents together took disciplinary actions. Only father took disciplinary actions for 17.3%, and only mother took them for 12% of the students. 12% reported that they were not interfered by anybody.

In terms of making decisions on family matters, the ratio of the university students who said that their parents gave decisions together is the highest (47.2%). The ratio of the ones who said that their parents and themselves made decisions altogether is 19.9%. When these two ratios are combined (67.1%), it is seen that an egalitarianistic and shared approach is widespread. For the question "by whom were disciplinary actions taken?", 49.7% of the university students indicated that their parents took disciplinary actions together. The ratio of the students whose mothers took disciplinary actions is 21.1%, while the ratio of the students whose fathers took disciplinary actions is 15.2%. 14.4% indicated that they were left totally free.

In terms of mother's approach to child, 72% of the primary school students defined it as pleasantly harsh and egalitarianistic. This definition marks a ratio of 64% for their fathers' approach. 13.32% of the students indicated that both their mothers and fathers were coercive and authoritative. They interfered in everything. 14.7% reported that their fathers left them free and did not interfere in anything about them.

Mother's approach for university students can be evaluated as follows; 80.1% said that their mothers were pleasantly harsh and egalitarian. The ratios of the students who reported that their mothers were coercive and authoritative and who reported that their mothers left them free are equal (0.3% for each). The ratio of pleasantly harsh fathers is the highest in the distribution (65.7%). The ratio of the fathers who left their children free is 15.7%. The lowest ratio belongs to coercive-authoritative fathers (13.8%).

Regarding making decisions and taking disciplinary actions in the family, the majority of mothers and fathers of two sampling group students has egalitarianistic and pleasantly harsh understanding.

In terms of explaining the reason for a requirement by parents, 84% of the primary school students reported that their mothers did so, and 80% indicated that their fathers explained the reason. For university student group, 90.7% reported that their mothers and 76.8% of their fathers explained the reason for a requirement.

Regarding unapproved behaviours, 89.4% primary school students said that they were warned by their mothers orally, 50.6% of their mothers preferred not to talk to them and asked them to apologise, 9.3% of their mothers deprived them of food that they loved the most, 13.4% did not let them go out from their rooms, 17.3% did not allow them to see friends, 21.4% did not allow them to go to the cinema, 21.4% cut their pocket money, 53.4% scolded them, 13.3% hit them, 4.6% applied physical violence.

Regarding unapproved behaviours, 34.6% primary school students said that they were warned by their fathers orally, 23.4% of their mothers did not talk to them and asked them to apologise, 4% of their fathers deprived them of food that they loved the most, 4% did not let them go out from their rooms, 14.7% did not allow them to see friends, 18.6% did not allow them to go to the cinema, 8% cut their pocket money, 36% scolded them, 16% hit them, 1.3% applied physical violence.

For the university students, the ratio of the students saying that they were warned by their mothers orally in terms of their unapproved behaviours is the highest (86%). The ratio of the students whose mothers preferred not to talk to them is 15%. The ratio of the mothers depriving them of the food they like the most is 4.2%. The ratio of the mothers not letting them go out from the room is 3.4%. The ratio of the mothers not letting them see their friends is 15.2%. The ratio of the mothers cutting down their pocket money is 12.9%. The ratio of the mothers scolding and crying at them is 59.3%, the ratio of the mothers hitting their children is 9.8%, and the ratio of the mothers applying physical violence is 2.6%.

For the university students, the ratio of the students saying that they were warned by their fathers orally in terms of their unapproved behaviours is the highest (91%). The ratio of the students whose fathers preferred not to talk to them is 34%. The ratio of the fathers depriving them of the food they like the most is 2.3%. The ratio of the fathers not letting them go out from the room is 2.5%. The ratio of the fathers not letting them see their friends is 12%. The ratio of the fathers cutting down their pocket money is 11.6%. The ratio of the fathers scolding and crying at them is 43.6%, the ratio of the fathers hitting their children is 10.9%, and the ratio of the fathers applying physical violence is 2.7%.

