

**PEDAGOGICAL STATE UNIVERSITY „ION CREANGĂ” IN CHIȘINĂU  
DOCTORAL SCHOOL OF PSYCHOLOGY**

With manuscript title  
C.Z.U: 159.922.8:613.2(043.2)=111

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**PSYCHOLOGICAL PARTICULARITIES OF EATING BEHAVIOR  
IN ADOLESCENT GIRLS**

**Specialisation: 511.02 Developmental Psychology and Educational Psychology**

**Summary of the doctoral thesis in psychology**

**CHIȘINĂU, 2026**

The thesis was developed within the Doctoral School of Psychology at the „Ion Creangă” State Pedagogical University in Chişinău.

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The presentation will take place on April 6, 2026, at 10:00 a.m., during the meeting of the Public Doctoral Committee of the Doctoral School of Psychology of „Ion Creangă” State Pedagogical University in Chişinău (Str. I. Creangă, 1, bl.2, Senate Hall).

The doctoral thesis in psychology and the summary can be consulted at the Scientific Library of „Ion Creangă” State Pedagogical University in Chişinău and on the website of ANACEC ([www.anacec.md](http://www.anacec.md), [www.cnaa.md](http://www.cnaa.md)).

The abstract was sent on ..... 2026.

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## THE CONCEPTUAL FRAMEWORK OF RESEARCH

**Relevance and significance of the issue.** Problematic eating behavior among adolescent girls represents a major contemporary concern, with an alarming increase in incidence: 36% in Romania and 28% in the Republic of Moldova over the past five years. Although clinical diagnoses indicate rates of 1.8% in Romania and 1.5% in Moldova, risk-related eating behaviors affect more than 18% of adolescent girls in Romania and 22.7% in Moldova, suggesting a substantial number of undiagnosed cases [3]. Approximately half of the population in both countries is overweight or obese. The impact extends beyond immediate health, affecting long-term development, self-esteem, social relationships, and academic performance. Adolescent girls with eating disorders have a 3.2–3.5 times higher risk of school dropout, and the socio-economic costs represent approximately 2.3–2.7% of the health budget in both countries. The impact of these problems affects long-term development by creating vulnerabilities that can interfere with the transition to adulthood and with the assumption of social and professional roles. In this context, it becomes essential to investigate the psychological and socio-cultural determinants that contribute to the emergence and maintenance of problematic eating behavior.

The research addresses an acute public health need, with the potential to improve quality of life through the development of prevention and intervention strategies grounded in an understanding of the psychological characteristics underlying eating behavior in adolescent girls.

**Description of the field and identification of the research problem.** Current studies have identified biological, psychological, and socio-cultural risk factors that contribute to disordered eating behaviors. However, several areas remain insufficiently explored, particularly those concerning the specific psychological characteristics that influence eating behavior among adolescent girls from different cultural contexts, including Romania. The fundamental question is: “What are the specific psychological characteristics that influence eating behavior among adolescent girls in Romania, and how do these characteristics manifest in relation to the identified risk factors?”

Important aspects to be explored include the relationship between body image and self-concept, the impact of social media and peer pressure, cultural particularities, the influence of family factors, and the coping mechanisms used by adolescent girls with problematic eating behavior. Addressing these aspects could significantly contribute to the development of prevention and intervention programs adapted to the local context.

Eating behavior in adolescent girls and the factors influencing it represent a complex field with major implications for psychological development and young women’s health. Among the authors with fundamental theoretical contributions, we mention: Ch. Fairburn with the transdiagnostic theory of eating disorders; W. Kaye with neurobiological research; H.-C. Steinhausen ; W. Stewart Agras with essential works in the field of eating disorders; L. Smolak and J. Kevin Thompson with a focus on adolescents; J. Treasure with contributions to the cognitive-interpersonal model of anorexia; K. Klump with gender-related hormonal studies; H. Bruch with a synthesis of forty years of work on the emotional aspects of eating disorders; E. Stice with meta-analyses on risk factors; A. Dakanalis on media internalization and the objectification process; and T. F. Cash, the standard reference for body image.

In the study of eating behaviors among adolescent girls, notable contributions include: D. Neumark-Sztainer with the longitudinal “Project EAT”; Silva et al. on the influence of affective styles; E. Stice with the “dual pathway model”; and J. O’Dea focusing on body image and self-esteem [1, 6, 7, 14, 18, 19, 22, 23, 29, 30, 34, 36, 37, 38, 39, 40, 51].

Among Romanian researchers, we mention I. Dafinoiu, V. Enea, D. Tăut, I. Gotcă, A. D. Prefit, S.-A. Zâncu, M. Sîmbrac, A. Tănsanu, A. Astani, and M. Ștefan. From the Republic of Moldova, important contributions come from R. Cerlat and V. Angheluță; I. Racu and R. Bivol; A. Potâng; V. Condrea; E. Dolpaci; E. Losfi; O. Cernelev; M. Licu; and A. Andoni and E. Ciobanu [3, 4, 5, 9, 10, 12, 13, 15, 17, 20, 24, 26, 27, 31, 32, 33, 35, 41, 48, 49, 50, 52].

In the context of the above, we note that in both the Republic of Moldova and Romania no research has been undertaken on problematic eating behavior in adolescent girls focused on identifying the complex relationships between various psychological dimensions and the structural components of eating behavior, outlining the psychological profile of adolescent girls with problematic eating behavior in the context of new social realities, and identifying ways to ensure the harmonious development of adolescents' personalities.

Thus, the aforementioned aspects determine the need to continue research on these complex psychological dimensions. The study, analysis, and explanation of theoretical models regarding eating behavior and its psychological characteristics, the insufficiently explored aspects related to the specific psychological mechanisms that influence eating behavior in adolescent girls, the lack of longitudinal studies tracking the evolution of eating behavior throughout adolescence, and the need for assessment instruments adapted and validated for the population of adolescent girls in Romania have led us to conclude that investigations concerning the psychological characteristics of eating behavior in adolescent girls are insufficient. This has shaped the **research problem**, which can be explored by answering the following question: *“What are the specific psychological characteristics that influence eating behavior in adolescent girls, how do they manifest in relation to risk factors, and how can they be improved through appropriate psychological interventions?”*

**The aim of the research** is to identify the psychological characteristics of eating behavior in adolescent girls and to develop a multifaceted psychological intervention program aimed at improving problematic eating behaviors, body image and self-image, strengthening protective personality factors, and reducing the perception of social pressure regarding physical appearance and body weight.

