

**Personality profiles of adolescents with risky attitudes towards food,
dieting, and their body image.**

De Caro EF, Di Blas L

Psychology Unit “Gaetano Kanizsa”, Department of Life Sciences, University of Trieste

Keywords: Eating disorders, stability, personality, adolescence, profiles at risk

Disordered eating (ED) clinical and subclinical conditions have a considerable impact on the population. Anticipating vulnerable profiles is crucial thereby in order to prevent the development of such pathological conditions [1, 2, 3]. Previous research has consistently shown that individual differences in Self-esteem, Impulsiveness, Obsessiveness, Ineffectiveness, and Interoceptive Awareness represent significant correlates of eating disorders [4]. The present longitudinal study was aimed at exploring distinctive personality profiles of non-clinical adolescents with stable risky attitudes towards food, dieting, and their body image. EDI-2 and a selected subset of MMPI-A content scales were administered twice, with a 7-month interval, to a sample of 142 adolescents. For the present study, we focused on the subsample of participants with reliably stable scores on the critical EDI-2 scales of Drive for Thinness (DT), Bulimia (Bu), and Body Dissatisfaction (BD) across the two measurement occasions, t1 and t2. When average profiles of adolescents with higher (> 85° percentile) vs lower (\leq 85° percentile) scores on the three EDI-2 scales at t1 were compared along the EDI-2 and MMPI-A scales via one-way ANOVA, results indicated that adolescents with higher stable levels of DT revealed higher dissatisfaction with their body, higher Obsessiveness and depression levels and lower self-esteem levels; adolescents very dissatisfied with their body referred high DT scores, but they did not report higher Obsessiveness levels; adolescents with higher scores on Bu revealed lower Interoceptive Awareness and higher impulsivity, but did not refer higher levels of BD or DT. These differences in profile shapes were observed at t1 as well as at t2. Consistent with literature [5-10] our findings suggest that distinctive profile shapes might help to early identify adolescents who are at risk of developing EDs.

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