



# Gender Matters: The Role of Perfectionism, Shame, Guilt, and Pride are Different for Eating Symptoms in Men Versus Women

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EATING ANXIETY TREATMENT  
LABORATORY AND CLINIC

## Introduction

- Two dimensions of perfectionism related to EDs are:
  - 1) **Doubts about actions**
    - Indecisiveness regarding actions
  - 2) **Concern over mistakes**
    - Excessive worry over errors (Bulik et al., 2003)
- People with high perfectionism tend to experience **shame, guilt, and lack of pride**
- Shame, guilt, and pride are also high in EDs (Stoeber et al., 2007)
- Do these differ by gender?
  - We could target specific emotions/dimensions of perfectionism in each gender
  - We investigated if gender moderated the relationships between (a) perfectionism, shame, guilt, and pride and (b) ED symptoms

## Participants

- Two hundred sixteen undergraduates
- Men ( $n = 54$ ) and women ( $n = 163$ )
- European American ( $n = 122$ ; 56.5%)
- Mean age of 18.81 ( $SD = 1.10$ )

## Measures

### Eating Disorder Examination – Questionnaire (Fairburn & Beglin, 1994)

- Global score of all items as measure of ED symptoms
- Example item: *Have you experienced a sense of loss of control over eating?*
- Example item: *Have you had a definite fear that you might gain weight or become fat?*
- Good internal consistency and convergent validity

### The Frost Multidimensional Perfectionism Scale (Frost et al., 1990)

- Thirty five item measure which assesses six dimensions of perfectionism
- Used concern over mistakes and doubts about actions subscales
  - Concern over mistakes
    - If I fail partly, it is as bad as being a complete failure*
  - Doubts about actions
    - It takes me a long time to do something "right"*
- Good test-retest reliability and validity

### The State Shame and Guilt Scale (Marschall, Sanfter, & Tangney, 1994)

- Measure of momentary shame, guilt, and pride
  - Shame
    - I want to sink into the floor and disappear*
  - Guilt
    - I feel remorse, regret*
  - Pride
    - I feel worthwhile, valuable*
- Good internal consistency and concurrent validity

Figure 1. Interaction of Doubts about Actions and Gender on Eating Disorder Symptoms

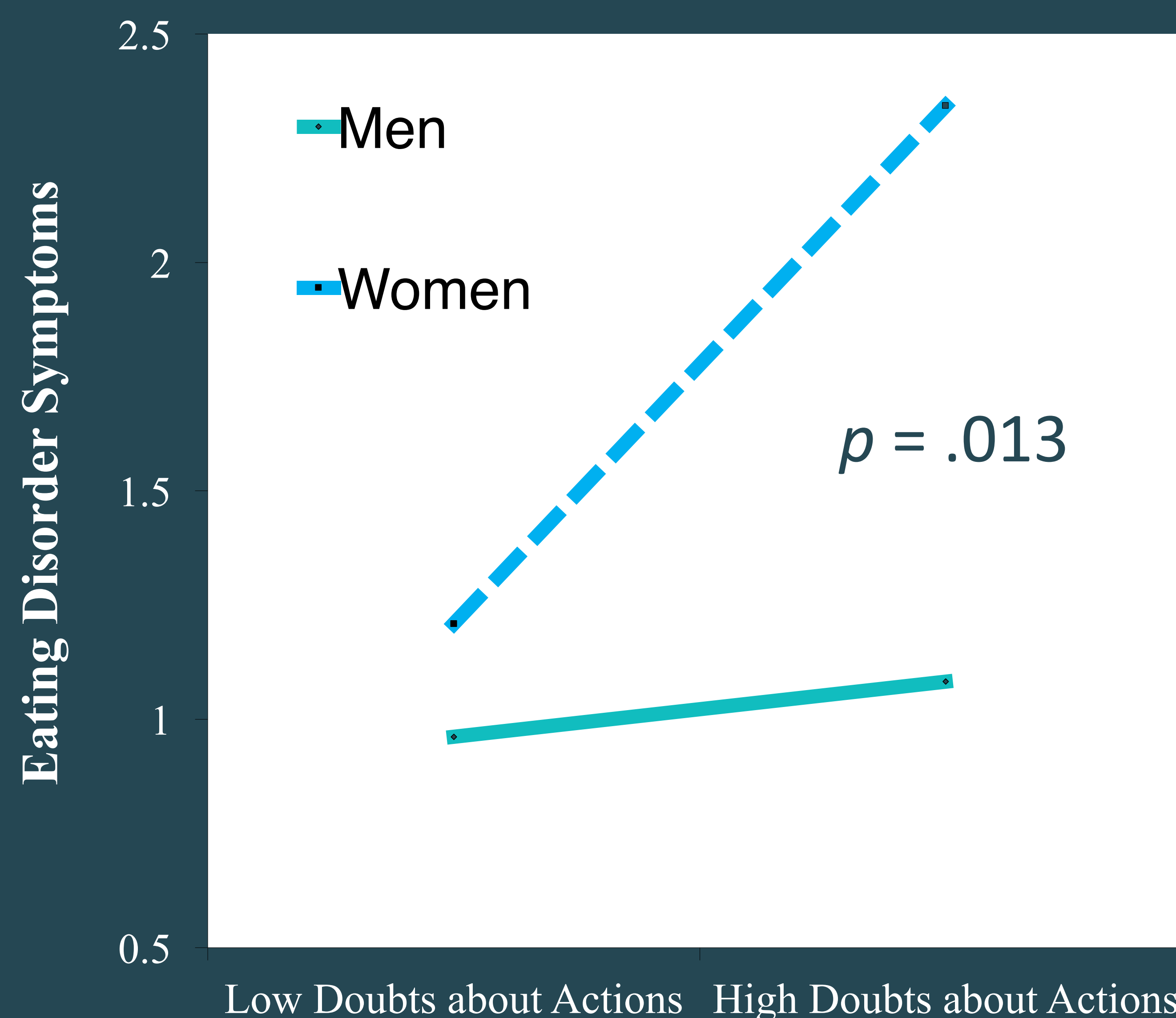


Figure 2. Interaction of Pride and Gender on Eating