The theoretical-experimental research pursued the following **general objectives**:

1. The theoretical analysis of conceptual approaches regarding eating behavior in adolescent girls.
2. To compare evaluation of the psychological characteristics of eating behavior between adolescent girls with problematic eating behavior and those with balanced eating behavior in order to identify significant differences in their psychological profiles.
3. To investigate the complex relationships between components of eating behavior (eating attitudes, emotional eating) and various relevant psychological dimensions, such as appearance-related anxiety, body esteem, self-concept, personality factors, and perceived socio-cultural pressure.
4. To develop a comprehensive psychological profile of the adolescent girl with problematic eating behavior.
5. To design, development, implement, and evaluation of the effectiveness of a multifaceted psychological intervention program designed for adolescent girls with problematic eating behavior, aiming to improve problematic eating behaviors and maladaptive eating attitudes, enhance body image and self-concept, and strengthen protective personality factors.

**The general hypothesis.** The gene assumes that there are significant differences regarding the characteristics of eating behavior between adolescent girls with problematic eating behavior

and those with balanced eating behavior, and that the psychological correlates of eating behavior can be addressed and improved through psychological intervention.

**Theoretical Framework of the Research.** The theoretical foundation of the research was based on a multidisciplinary theoretical framework: *theories of adolescent development* (E. Erikson, J. Piaget, L. Steinberg, L. Mitrofan, A. Munteanu, E. Verza, V. Ene, I. Racu) provided the context for understanding identity formation and the cognitive and emotional changes specific to this stage [67, 192, 201, 233]; *cognitive-behavioral models* (A. Beck, C. Fairburn) explained the interaction between thoughts, emotions, and eating behaviors, complemented by body image theories (L. Festinger, J. Thompson), which clarified the impact of socio-cultural factors on body perception [24, 71, 270]; *theories of emotions, emotional regulation, and motivation* (R. Scherer, J. Gross, S. Lazarus, S. Folkman, E. Deci, R. Ryan) were essential for understanding the role of emotions in problematic eating behavior, exploring the relationship between early experiences and eating behavior, stress management, and the motivation underlying eating behaviors [82, 100, 213]. The psychological intervention was based on an integrative approach, combining methods from various therapeutic orientations adapted to eating behavior in adolescent girls: *theories of behavioral change* (J. Prochaska, C. DiClemente) [196]; *cognitive-behavioral therapy* (A. Beck, C. Fairburn) focused on restructuring cognitive distortions specific to body image [23; 70]; *acceptance and commitment therapy* (S. Hayes), which promoted psychological flexibility and alignment of behaviors with personal values [110]; dialectical behavior therapy and *schema-focused therapy* (M. Linehan, J. Young), which addressed emotional regulation difficulties and the treatment of early maladaptive cognitive schemas [120, 152]; and, for cultivating positive psychological resources, developing a mindful relationship with food and the body, and adaptively processing emotions related to body image, techniques from *positive psychology and mindfulness practices* (B. Fredrickson, M. Seligman, L. Greenberg) were incorporated [84, 142, 219].

This complex and multidisciplinary theoretical framework enabled a comprehensive approach to eating behavior in adolescent girls, facilitating the development of an integrated model of understanding and intervention adapted to the specific context of our study.

**The scientific research methodology** is determined by the aim, objectives, and research hypotheses and consists of *theoretical methods* (analysis and synthesis of psychological literature, with emphasis on eating behavior, body image, and self-esteem in adolescents) and *hypothetico-deductive* methods for interpreting and explaining the research results obtained; *empirical methods* Eating Attitudes Test (EAT-26), Emotional Eater Questionnaire (EEQ), Appearance Anxiety Inventory (AAI), Body-Esteem Scale for Adolescents and Adults (BESAA), Self-Perception Profile for Adolescents (SPPA), Big Five Inventory – 10 Item Scale (BFI-10), Health-Relevant Personality Traits from a Five-Factor Perspective (HP5), Clinical (Maladaptive) Perfectionism Questionnaire (CPQ), Perceived Sociocultural Pressure Scale (PSPS), the Questionnaire for Identifying Problematic Eating Behavior in Adolescents (CICAP-5A) and *statistical methods* (the Mann–Whitney U test, Spearman’s correlation analysis, the Kolmogorov–Smirnov test, and the Wilcoxon W test).

**Scientific novelty and originality of the research.** The novelty and scientific originality of the obtained results lie in conducting a theoretical-experimental investigation of the psychological characteristics of eating behavior in adolescent girls, which led to the development of a comprehensive, multifactorial predictive model of the psychological profile of adolescents with problematic eating behavior, integrating multiple psychological dimensions in a complex manner; the foundation of a multifaceted psychodiagnostic model; the focus on the specific cultural context and the development of new instruments and interventions; as well as the design

and implementation of an innovative psychological intervention program aimed at improving problematic eating behavior and its associated psychological aspects.

**Results contributing to the solution of the scientific problem** consist of: the development of a profile model of the adolescent with problematic eating behavior; the identification of significant correlations between appearance-related anxiety and problematic eating behaviors, between body image and maladaptive eating behaviors, as well as between social pressure and maladaptive eating attitudes/emotional eating; the development of a comprehensive multifactorial predictive profile model that provides an in-depth understanding of the factors associated with disordered eating behavior in adolescent girls, integrating physical appearance anxiety, body image, self-concept, social pressure, and perfectionism; and the design, implementation, and validation of a psychological intervention program aimed at addressing problematic eating behavior and its associated factors.

**The theoretical significance of the research.** The results of the theoretical-experimental study provide new knowledge and perspectives for understanding eating behavior in adolescent girls. The integrated model of the psychological profile of the adolescent with problematic eating behavior offers a new theoretical framework for understanding the complex interactions among the factors involved in this phenomenon. The psychological intervention program developed and validated within this research brings an important theoretical contribution through the innovative integration of various therapeutic approaches and their adaptation to the specific needs of adolescent girls with problematic eating behavior.

**The applied value of the research** consists in the development of a psychodiagnostic model of the structural components of eating behavior and the associated psychological dimensions, as well as the outline of a multifaceted psychological profile of the adolescent with problematic eating behavior that can be used in educational and clinical contexts. At the same time, an innovative psychological intervention program for optimizing eating behavior in adolescent girls was developed and implemented, grounded in an integrative and personalized approach, aimed at reducing maladaptive eating behaviors, improving body image, and strengthening a healthy relationship with food and one's own body.