According to these results, sources of punishment techniques (warning orally, scolding) used by parents of two sampling groups are their egalitarianistic family structure, their higher educational level and urban origin. Within the same context, the

source of this evaluation is mostly the conscious authority exerted by parents, in other words, their choices in using positive persuasion techniques in case of unapproved behaviours.

Considering the responsibility shared in the family, 65.3% of the primary school students' mothers carry on cleaning and 61% cooking, 72% washing dishes, 77,3% of doing the laundry. 84% of their fathers deal with repairs at home. 72% of their parents go out for shopping together. 53% of parents carry on together the responsibility of rearing children, whereas 34.7% of their mother carry this responsibility on their own. In terms of helping homework, 32% of their fathers and 49.3% of parents together carry this responsibility. 78.7% of parents together deal with problems about their children.

For university students, regarding responsibility shared at home, mostly the mothers clean the house (86%), cook (81.8%), wash dishes (86.2%), and do the laundry (92,7%). The fathers mostly deal with repairs at home. Parents together (65.4%) do shopping. Generally the mothers (472%) carry on the responsibility of rearing children but the ratio of sharing responsibility in rearing children is considerably high (46,1%). Parents together help their children with homework (42,7). The ratio of student saying that only their mothers help with their homework is 21,6%, whereas the ratio of the ones who said their fathers help with their homework is 163%- The ratio of parents dealing with their children's problems together is the highest (73,6%).

According to these results, although it is possible to say that families of two sampling groups try to share the responsibility at home, household responsibilities such as cleaning, cooking, washing dishes, doing the laundry belong mostly to women, that is the mothers; whereas repairs at home are done by the fathers. Although parents together do shopping, a traditional role distribution can still be recognised. However, it can be said that family has a sharing attitude in terms of the matters about their children.

64% of the primary school students' parents get along well with each other, 22,7% quarrel with each other frequently but make peace immediately after the quarrel, 6,7% do not interfere with each other as they seem to live in different worlds, 5,3% always quarrel with each other and do not talk to each other for a long time. The ratio of the students saying that their parents share their problems and experiences with each other is 80%. The ratio of the students indicating that their parents do not share their problems with each other is 133%- The ratio of mothers sharing their problems with their children is 81,3% and of the fathers is 70,6%.

Among university students group, the highest ratio (55.3%) belongs to parents getting along well with each other. The ratio of parents quarrelling frequently but making peace immediately after the quarrel is 27.5%. The lowest ratio (4.8%) belongs to parents not interfering with each other as seemingly living in different worlds. The

ratio of the students stating that their parents share their problems and experiences with each other is 67,7%. 15,7% of the students indicated that their mothers shared their problems but their fathers did not. The ratio of the students saying that both of the parents do not share their problems at all is 8.4%. The lowest ratio (1,1%) belongs to students indicating that their fathers share their problems but not their mothers. 74,7% of the students stated that their mothers shared their problems with their children, where as 38,8% of the students indicated that their fathers shared their problems with them.

In both sampling groups, parents tend to share their problems with each other and with their children. However, the mothers are more open to share their problems, rather than the fathers.

21.3% of the primary school students indicated that they shared problems about themselves with their parents together, 18,7% with their mothers, 17,3% with their friends. Sharing problems with father is very low among primary school students (2.7%). The ratio of the university students sharing problems about themselves with their mothers is the highest (49.7%). The ratio of the students sharing their problems with their fathers is 5.7%. 26,4% indicated that they did not share their problems with neither their mothers nor with their fathers.

Considering personality, primary school students wish to resemble mostly their fathers with the ratio of 22,7%, 10,7% their mothers, 10,7% both their mothers and fathers, whereas 4% wish to resemble their close relatives such as their uncles.

Among university students, the highest ratio (30.6%) belongs to the ones saying that they wish to resemble mostly themselves in terms of personality. It is 24.3% for students wishing to resemble their fathers, 15% their mothers, 15,9% both their mothers and fathers. As a result, both sampling groups tend to take primarily their parents as a role model.

