



Perfectionism, low self-esteem, and family factors as predictors of bulimic behavior

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Abstract

A previous study found that self-reported body dissatisfaction, depression, and peer pressure to maintain a thin body shape were significant predictors of bulimic behavior in college women, but that family functioning was not a significant predictor [*Eat. Behav.* 2 (2001) 323]. The current study examined whether perfectionism, low self-esteem, and a more specific family variable—perceived pressure from the family to be thin—predicted any additional variance in eating-disordered behavior after significant variables from the previous study had been taken into account. As in the previous study, self-reported body dissatisfaction, depression, and peer pressure to maintain a thin body shape were significant predictors of bulimic behavior. Perceived weight-related pressure from the family was also a significant predictor. In contrast, high parental expectations were found to predict *lower* levels of bulimic behavior and to moderate the effects of peer influence on bulimic behavior. The variables found in this study to be related to bulimic behavior may be useful targets for clinical intervention for women with disturbed eating patterns.

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1. Introduction

To be diagnosed with bulimia nervosa, an individual must engage in binge eating and compensatory behaviors, such as self-induced vomiting or excessive exercise, at least twice a week for a period of 3 months or more (*DSM-IV*, American Psychiatric Association, 1994). Although diagnosable cases of bulimia nervosa are fairly rare, the prevalence of bulimic behavior that falls short of meeting *DSM*

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criteria is much higher (Fairburn & Beglin, 1990). Research with clinical samples of individuals with bulimia nervosa and with college students with less severe bulimic behavior has identified a variety of variables associated with bulimic behavior. These variables include social pressure from family, peers, and the media and individual variables, such as self-esteem, perfectionism, body dissatisfaction, and depression.

1.1. Family functioning

Women with bulimia or with bulimia-like behavior often report their families to be low in expressiveness, cohesion, and caring and high in anger and conflict (Johnson & Flach, 1985; Kent & Clopton, 1992). Other studies have suggested that family members may model maladaptive eating attitudes and behaviors for adolescent girls and young women. Mothers of daughters with bulimia or with symptoms of eating disorders are often critical of their daughters' weight and physical attractiveness, and they often have a history of disordered eating or dieting themselves (e.g., Pike & Rodin, 1991). These studies support the notion that daughters may often adopt their parents' concerns about body shape and weight.

1.2. Peer pressure

Several studies have examined the relation between peer influence and binge eating. Crandall (1988) found a positive relationship between binge eating and popularity in a study of university women in two sororities. Criticism from peers about body appearance has also been shown to correlate with increases in bulimic behavior (Cattarin & Thompson, 1994).

1.3. Self-esteem

Low self-esteem (i.e., a large discrepancy between the ideal image of oneself and the self that one perceives as real) can result in a variety of negative consequences, including eating disorders (Bardone, Vohs, Abramson, Heatherton, & Joiner, 2000). Low self-esteem was found to correlate significantly with scores on an eating disorder measure in a sample of high-school students (Fisher, Pastore, Schneider, Pegler, & Napolitano, 1994).

1.4. Perfectionism

According to one theoretical model, perfectionism consists of the following features: (a) an excessive level of worry over making mistakes; (b) constant doubts about the quality of one's performance, which may delay task completion; (c) overvaluation of parental expectations; and (d) excessive emphasis on order and precision (Frost, Marten, Lahart, & Rosenblate, 1990). Perfectionism has been identified as a risk factor for bulimic behavior (Hewitt, Flett, & Ediger, 1995; Joiner, Heatherton, & Keel, 1997).

1.5. Body dissatisfaction

Bulimic behavior has been found to be associated with body dissatisfaction (i.e., negative feelings about one's body) in both clinical and nonclinical samples (Williamson, Cubic, & Gleaves, 1993).

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