**Approval and implementation of the research results.** The results of the theoretical-experimental research were discussed and approved during the meetings of the Doctoral School of Psychology and Social Assistance and the Department of Psychology at the „Ion Creangă” State Pedagogical University of Chişinău, presented at national and international scientific conferences, and published in specialized scientific journals. Important aspects of the investigation were implemented in psychological counseling practice and in the teaching process for undergraduate and master's students within the courses Developmental Psychology, Educational Psychology, Clinical Psychology of the Child and Adult, and Clinical Psychodiagnostics at the „Ion Creangă” State Pedagogical University of Chişinău.

**Publications related to the thesis.** The research results have been published in 12 specialized scientific works, including 4 articles in scientific journals and 8 articles in the proceedings of national and international conferences.

**Summary of the thesis structure.** The thesis consists of: annotation (in Romanian, English, and Russian), an introduction, three chapters, general conclusions and recommendations, a bibliography (302 references), 6 appendices, and 126 pages of main text. The paper includes 29 figures and 15 tables.

**Keywords:** *problematic eating behavior, adolescence, body image, self-image, psychological profile, socio-cultural pressure, personality factors, psychological counseling, mental health.*

## CONTENT OF THE THESIS

In the **Introduction**, the relevance and importance of the research topic are justified, the current situation in the field of study is described, and the aim, objectives, and hypotheses of the research are presented, along with the results obtained that contribute to solving an important scientific problem. The scientific novelty of the obtained results, their theoretical significance and practical value, as well as the manner in which the research findings are implemented, are also outlined and conceptualized.

**Chapter 1**, entitled “*Eating Behavior in Adolescence*”, examines and describes the most important conceptual delimitations and explanatory approaches to eating behavior, the psychological particularities of eating behavior in adolescent girls, as well as its determining factors. The vulnerabilities specific to adolescence in relation to the development of problematic eating behaviors are also analyzed. At the same time, the types of eating behavior and the associated interventions are presented, demonstrating the need for a differentiated approach tailored to the specific characteristics of each manifestation. The generalization of conceptual approaches highlights the existing gaps in current research, particularly the insufficient cultural adaptation of theoretical models and interventions to the Romanian context, from which current research directions and challenges emerge.

In **Chapter 2**, entitled *Experimental Research on the Psychological Characteristics of Eating Behavior in Adolescent Girls*, the research methodology and the findings of the exploratory experiment conducted with 206 adolescent girls aged 14 to 18 are presented. Initially, a screening questionnaire for problematic eating behavior was distributed to 526 adolescent girls from four high schools in Bucharest. After receiving 486 completed questionnaires, we randomly selected 103 adolescents with low/moderate risk of problematic eating behavior and 103 with high or very high risk.

**The aim of the constative research** is to examine the psychological characteristics of eating behavior in adolescent girls.

The objectives of the descriptive research are as follows:

O1. Conducting a comparative analysis of eating behaviors between adolescent girls with balanced eating behavior and those with problematic eating behavior.

O2. To investigate the relationships between eating behavior, individual psychological factors, and socio-cultural factors.

O3. To develop a psychological profile of the adolescent girl with problematic eating behavior.

**The general hypothesis of the confirmatory experiment** assumes that there are significant differences regarding the characteristics of eating behavior and the psychological correlates of eating behavior between adolescent girls with problematic eating behavior and those with balanced eating behavior.

Based on the aim, objectives, and general hypothesis presented, we formulated the following general hypotheses for the exploratory study:

The general hypothesis allowed the advancement of the following operational hypotheses:

Hypothesis 1. Adolescent girls with problematic eating behavior (PEB) present a distinct psychological profile compared to those with balanced eating behavior (BEB), manifested through specific configurations of cognitive, emotional, personality-related, and sociocultural factors.

Hypothesis 2. There are significant positive correlations between appearance-related anxiety (measured by AAI) and maladaptive eating attitudes (measured by EAT-26).

Hypothesis 3. There is a significant negative correlation between body image (assessed using the BESAA scale) and problematic eating behaviors.

Hypothesis 4. Social pressure related to physical appearance (measured by PSPS) is positively correlated with maladaptive eating attitudes and emotional eating.

Hypothesis 5. A predictive model including appearance-related anxiety, body image, self-concept, social pressure, and perfectionism will explain a significant proportion of the variance in problematic eating behaviors.

**The variables of the exploratory experiment** are considered dynamic and contextual, reflecting the complexity of the relationships among psychological factors, socio-cultural influences, and eating behavior in adolescent girls. This flexible approach to variables allows for a more nuanced exploration of the interactions and reciprocal effects among the factors studied.

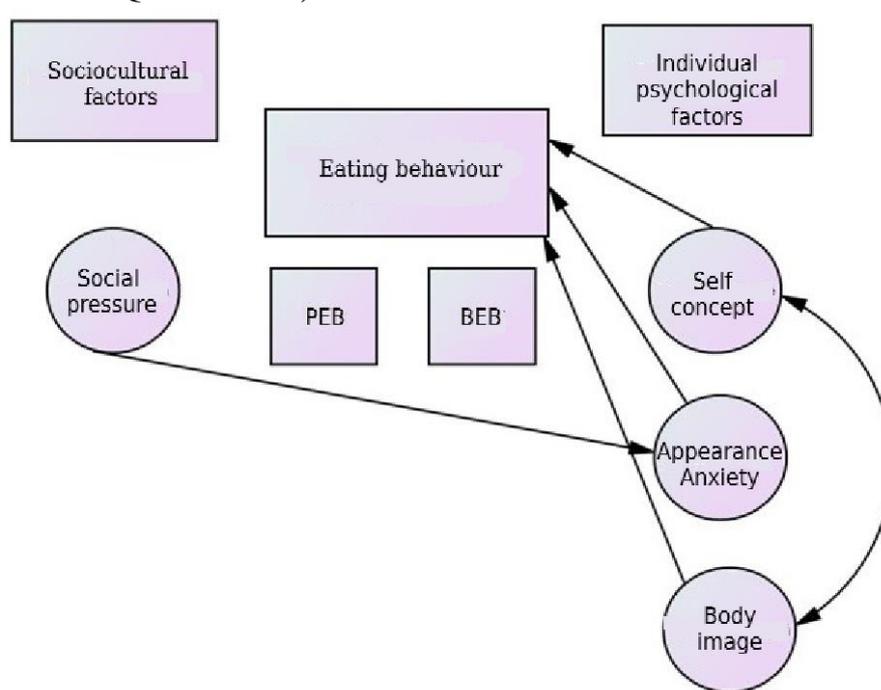
The main variables (eating behavior - eating attitudes, emotional eating) are primarily analysed as *independent variables* when defining the experimental groups. (Figure 2.1)

Individual psychological factors (self-concept, appearance-related anxiety, body image) and socio-cultural factors (social pressure) are examined both as *dependent variables* and as *potential predictors*, depending on the specific analytical model.

a. In comparative analyses between groups (BEB vs. PEB), group membership is considered the independent variable.

b. Psychological characteristics are considered dependent variables.