61,3% of the primary school students spend their time mostly with their parents whereas 27,7% with their mothers. Among university students, the highest ratio (49,7%) belongs to students spending time mostly with their mothers during the growing up period, The ratio of the students spending time with both of parents is 37,9%. The lowest ratio in the distribution (4,5%) is of the students spending time only with their fathers. So, it is found out that students in both groups spend their time mostly with their mothers.

3.2.3. Weight problem and weight control in the sampling groups.

45,2% of the last grade primary school students have weight problems. 34,7% diet. Within this ratio, 18.1% sometimes diet, 6,9% said that they could not be successful although having gone on a diet before, 5,6% indicated that they had gone on a diet previously. 2,8% diet frequently and 1,4% diet continuously.

31,5% of the primary school students having weight problem apply a dietetic method. 11,9% limit the amount of food, 10,2% do exercise continuously, 6,8% use dietetic products and 1,7% use dietetic tablets.

57,2% of the university students have weight problem. 42,8% indicated that they did not have any problem about their weights. 57,2% have gone on a diet at different periods in their lives. 16,8% of the students who are considered as the basic risk group in terms of the present study diet continuously. 49,8% of the university students sometimes diet. However, 5% diet continuously. In this ratio, when the gender distribution is taken into consideration, mostly males do not diet (66,7% of males and 31,5% of females do not diet). The ratio of the students sometimes going on a diet is higher among females (31,2% of males and 61,3% of females sometimes diet). A similar case is also valid for students going on a diet frequently. Their ratios are 7,2 for females and 2,1% for males.

Limiting the amount of food is the most commonly used method among students to control weight. The most outstanding ratio of the students applying this method especially by eating almost anything is 12%. 42% use dietetic products, 60,5% laxative drugs, whereas 0,5% use dietetics tablets. 0,7% try vomiting consciously. In this case, the main risk group with a ratio of 7% in total consists of the students using laxative drugs, dietetic products and vomiting voluntarily and students eating almost anything.

55,1% of the primary school students indicated that they did not receive any warning about going on a diet from their environment, whereas 12,4% received warning from their mothers, 10,1% from their friends, 9% from their fathers and 9% from their flirts, 5,9% from other members of their families. 16% of the university students are warned about going on a diet by their mothers, 15,3% by their friends, 7,9% by other family members, 6,5% by their fathers, and 6% by their flirts.

16% of the primary school students indicated that they learned behaviour of going on a diet from their families, 6,7% from friends, 4% from media. 17,7% of the university students learned these behaviours from their friends, 13,2% from their families, and 12,4% from media, 10,1% learned to diet under doctor control. According to these findings, students may be said to be more sensitive to the behaviour of going on a diet in the transition period from adolescence to youth.

86,7% of the primary school students believe that they can solve weight problem by doing exercise, 32% by swimming and playing tennis, 28% by swimming, running, doing gymnastic and aerobic sports, 15% by playing basketball, badminton, handball, boxing and riding bicycle. 13,3% by playing football. 42% of the students believing that they can lose weight by doing exercise do exercise two or three times a week, 24% everyday, 14,7% four or five times a week, and 13,3% one time a week. 36% of the primary school students believing that they can lose weight by doing exercise do

exercise two hours a day, 26,7% one hour a day, 24% three or five hours a day and 8% five hours or more a day.

87% of the university students believe that they can lose weight by doing exercise. In this context, types of exercise done mostly are walking (33,3%), swimming-playing tennis (18,1%), aerobic (16,3%) and running (16%). The majority of the students, 44,1%, indicated that they did exercise two or three times a week, whereas 28,8% one time a week, 13,9% everyday in a week, 13,2% four or five times a week. More than half of the students (58,6%) do exercise one hour a day, 32,1% two hours a day, 8,6% three hours a day, and 0,7% five hours and more a day.

5. Analysis Of Relations Among Variables In Primary School And University Student Groups

Findings about the family structure and nutrition disorder in the sampling groups will be examined in this part of the study.

