

Sample Answer

The social learning theory (SLT) claims that behaviour is learned through observation and imitation usually of role models we identify with. **Hill et al (1989)** found similarities between mother-and-daughter pairs with restrained eating and dieting behaviours amongst children as young as 10 years old. They also show that such children also tend to overeat in a behavioural test of restraint. This family influence can play a part in eating behaviour. Individuals with anorexia may look to other people in their social environment and want to copy the behaviour of these role models. For instance, a teenage girl might identify with a female popstar who appears skinny, promoting them to see this as a favourable weight. However, it could be that some individuals have a personality type which predisposes them to develop anorexia instead. The SLT also suggests behaviour is influenced by vicarious reinforcement, seeing someone else receive reinforcement increases the likelihood it will be imitated. With anorexia, individuals might see their peers receiving positive reinforcement through praise or attention from others regarding their body weight. This increases the likelihood anorexic individuals will copy their peers to receive the same praise. The media has increased the prevalence of anorexia with many young people now exposed to more pressure to be thin/ skinny via film/ TV, magazines, or social media. **Becker et al (2002)** studied eating attitudes amongst Fijian girls following the introduction of TV in 1995. After exposure to TV, it was found the girls expressed a desire to lose weight and their attitudes towards eating had changed negatively. In addition, **Cooper (1994)** suggested anorexia is more common in western societies than non-western societies, as women are often rewarded (by attention and admiration) for looking slim. However, cultural factors cannot be the only reason for the development of eating disorders like anorexia. The great majority of young women who are exposed to cultural pressures towards slimness do not develop anorexia. This argument fails to consider individual differences and biological influences like genetics. **Tozzi et al (2005)** supports the contrasting biological explanation and suggests that people may inherit a vulnerability towards developing eating disorders.