Disorder Symptoms

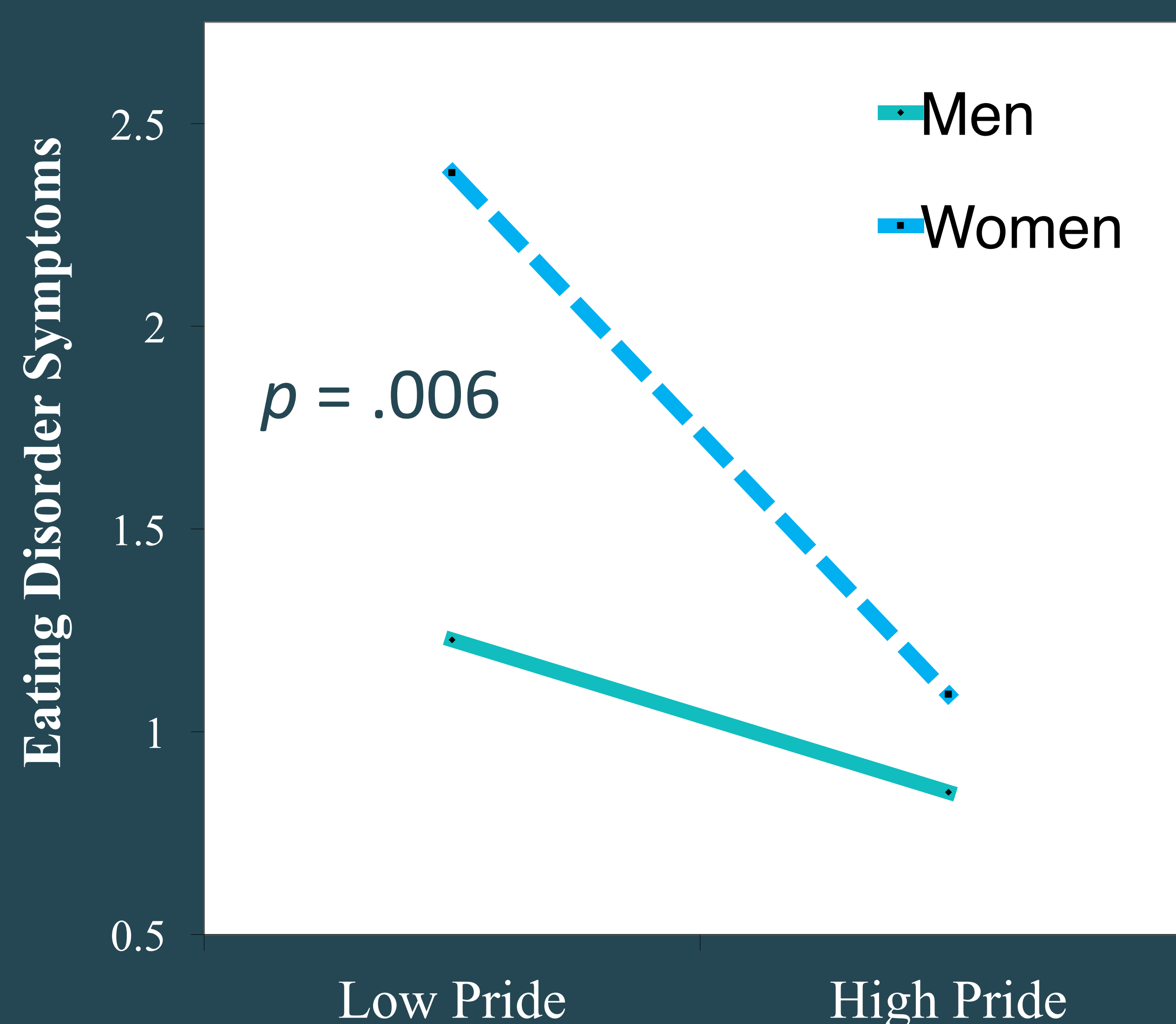
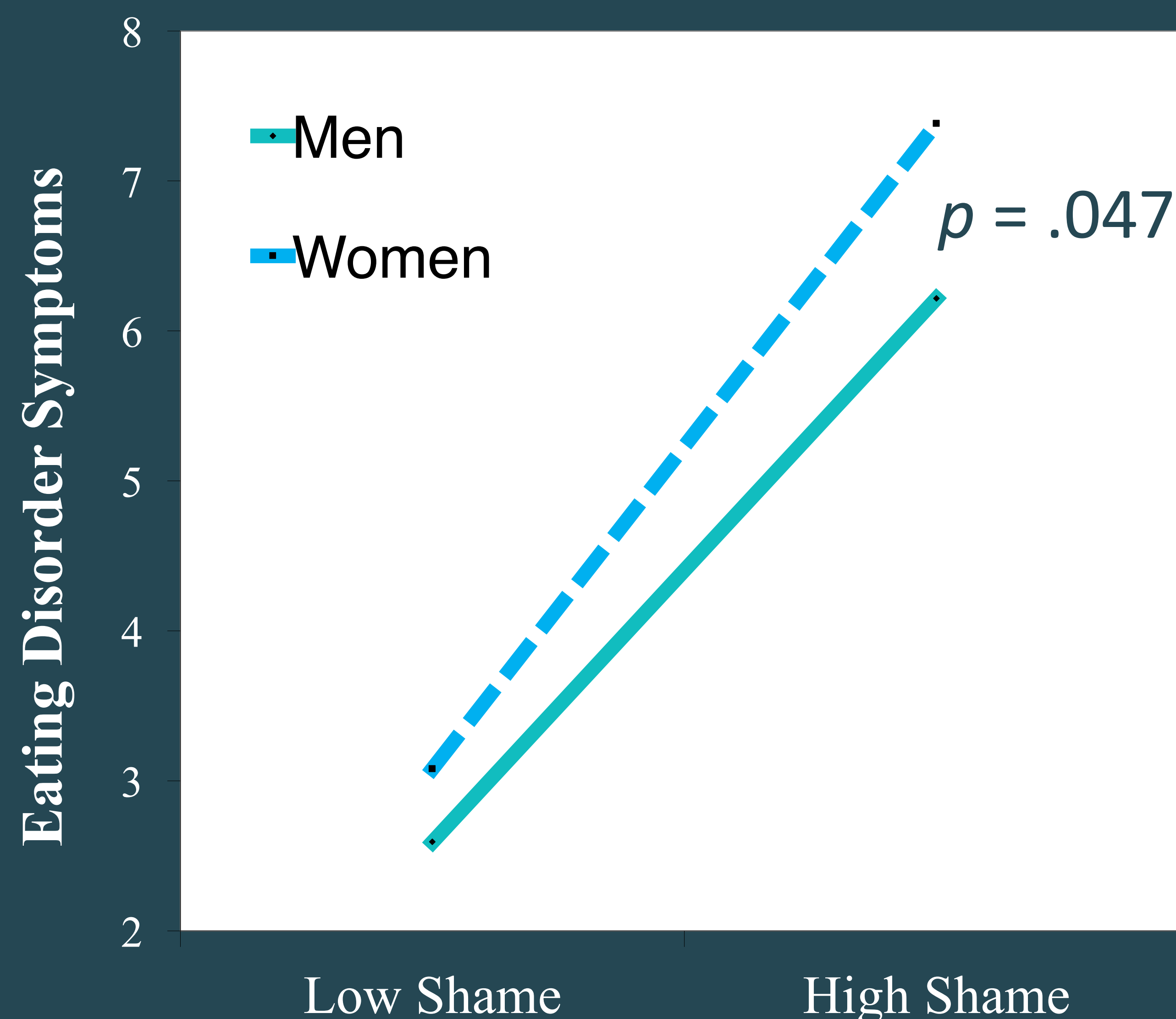


Figure 3. Interaction of Shame and Gender on Eating Disorder Symptoms



## Data Analyses

- Independent samples *t*-tests were conducted
  - Test if males and females significantly differed on perfectionism, shame, guilt, pride, and ED symptoms
- Moderation analyses conducted for impact of gender on ED symptoms and:
  - 1) concern over mistakes
  - 2) doubts about actions
  - 3) guilt
  - 4) pride
  - 5) shame

## Results

Table 1. Independent Samples *t*-tests; significant differences are bolded and *p*-values are starred

	Men Mean	Women Mean	<i>t</i> -value	<i>p</i> -value
<b>Doubts about Actions</b>	<b>9.87</b>	<b>11.03</b>	<b>-2.03</b>	<b>.044*</b>
Concern over Mistakes	22.43	24.50	-1.68	.095
<b>Shame</b>	<b>8.51</b>	<b>8.15</b>	<b>0.58</b>	<b>.019*</b>
Guilt	9.31	9.41	-0.13	.898
Pride	18.43	16.77	2.37	.562
<b>ED Symptoms</b>	<b>1.01</b>	<b>1.80</b>	<b>-4.63</b>	<b>.010*</b>

### Moderation Analyses:

- Gender moderated ED symptoms and:
  - Doubts about actions:**  $b^* = .13$ ,  $p = .013$  (Fig. 1)
  - Shame:**  $b^* = .09$ ,  $p = .047$  (Fig. 2)
  - Pride:**  $b^* = -.10$ ,  $p = .006$  (Fig. 3)
- Gender did not moderate ED symptoms and:
  - Concern over mistakes:  $p = .118$
  - Guilt:  $p = .173$

## Discussion

- In women more so than in men, higher ED symptoms associated with:
  - Higher doubts about actions
  - Higher shame
  - Lower pride
- Concern over mistakes and guilt did not impact ED symptoms differently based on gender
- Women with higher doubts about actions, higher shame, and lower pride may be at specific risk for eating disorders
  - May need to be targeted in women
- Concern over mistakes and guilt carry risk for higher ED symptoms regardless of gender
  - Should be assessed and targeted in both genders
- Models for women not necessarily generalizable to men
  - Continued need for testing models by gender to develop targeted interventions