As the educational level of the university students' mothers increases, the ratio of doing house cleaning together with spouse also increases. While 16,1% of the mothers having university, master's or doctorate degree clean house together with their husbands, this ratio decreases to 14,1% among high school graduate mothers and to 3,2% among secondary school graduate mothers. The relation between the educational level of the mothers and sharing the responsibility of cleaning house which is one of household responsibilities, is found statistically significant (Chi-Square = 9.669, $P < 0,05$). In spite of this result, women mostly carry on the responsibility of cleaning house. This ratio is 96,8% among secondary school graduate mothers, 85,9% among high school graduate mothers and 83,9% among women having university, master's or doctorate degree. The relation between these variables is not found significant among primary school graduate women.

Among university students, the higher the educational level of the mothers is, the higher the ratio of sharing responsibility of rearing child with the fathers is. 57,1% of the mothers having university, master's or doctorate degree share the responsibility in rearing their children with their husbands. 52,4% of high school graduate mothers, 37,4% of secondary school graduate mothers share this responsibility with their husbands. As the educational background of the mother increases, her responsibility in rearing children considerably decreases. On the other hand, 62,6% of secondary school graduate mothers, 47,6% of high school graduate mothers and 42,9% of the mothers having university, master's or doctorate degree still carry on the responsibility in rearing children by themselves. The relation between these variables is found significant (Chi-Square=8.532, $P < 0.05$). On the other hand, this relation in the primary school student group is not found significant.

As the educational level of the university students' fathers increases, the ratio of going out for shopping together with spouse, which is one of household responsibilities, also increases. 80,8% of the fathers having university, master's or doctorate degree go out for shopping with their wives. This ratio is 72,9% among high school graduate fathers, 56,5% among secondary school graduate fathers.

As the educational level of the mothers increases, the ratio of shopping alone decreases. 43,5% of secondary school graduate mothers, 27,1% of high school graduate mothers and 19,2% of the mothers having university, master's or doctorate degree go out for shopping alone. The fathers do not take the responsibility of shopping alone. They either turn it over to their wives or share it with them. The relationship between variables is significant (Chi-Square = 12,607, $P<0,05$). On the other hand, this relation is not significant for the primary school students.

As the educational level of the university students' fathers increases, the ratio of sharing the responsibility in rearing children with the mothers also increases. 56,6% of the fathers having university, master's or doctorate degree, 45,8% of high school graduate fathers and 28,9% of secondary school graduate fathers carry on the responsibility in rearing children together with their wives. The relation between the educational level of the fathers and sharing the responsibility in rearing children with their wives is found significant (Chi-Square = 12,166, $P<0,05$), whereas it is found insignificant for the primary school student group.

When helping children with their homework is concerned, as the educational level of the university students' fathers increases, the ratio of parents' helping children with their homework, which is one of the family responsibilities, also increases (48,1% of secondary school graduate fathers, 71,4% of high school graduate fathers and 77,9% of the fathers having university, master's or doctorate degree help their children with their homework). The relation between these variables is significant (Chi-Square = 11,074, $P<0,05$). The point attracting attention is that the fathers do not carry on this responsibility alone, instead, they either totally turn it over to the mothers, or share it with the mothers. This relationship is not significant for primary school students.

The results of the analysis of the relation between parents and child in terms of weight control are as follows;

For primary school student group, the mothers control continuously their daughters' weights and warn them when there is a change in their weights. There is a significant relation between the mothers' controlling weight and the gender of the child (Chi-Square = 9,387, $P<0,05$) The mothers control their daughters' weight (63%) more than they do their sons' weight (28,9%).

Regarding the relation between university students' gender and behaviours of the

mothers about controlling their weights, 59,2% of the mothers of female students control their daughters' weights and warn them when there is a remarkable change in their weights. This ratio for sons is 35,1%. There is a significant relation between gender of the students and the weight control made by their mothers (Chi-Square = 19.092, $P < 0,05$).

According to these results, mostly university student females are warned and controlled by their mothers.

Among primary school students, there is a significant relation between gender and the person whom they want to resemble. Mostly girls (21,9) want to resemble their mothers, boys (47,1) wish to resemble their fathers (Chi-Square = 18,898, $P < 0,05$).