**Instruments used.** 1. CICAP-5A - Questionnaire for Identifying Problematic Eating Behavior in Adolescents; 2. EAT-26 - Eating Attitudes Test; 3. EEQ - Emotional Eater Questionnaire; 4. AAI - Appearance Anxiety Inventory; 5. BESAA - Body Esteem Scale for Adolescents and Adults; 6. SPPA - Self-Perception Profile for Adolescents; 7. BFI-10 - Big Five Inventory - 10 Item Scale; 8. HP5 - Health-Relevant Personality 5-Factor Inventory; 9. CPQ - Clinical Perfectionism Questionnaire; 10. Perceived Sociocultural Pressure Scale.



**Figure 2.1. Conceptual framework of the research. The complex interaction of influencing factors within the Psychological Profile of the Adolescent Girl with Problematic Eating Behavior (PEB)**

## Results of the experimental research on the psychological characteristics of eating behavior in adolescent girls

*Hypothesis 1 was validated*, with the results confirming the existence of a differentiated psychological profile among adolescent girls with problematic eating behavior, characterized by four main dimensions:

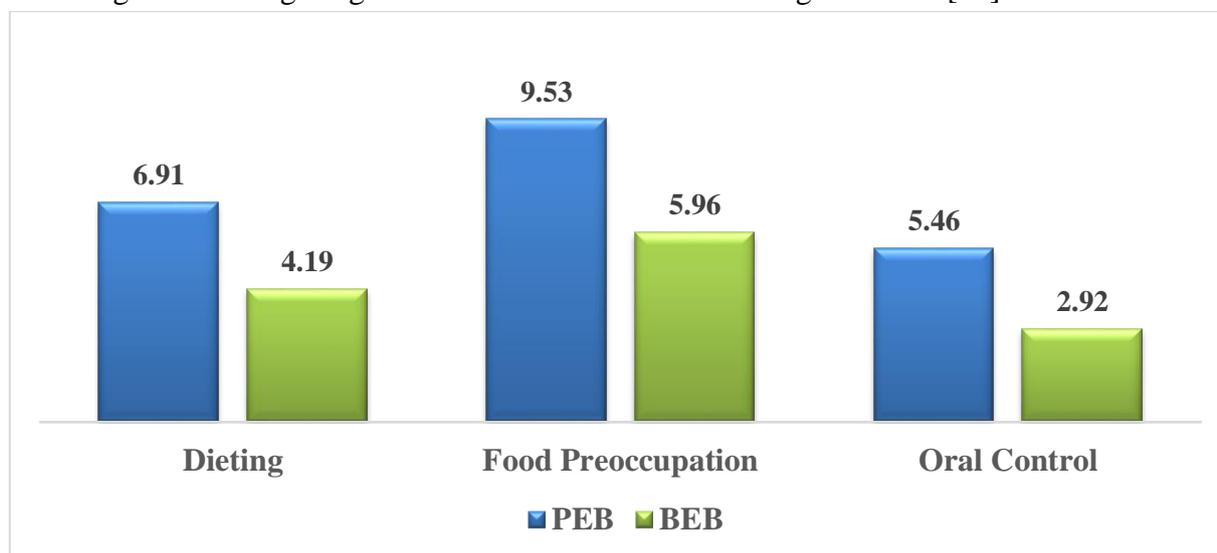
1. Specific cognitive-behavioral pattern: excessive preoccupation with dieting, food, and control; a pronounced tendency to use eating as a response to emotional stimuli.

2. Negative body image and fragile self-concept: heightened anxiety regarding physical appearance, low body esteem, and negative evaluations across multiple domains of self-concept.

3. Specific personality configuration: elevated Neuroticism, reduced Extraversion and Agreeableness, and a maladaptive pattern of health-relevant personality factors (increased Antagonism, increased Impulsivity, heightened Negative Affect, elevated Alexithymia, reduced Hedonic Capacity, and pronounced maladaptive Perfectionism).

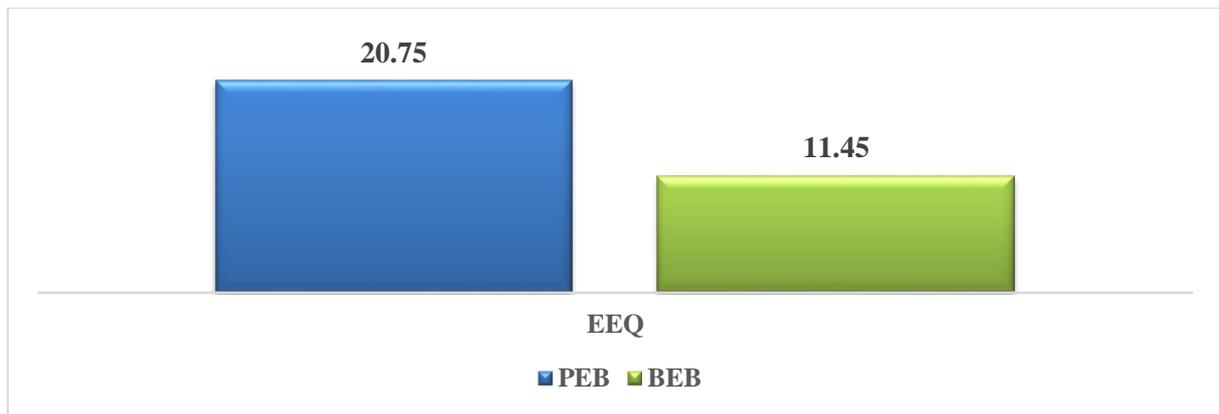
4. Heightened sensitivity to sociocultural pressure regarding physical appearance and body weight.

A. Eating behaviors and attitudes. The comparative analysis of eating attitudes measured with the EAT-26 confirms significant differences between the two groups across all evaluated dimensions (Figure 2.2). The results show that adolescent girls in the PEB group display significantly higher scores for Dieting ( $M = 6,91$ ,  $SD = 1,14$  vs.  $M = 4,19$ ,  $SD = 1,36$ ;  $U = 288$ ,  $p < 0,001$ ), Food Preoccupation ( $M = 9,53$ ,  $SD = 1,04$  vs.  $M = 5,96$ ,  $SD = 1,75$ ;  $U = 312$ ,  $p < 0,001$ ), and Oral Control ( $M = 5,46$ ,  $SD = 1,13$  vs.  $M = 2,92$ ,  $SD = 1,21$ ;  $U = 36$ ,  $p < 0,001$ ). These differences-significant across all dimensions-indicate a distinct cognitive and behavioral pattern characterized by excessive concern with dieting, food-related obsessions, and rigid control overeating. The findings align with theoretical models of eating disorders [40].



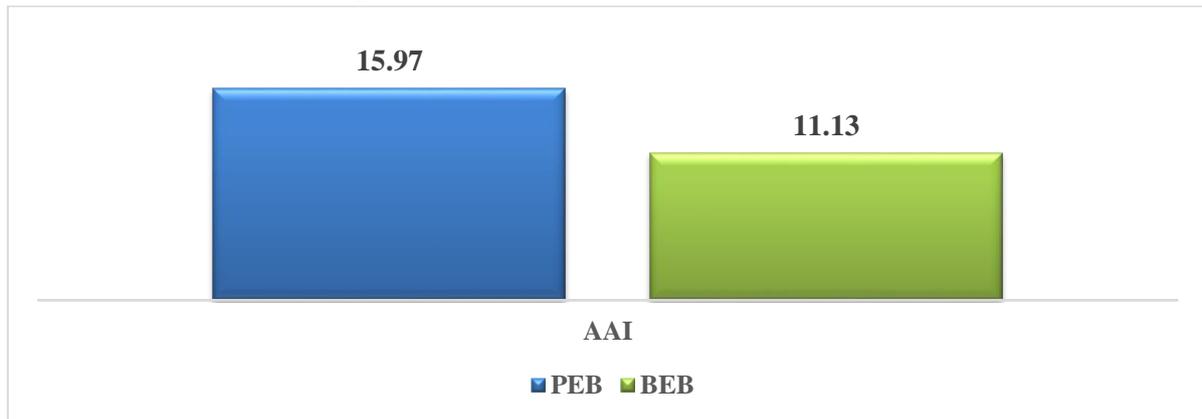
**Figure 1.2. Comparison between PEB and BEB means for EAT-26**

Complementarily, the assessment of emotional eating reveals substantial differences between the two groups (Figure 2.3). The PEB group shows a significantly higher level of emotional eating ( $M = 20,75$ ,  $SD = 1,44$ ) compared to the BEB group ( $M = 11,45$ ,  $SD = 5,95$ ),  $U = 412,5$ ,  $p < 0,001$ , confirming the pronounced tendency to use eating as an emotion-regulation mechanism. This finding aligns with recent research, which highlights the central role of emotional eating in the development and maintenance of eating disorders [2; 45].



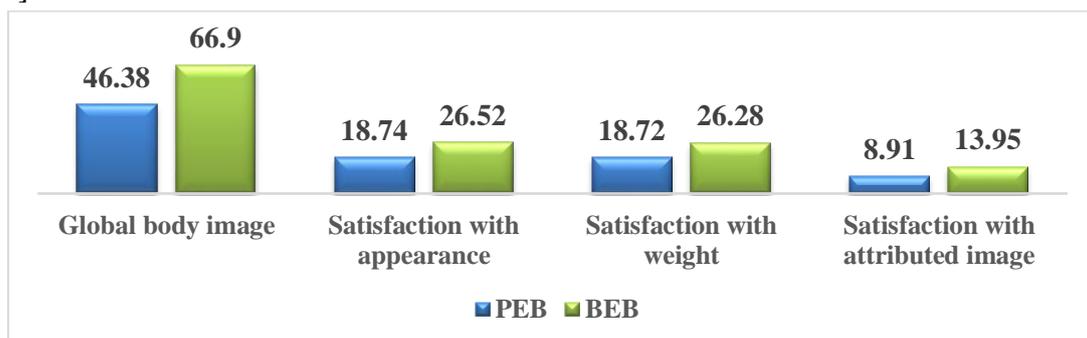
**Figure 2.2. Comparison between PEB and BEB means for EEQ**

*B. Body image and self-concept.* The differential profile of adolescent girls in the PEB group includes a distinct dimension related to body image and self-concept. Appearance-related anxiety is significantly higher among adolescents in the PEB group ( $M = 15,97$ ,  $SD = 3,09$ ) compared to those in the BEB group ( $M = 11,13$ ,  $SD = 1,61$ ),  $U = 171$ ,  $p < 0,001$  (Figure 2.4). This significant difference is consistent with research identifying social-physical anxiety as a central characteristic of eating disorders [14; 21; 45].



**Figure 2.3. Comparison between PEB and BEB means for AA**

The evaluation of body esteem reveals significant differences across all measured dimensions (Figure 2.5). Adolescent girls in the PEB group show significantly lower scores on all body-image dimensions: global body image, satisfaction with physical appearance, satisfaction with weight, and satisfaction with attributed image (all at  $p < 0,001$ ). The largest differences are observed in satisfaction with weight and global body image-dimensions identified in the specialized literature as central to the psychological profile of individuals with eating disorders [47; 28].

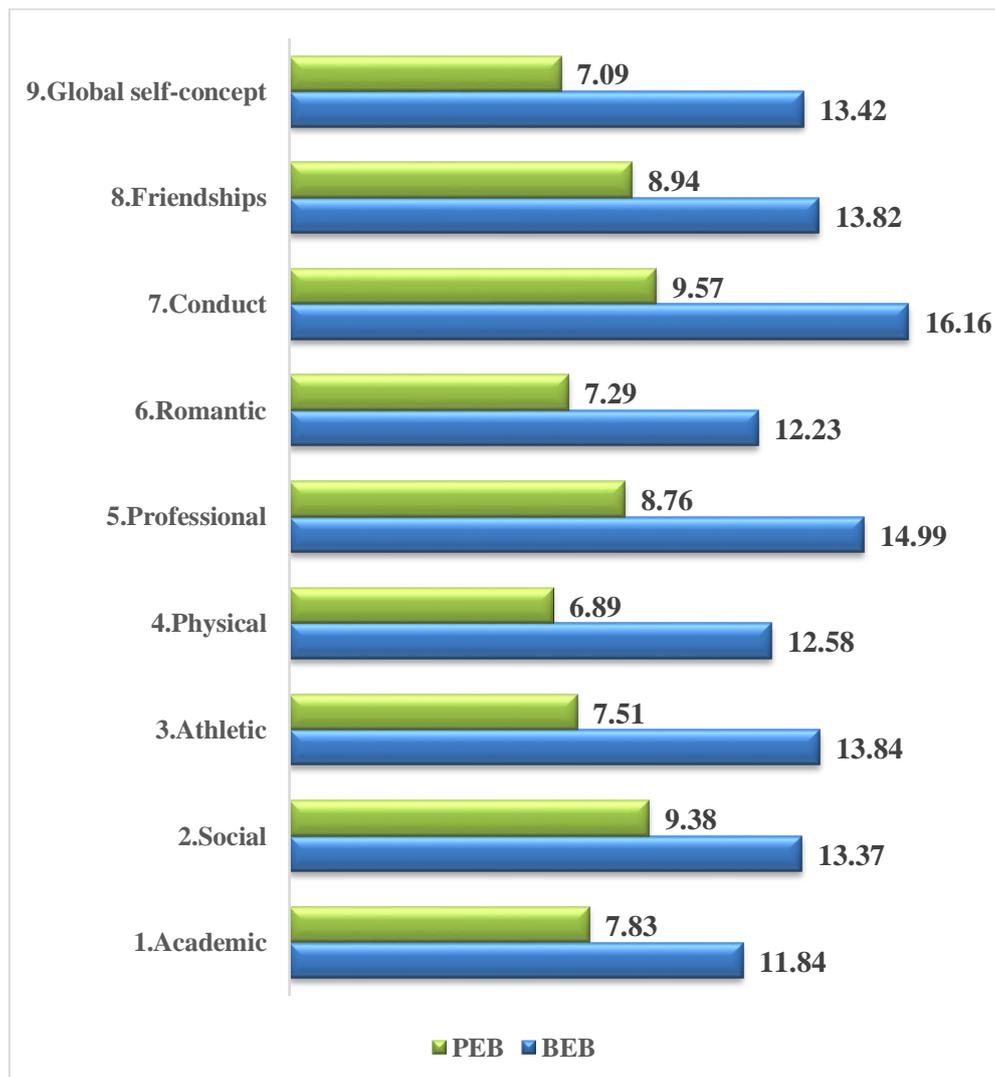


**Figure 2.4. Comparison between PEB and BEB means for BESAA**

The analysis of the multidimensional self-concept confirms significant differences across all evaluated domains (Figure 2.6). Adolescent girls in the PEB group show significantly lower self-evaluations in all nine dimensions of the self-concept (all at  $p < 0,001$ ).

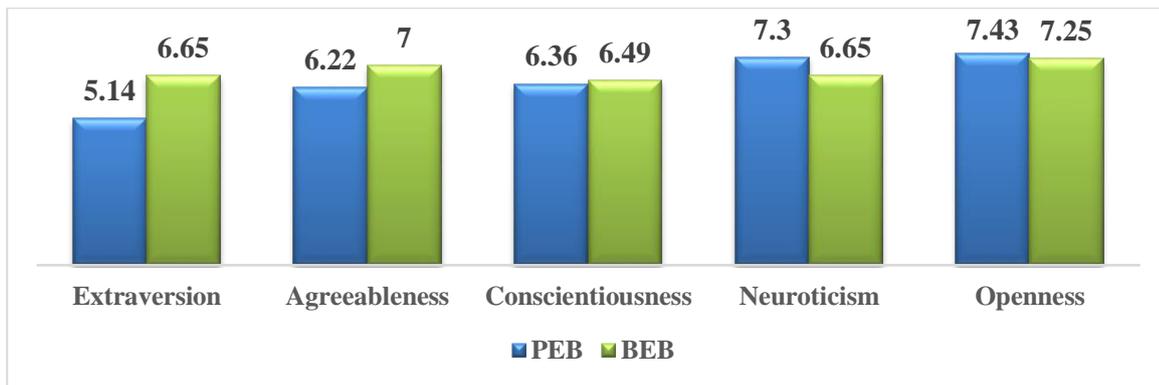
The magnitude of these differences indicates a global impact of problematic eating behavior on self-perception, affecting both domains directly related to appearance (physical appearance, romantic attractiveness) and those seemingly more distant (academic competence, behavioral conduct).

This finding supports a holistic approach to understanding and treating eating disorders, as proposed by recent transdiagnostic models and person-centred perspectives [25].



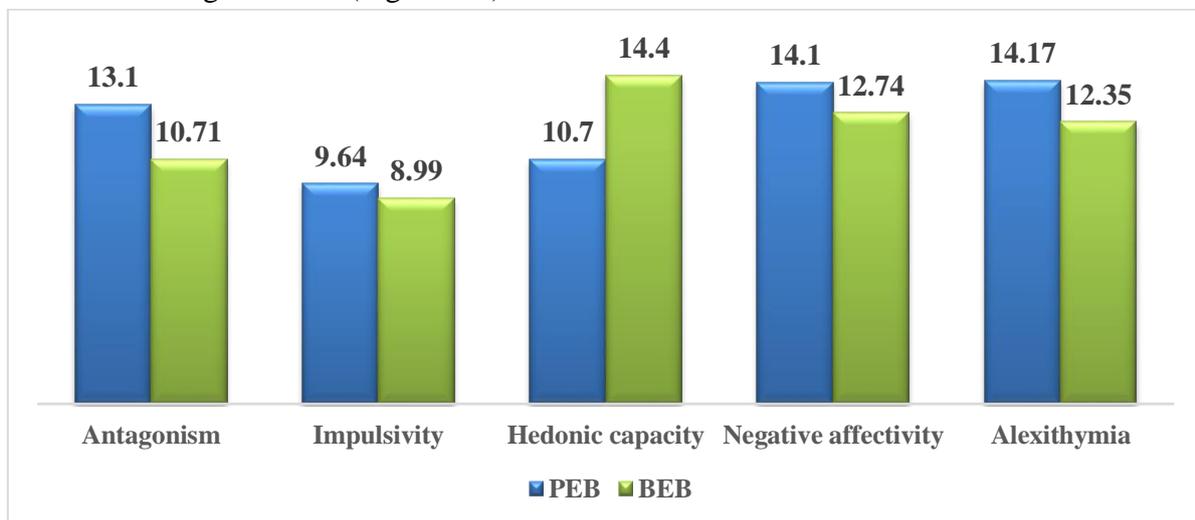
**Figure 2.5. Comparison between BEB and PEB for Self-concept dimensions SPPA**

*C. Personality factors.* The differential profile also includes specific configurations of personality traits (Figure 2.7). The analysis of personality traits according to the Big Five model highlights significant differences for Neuroticism ( $U = 4287,5$ ,  $p = 0,017$ ), Extraversion ( $U = 3050,5$ ,  $p < 0,001$ ), and Agreeableness ( $U = 3553$ ,  $p < 0,001$ ). These results confirm that adolescent girls with problematic eating behavior exhibit higher levels of Neuroticism and lower levels of Extraversion and Agreeableness—traits associated in the specialized literature [8] with increased vulnerability to developing eating disorders. The assessment of health-relevant personality factors further refines the differential profile.



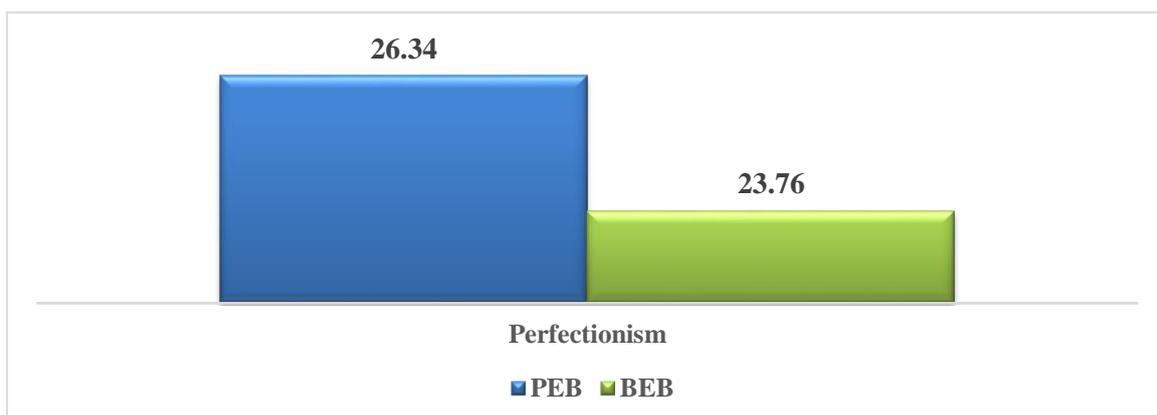
**Figure 2.6. Comparison between BEB and PEB for BFI-10**

Adolescent girls in the PEB group display a specific profile characterized by significantly higher levels of antagonism, impulsivity, negative affect, and alexithymia, as well as a significantly lower level of hedonic capacity (all at  $p < 0,05$ ). This complex pattern underscores the multidimensional nature of personality differences and their importance in understanding problematic eating behavior (Figure 2.8).



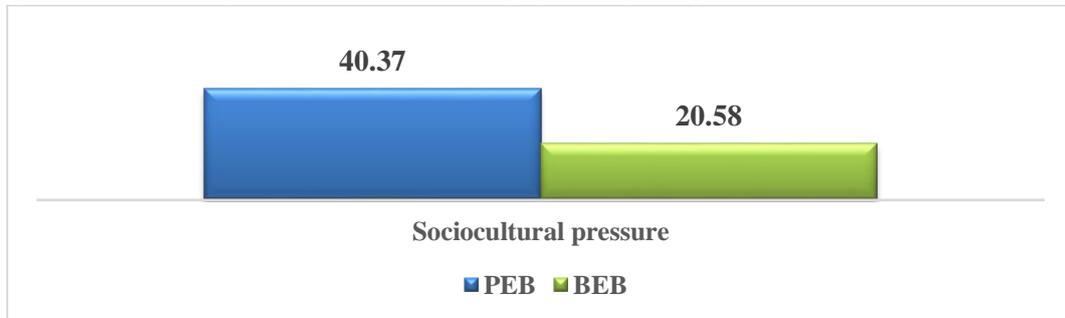
**Figure 2.7. Comparison between BEB and PEB for HP-5**

Adolescent girls in the PEB group exhibit a specific profile, characterized by significantly higher levels of maladaptive perfectionism ( $M = 26,34$ ,  $SD = 5,32$ ) compared to those in the BEB group ( $M = 23,76$ ,  $SD = 4,24$ ),  $U = 3766$ ,  $p < 0,001$ . This finding is consistent with research identifying perfectionism as both a risk factor and a maintaining factor for eating disorders [15; 40].



**Figure 2.8. Comparison between BEB and PEB for CPQ (Perfectionism)**

*D. Sociocultural pressure.* Perceived social pressure related to physical appearance represents another important component of the differential profile (Figure 2.10). The substantial difference between the PEB group (M = 40,37, SD = 5,74) and the BEB group (M = 20,58, SD = 6,67),  $U = 3$ ,  $p < 0,001$ , confirms that adolescent girls with problematic eating behavior perceive a significantly higher level of sociocultural pressure related to physical appearance and body weight. This component, identified in multiple studies as an important factor in the development of eating disorders, completes the differential psychological profile.



**Figure 2.9. Comparison between PEB and BEB for PSPS (Sociocultural pressure)**

This integrated psychological profile, empirically validated through significant differences across all evaluated dimensions, provides a comprehensive picture of the psychological characteristics of adolescent girls with problematic eating behavior.

Identifying this differentiated profile has important implications for the development of effective screening strategies, the implementation of prevention programs, and the design of therapeutic interventions tailored to the specific needs of this population.

The results align with contemporary theoretical models that conceptualize eating disorders as complex, multidetermined phenomena involving interactions among cognitive, emotional, personality-related, and sociocultural factors [41]. The empirical confirmation of this differential profile contributes to a more nuanced understanding of problematic eating behavior in adolescent girls and offers valuable directions for future research and clinical interventions .

**Hypothesis 2** was confirmed, demonstrating the existence of significant positive correlations between appearance-related anxiety (measured by AAI) and problematic eating attitudes (measured by EAT-26).

*Correlation between AAI and the Dieting subscale of EAT-26.* We identified a significant positive correlation ( $r = 0,58$ ,  $p < 0,001$ ) between appearance-related anxiety and dieting-related behaviors. Adolescent girls with high levels of appearance-related anxiety are more likely to engage in restrictive dieting behaviors. These behaviors appear to function as a means of controlling body weight and shape. The higher the appearance-related anxiety, the more pronounced the dieting behaviors. The results are consistent with previous studies showing a strong association between appearance-related anxiety and restrictive dieting behaviors [48].

*Correlation between AAI and the Food Preoccupation subscale of EAT-26.* We identified a significant positive correlation ( $r = 0,62$ ,  $p < 0,001$ ) between appearance-related anxiety and food-related preoccupations. Adolescent girls with high levels of anxiety about their physical appearance develop excessive concerns about food, calories, and controlling their food intake. As appearance-related anxiety increases, food-related preoccupations become more intense. These findings align with previous research highlighting the relationship between appearance-related anxiety and excessive food concerns [14; 43].

*Correlation between AAI and the Oral Control subscale of the EAT-26.* We identified a significant positive correlation ( $r = 0,49$ ,  $p < 0,001$ ) between appearance-related anxiety and oral control. Adolescent girls with high appearance-related anxiety display more rigid control over their eating behavior. This control includes severe restrictions and exaggerated self-monitoring regarding food. The higher the appearance-related anxiety, the more pronounced the oral control becomes. These results are consistent with previous studies that have demonstrated an association between appearance-related anxiety and excessive eating-control behaviors.

**Table 2.1. Associations between appearance-related anxiety and eating attitudes**

Dimension	EAT - Dieting	EAT - Food Preoccupation	EAT - Oral Control
Appearance-related worry	$r = 0,58^{**}$	$r = 0,62^{**}$	$r = 0,49^{**}$
	$p < 0,001$	$p < 0,001$	$p < 0,001$

Note: \*\* indicates a significant correlation at  $p < 0,00$

The hypothesis was validated, providing empirical support for the relationship between appearance-related anxiety and maladaptive eating attitudes. These results highlight the importance of addressing appearance-related anxiety in the prevention and treatment of eating-behavior disorders in adolescent girls.

**Hypothesis 3**, which assumed that there is a significant negative correlation between body image (assessed using the BESSA scale) and problematic eating behaviors, was confirmed. All aspects of body image show significant negative correlations with problematic eating behaviors.

*Global body image.* We identified strong negative correlations with all dimensions of problematic eating behavior. A more positive global body image is associated with significantly lower levels of problematic eating behaviors.

*Satisfaction with physical appearance.* Problematic eating behaviors correlate negatively with oral control, this being the strongest correlation ( $r = -0,627$ ,  $p < 0,001$ ).

*Satisfaction with weight.* We found the strongest negative correlations among all dimensions: a particularly strong correlation with oral control ( $r = -0,778$ ,  $p < 0,001$ ). Dissatisfaction with weight appears to be the most important factor associated with problematic eating behaviors.

*Satisfaction with attributed appearance.* Strong negative correlations were found with dieting and oral control, and a moderate correlation with food preoccupation. The perception of how adolescents believe they are seen by others significantly influences their eating behavior.

**Table 2.2. Associations between body-image-related self-esteem and eating attitudes**

Body-image dimension	EAT – Dieting	EAT – Food Preoccupation	EAT – Oral Control
Global body image	$r = -0,723^{**}$	$r = -0,747^{**}$	$r = -0,656^{**}$
	$p < 0,001$	$p < 0,001$	$p < 0,001$
Satisfaction with physical appearance	$r = -0,545^{**}$	$r = -0,550^{**}$	$r = -0,627^{**}$
	$p < 0,001$	$p < 0,001$	$p < 0,001$
Satisfaction with weight	$r = -0,756^{**}$	$r = -0,681^{**}$	$r = -0,778^{**}$
	$p < 0,001$	$p < 0,001$	$p < 0,001$
Satisfaction with attributed image	$r = -0,683^{**}$	$r = -0,543^{**}$	$r = -0,651^{**}$
	$p < 0,001$	$p < 0,001$	$p < 0,001$

Note: \*\* indicates a significant correlation at  $p < 0,00$

The results confirm the hypothesis that a negative body image is strongly associated with problematic eating behaviors in adolescent girls. These findings are consistent with existing theories, including the cognitive-behavioral theory of eating disorders, objectification theory, and multifactorial models of eating disorders. Satisfaction with one's weight shows the strongest negative correlations, suggesting that this specific aspect of body image may be particularly important in understanding and addressing problematic eating behaviors in adolescent girls.

**Hypothesis 4**, which proposed that social pressure related to physical appearance (measured by PSPS) is positively correlated with problematic eating attitudes and emotional eating, was validated. All analysed correlations are positive and statistically significant ( $p < 0,001$ )

**Table 2.3. Associations between sociocultural pressure and problematic eating behaviors**

Variables	Problematic Eating Behavior	Eating Attitudes	Emotional Eating
<b>Sociocultural pressure</b>	$r = 0,555^{**}$	$r = 0,461^{**}$	$r = 0,326^{**}$
	$p < 0,001$	$p < 0,001$	$p < 0,001$
<b>Problematic eating behavior</b>	-	$r = 0,758^{**}$	$r = 0,526^{**}$
		$p < 0,001$	$p < 0,001$
<b>Eating attitudes</b>	-	-	$r = 0,380^{**}$
			$p < 0,001$

Note: \*\* indicates a significant correlation at  $p < 0,00$

The main findings show that the strongest correlation is between problematic eating behavior and attitudes toward eating ( $r=0,758$ ,  $p<0,001$ ), and the weakest correlation: between social pressure and emotional eating ( $r=0,326$ ,  $p<0,001$ ).

*Interpretation of the specific relationships*

*Social pressure and problematic eating behavior.* Moderate to strong correlation ( $r = 0,555$ ). Increased social pressure is associated with a higher likelihood of developing problematic eating behavior patterns, a result consistent with the sociocultural model of eating disorders.

*Social pressure and attitudes toward eating.* Moderate correlation ( $r = 0,461$ ,  $p<0,001$ ). Higher social pressure is associated with more problematic attitudes toward food. Societal influences play a crucial role in shaping beliefs about food and body image.

*Social pressure and emotional eating.* Weak to moderate correlation ( $r = 0,326$ ,  $p<0,001$ ). Individuals experiencing higher social pressure may be more likely to engage in emotional eating behaviors. Social stress can trigger emotional eating as a coping mechanism.

*Problematic eating behavior and attitudes toward eating.* Strong correlation ( $r = 0,758$ ,  $p<0,001$ ). