**Discuss factors influencing attitudes to food and eating behaviour. (8 and 16 marks)**

 One explanation of our attitudes to food is outlined in the social learning theory and the developmental approach. Parental modelling affects children’s own preferences as parent’s control what meals are served. Children may then also observe their parents and the satisfaction they receive from specific foods and, through vicarious learning, they may come to model the behaviour themselves.

SLT also predicts that the media will have an influence as, for example, people may identify with celebrities who highlight a particular food diet and the benefits gained and then replicate this for themselves.

 Another influencing factor is cultural influences as most cultures have their own ideas on which foods are allowed to be eaten, when and how they’re eaten and how they should be prepared. However, cultural effects are being reduced with the spread of fast-foods that are becoming more widely available.

 A further factor includes emotion and mood. Food is associated with reduced arousal and irritability and so it is often eaten in order to increase mood and give energy. Sweet foods in particular increase the release of endorphins in the brain, making us feel better as they activate our natural reward pathways.

 A study by Stefansson found that Copper Inuit’s (who live on a diet of flesh and roots only) were disgusted by the taste of sugar which is clearly different to the preferences of those in the western world. This shows a cultural difference in food preferences and demonstrates that our cultural environment and familiarity influence our attitude to food.

 Research to support the influence of social learning comes from Fisher as he studied mother-daughter relationships and found that a good predictor of the daughter’s eating behaviour is the mother’s dietary restraints and their perceived risk of their child becoming overweight. This suggests that the daughters were learning from their mother’s attitudes. Brown also supported this by finding a consistent correlation between the eating habits of parents and children relating to their food intake, motivation and body dissatisfaction.

 A downfall, however, is that evolutionary explanations show that attitudes to food are clearly a product of much more than just social learning as, for example, our preference for fatty foods could be a result of an innate preference that evolved among our ancestors rather than due to our developmental environment or cultural influence.

 As for the influence of mood, Garg concluded that people who watched a sad movie were more likely to go for a good-tasting food (e.g. popcorn) to give them a rush of euphoria, whereas those watching a happy movie wanted to extend their upbeat mood and so choose healthy foods. This shows that people subconsciously know which foods to eat to improve their mood and that their food choices are thus dependant on mood fluctuations. However the study does have extraneous variables as it is impossible to know what the participants have eaten before the study or even if they liked popcorn. This would reduce its internal validity and make its conclusions less effective in backing up the idea of mood’s influence.

 Beneficially, research into the factors influencing eating behaviour, especially the influence of the media through social learning, can be commended for having practical real-life applications. This is because information promoting healthy eating can be used in advertising campaigns to reinforce these points through providing positive role models. This may help the NHS budget for obesity which is a growing problem.

 However, there is the issue of determinism. The factors mentioned suggest that choice is limited from what we learn during childhood, our mood or our culture and thus it is attempting to determine what we will choose whereas, although exposure through social learning, culture etc. can influence food choices, there are always people who are unaffected by them and thus highlight how free will also plays a role in shaping attitudes.

 Lastly, a further supporting study for SLT and the use of peer’s as models comes from Mayer who found a positive correlation between peer influence and disordered eating with the most important factor being likability of peers, showing that the girls identify with peer models and this can shape their own behaviour.