Among university students, when the relation between gender and the person whom they want to resemble in terms of personality is examined, 21% of females wish to resemble their mothers, 31,4% of males their fathers. 41% of female students and 50% of male students marked the answer indicating that they want to resemble other close relatives such as aunt, uncle or a famous person.

According to this result, relatives rather than people at immediate environment are thought to have set a model for these students. However, since girls take their mothers and boys their fathers as a model, the relation between these two variables has been found significant (Chi-square = 18,515, $P < 0,05$) These results show that the range of role models includes also other people in the transition period from adolescence to adulthood, rather than restricted by only parents.

Another important indicator in the formation of a role model by parents which is important in the context of the present study is the behaviour of going on a diet, which also relates to parents' control of their own weights. The findings related to this concept can be summarised as follows; 15,4% of the mothers of the students having a weight problem diet continuously to control their weights, 61,5% of the mothers diet when they put on weight, 23,1% of the mothers tried to diet but did not succeed losing weight. Moreover, 33,3% of the fathers of the students having a weight problem diet continuously, 44,4% of the fathers diet when they put on weight, 22,2% of them tried to diet but failed. A similar case is also valid for brothers and sisters. While 20% of brothers or sisters of the primary school students having weight problem diet continuously, 60% sometimes diet (when they put on weight). 20% tried to diet rarely but could not succeed to lose weight. As a result, the behaviour of going on a diet and 'weight control' are seen all the time in family environment of the students having weight problem.

Similar results are figured out also for the university students. 13% of the mothers of the university students having weight problem diet continuously and 66% sometimes

when they put on weight. 21% diet rarely but failed. Their fathers reveal same patterns as well. 18,8% of the fathers diet continuously, 56,3% sometimes when they put on weight. 25% tried going on a diet time to time but failed. Similarly, 20.8% of their brothers or sisters diet continuously, 56,6% sometimes when they put on weight. 22,6% tried going on a diet but failed. This case shows us that weight control is a problem in the family environment of all students indicating their weight problems.

There is a parallelism between the methods used by university students and by their parents in weight control. In terms of the methods used by both parents in weight control, the first category consists of parents going on a diet on their own (71.9% of the mothers, 57,7% of the fathers), the second category involves parents using dietetic products (11,8% of the mothers and 8,7% of the fathers) and the third category includes parents doing exercise (12,3% of the mothers and 26,2% of the fathers). According to these results, while the ratio of the mothers going on a diet on their own is higher than the ratio of the fathers, the ratio of the fathers trying to solve their weight problems by doing exercise is higher than the ratio of the mothers. The methods which university students prefer to solve their weight problems overlap with their parents' methods. 58% of the university students limit the amount of food on their own, 29,4% do exercise and 7,4% use dietetic products. A similar case is also valid for their brothers or sisters. (59,7% diet on their own, 22,4% do exercise and 9.7% use dietetic products). These findings reveal that parents are also a role model for children in weight control. Moreover another important point is that the ratio of people going on a diet on their own, using dietetic products is high, when it is remembered that unconscious and long diets are an important factor in the process towards nutrition disorder and diseases of anorexia and bulimia nevrosa.

The analysis of relations among weight problem and the disciplinary actions taken by parents, making decisions, self-perception, sharing problems in the sampling groups can be summarised as follows:

Whether mother or father takes disciplinary actions does not reveal differences in terms of gender among primary school students. Mother and father together take disciplinary actions for both gender (57.6% for girls, 54,8% for boys). Only 152% of the mothers take these actions only for their daughters and 9,5% only for sons; 12,1% of the fathers only for daughters and 21,4% of the fathers only for sons. As a result, the mothers apply disciplinary rules for mostly their daughters and fathers do mostly for their sons.

For university students, the relation between these two variables is found significant. Both parents take disciplinary actions together not regarding gender difference (53.8% for females and 453% for males). However, when the mothers and the fathers are

compared, the mothers apply disciplinary rules for mostly daughters (24%), the fathers for sons (20,3%) (Chi-Square =10,162, $p < 0.05$).

When the relation between university students' real weights and by whom disciplinary actions during the growing up period were taken is examined, the parents' behaviour of taking disciplinary actions together inclines towards a decrease in the transition period from being slim to being over-weight. Parents together apply disciplinary rules to the 72.7% of the students who are slim, to the 48.3% of the students who are at normal weight, and to the 43,9% who are over-weight. In these three categories, the second category consists of the students whose only mothers take disciplinary actions. Similarly, the more the child puts on weight, the more his mother increases her control (by taking disciplinary actions) over the child. Only the mothers apply rules to the 15.9% of the students who are slim, to the 21.1% who have normal weight and 242% who are over-weight. A relation between real weights of the primary school students and their parents' taking disciplinary actions could not be found.

When the relation between university students' behaviour of going on a diet and by whom disciplinary actions were taken during the growing up period is examined, 49.1% of the university students diet to control their weights. When the answers for the question, 'by whom disciplinary actions were taken during the growing up period' is examined, the first category consists of the students (52.8%) whose parents together took disciplinary actions. The second category involves students (21%) whose only mothers took these actions, and the third category includes students (14.8%) whose only fathers took these actions. In this case, it may be said that mostly the mothers take disciplinary actions for students going on a diet. The fourth category consists of the students who are left free with the ratio of 8,5%. According to these results, as parents apply disciplinary rules more, the child's behaviour of going on a diet increases more. A significant relation between above-mentioned variables could not be found among primary school students.

Among primary school students, when the relation between the authority type of the mothers (her disciplinary application) and child's behaviour of going on a diet is examined, the highest ratio belongs to the children of the mothers letting them free (50%). The children of the mothers using conscious authority make up the second category (33.3%). The children of the mothers using coercive authority make up the third category among the students going on a diet (30%). In terms of these results, a tendency towards going on a diet at adolescence period is seen frequently among children to whom disciplinary actions are not applied. This case emerges from the fact that the child's control on his own body depends on parents' attitude at adolescence period as well. On the other hand, the disciplinary method used by the fathers does not

create a difference in the child's behaviours of dieting. This result emphasizes the mother's effect.

When the relation between the mother's application of disciplinary rules and the university students' behaviour of going on a diet is examined, there is an increase in the behaviour of dieting among children whose mothers take disciplinary actions. On the other hand, there is a decrease among children whose mothers leave them free. 52% of the children having pleasantly harsh and egalitarian mothers, and 50% of the children having coercive-authoritative mothers diet. This ratio decreases to 45,5% for the children whose mothers leave them free. This situation can be explained by the increase in the autonomy gained in the transition period from adolescence to adulthood. The disciplinary method used by the fathers does not make any difference in their children's behaviour of going on a diet.

Among primary school students, although there is not a significant relation between mothers' taking disciplinary actions and weight problem, this relation is found significant for the fathers (Chi-square = 6,159, $p < 0.05$). 60% of the children whose fathers are coercive and authoritative and interfere in everything are found to have weight problem. These ratios decreases to 32,6% for the children having pleasantly harsh and egalitarian fathers, to 9,1% for the children whose fathers leave them free and do not interfere in anything about them. A significant relation between these two variables is not found significant for university students.

When the relation between how university students perceive themselves in terms of their present weights and by whom disciplinary actions were taken during the growing up period is examined, similar results are figured out (Body-Mass Index is used in determining individual's real weight). The highest ratios in three categories - overweight, normal weight and slim students- consist of the students whose parents together take disciplinary actions. However, the tendency of parents in taking disciplinary actions together decreases as weight of student increases (56.5% of the slim students, 54,4% of the normal weight students and 46,9% of the over-weight students). On the contrary, there is a tendency towards an increase in the mothers' authority. The ratio of this tendency among slim students is 19.6%, among normal weight students 20.1%, and among over-weight students 25,9%, whereas fathers' authority decreases (17.4% among slim students, 15,2% among normal weight students and 14,8% among over-weight students). A significant relation between these two variables is not found among primary school students.

When the relation between carrying anxiety about physical appearance and by whom disciplinary actions were taken in the growing up period is examined among university students, 34,9% of the students are found to have serious anxiety about their physical

appearances. Among these students, the first category involves students (50.4%) whose parents together take disciplinary actions. The second category consists of the students (24%) whose mothers take disciplinary actions. The third category includes the students (17.4%) whose fathers take disciplinary actions. As a result, the mothers are more outstanding in taking disciplinary actions. This relation is not found significant among primary school students.

Among primary school students, when the relation between how they perceive themselves presently in terms of their weights and by whom disciplinary actions were taken is examined, among students in three categories, in other words, the students perceiving themselves either slim, normal or over-weight, the highest ratio belongs to those whose parents take disciplinary actions together. Consequently, parents of 73,3% of the students perceiving themselves slim and parents of 48% of the students perceiving themselves at normal weight take disciplinary actions together. According to these ratios, it can be said that parents take disciplinary actions together as the weight of the student increases. This case can be evaluated as a feature specific to adolescence period (if the fact that the need of children for parents is getting increase in this period is taken into consideration). A significant relation between these two variables is not found among university students.

For the relation between the disciplinary method used by mother and whether university students have weight problem or not, it is found out that 64.5% of the children having coercive mothers have weight problems. This ratio is 45.8% for the children having pleasantly harsh and egalitarian mothers and 48,4% for the children having mothers leaving them free. A significant relation between the disciplinary method used by the fathers and children's weight problem is not found.

Among primary school students, when the relation between children's weight problems and by which parents decisions about children were made is examined, the ratio of the children having weight problem in families where the mothers make decisions about children is high (60%). The ratio of the children about whom decisions are taken by the fathers tends to decrease (33,3%). The relation between the same variables is not found significant among university students. The reason for this case may be that young people gain more freedom at university age and their behaviours depending on parents' decisions get decrease.

Among primary school students, when the relation between how they perceive themselves presently in terms of their weights and with whom they share their problems is examined, 30% of the students perceiving themselves slim, 26,7% of the students perceiving themselves over-weight and 14% of the students perceiving themselves at normal weight share their problems mostly with their mothers. In this case, it is seen that

is the weight of child increases, he shares problems less with his mother. The ratio of the children perceiving themselves at normal weight is higher in terms of sharing problems both with their mothers and fathers. However, when these three categories are compared in terms of sharing problems with the fathers, the ratio of the children sharing problems with their fathers is very low. It is 6.7% among over-weight children, 2% among normal weight children. There is no slim student sharing problems with their fathers. As a result, it can be said that as weight perception changes towards overweight, the tendency towards sharing problems with mothers is getting increase.

When the relation between how university students perceive themselves in terms of weight, and with whom they share their problems is examined, student in three categories (over-weight, normal weight and slim) share their problems mostly with their mothers (53.2% of over-weight students, 48.4% of normal weight students and 68.2% of slim students). The second group in each three categories consists of the students not sharing problems with their parents. In this group, 30.6% of the students perceiving themselves at normal weight, 27.3% of the students perceiving themselves at overweight and 25% of the students perceiving themselves slim do not share their problems with their parents. The third category involves students who share their problems with their parents. Similarly, in this group as the weight increases, the ratio of the university students sharing problems with both parents decreases. 18.2% of the students perceiving themselves over-weight, 13.2% of the students perceiving themselves at normal weight and 2.3% of the students perceiving themselves slim share their problems with both their mothers and their fathers. According to these results, university students, at whichever weight they are, choose their mothers primarily to share their problems. However, the more they perceive themselves slimmer, the more they share problems with their mothers. In consequence, it is seen that the mothers play an effective role in weight control (in terms of both taking disciplinary actions and forming a model for child's nutrition). The relation between these two variables is found significant (Chi-square = 20,791, $p < 0.05$).

Among primary school students, when the relation between the behaviour of going on a diet and with whom students share their problems is examined, following results are found. 34.7% of the primary school students diet. These students share their problems primarily with their mothers (20%). The second category consists of the students sharing problems with their parents. 4% of the students going on a diet share their problems only with their fathers and 4% of them neither with their mothers nor with their fathers. As a result, students going on a diet share their problems mostly with their mothers.

50.8% of the university students diet. 50.3% of these students who diet share their

problems primarily with their mothers. The second category among these students consists of the students not sharing their problems with parents, with the ratio of 27.2%. The third category involves students sharing their problems with both parents with the ratio of 16%. The fourth category includes students sharing their problems only with the fathers, with the ratio of 6.5%. According to these findings, it is seen that students in both groups prefer to share their problems mostly with their mothers.

6. Discussion

All of the sampling groups have nuclear families at middle socio-economic level, with an urban origin. Their families have egalitarianistic understanding. The authority type in these families is pleasantly harsh and egalitarian but have a mixed model. The mothers carry traditional household responsibilities whereas both parents share responsibilities related to children. Participants in three sampling groups share their problems generally with their mothers and spend their time with them. Since three of the sampling groups in the present study reveal similar sociological features, relations between variables that are found important in terms of nutrition disorders can be traced in many areas, and consequently, hints about nutrition disorders can be found out.

As a result of findings in this study, parents form a role model for their children in weight control. However, the mothers play a more active role than fathers do in this matter, and they focus on their daughters, rather than sons.

The relation between disciplinary methods used by the mothers and going on a diet reveals differences depending on age.

According to the findings, there is a higher tendency towards going on a diet among children for whom no disciplinary actions are taken (those children are the ones being left free, not being interfered) at adolescence period. This situation emerges from the fact that the control of adolescent children on their bodies depends mostly on their parents.

Among university students, whose mothers take disciplinary actions, there is an increase in the behaviour of going on a diet. This behaviour tends to decrease among university students whose mothers leave them free. These results reveal an opposite situation of adolescents. This case can be explained with the increase in autonomy gained in the transition period from adolescence to young adulthood. While the mothers do not allow their children to diet at adolescence period, their children at young adulthood period may be said to be more sensitive to their body images. As it is known, adolescence period is the period when child biopsychologically grows up and develops. On the other hand, since young adulthood period is the one when an interest in opposite

sex intensifies, it may be thought that a higher emphasis on body image is given more, as it was explained by Mead's (1934) concept of "generalised other" role models. Undoubtedly, this situation also increases mother's interest. Although the families of the patients generally display an egalitarianistic family structure, it is observed that it is mostly the mothers who focus on weight. Consequently, it is found out that the ratio of behaviour of going on a diet is higher among students whose mothers take disciplinary actions within family. The more the mothers give emotional support, the higher the ratio of behaviour of going on a diet among especially female students is.

The fact that as the more frequently family members have their meals together, the less children have weight problems, which is one of the relations mentioned in the literature and tested in this study, is not supported by the findings.

In sum, as emphasized in the literature, physical, social and cultural conditions of family affect family members. Family is the most important means in the socialization process of individuals. This is also important in gaining health patterns (for an individual). Nutrition habits mentioned within the scope of the present study are also gained basically in the family. According to the findings of this study, as indicated in the literature of health sociology, the family creates an atmosphere in which these factors become effective in the process leading to the development of these diseases. So, the results show that the formation of risk factors within family which are effective in these diseases should be considered seriously.

However, it is not possible to claim that all of the students in the sampling groups will be ultimately caught by these diseases, even though they display similar symptoms with the actual patients. The most important thing to be emphasized here is that people at adolescence and young adulthood periods are in a risk group as nutrition disorders are likely to develop. On the other hand, family should not be taken as the only factor with a direct effect on anorexia and bulimia nervosa, which are the final stages of nutrition disorders. In consequence, it may be said that when the other factors creating these diseases come together, family atmosphere gains importance. In this context, the type of authority exerted in family, disciplinary actions, parents as a role model and way of rearing children which are tested within the present study in terms of family structure may not be accepted as the reasons having direct effects on these diseases. Family can be regarded as a factor preparing the conditions giving rise to the development of the problems in question. When this condition is combined with a dramatic factor (this may be an emotional - psychological factor rather than a sociological one), these diseases may easily come up. Although, sociological factors are supportive or triggering, individual differences originating from bio-psychological effects should also be taken into consideration. So, interdisciplinary studies should be carried out on this subject.

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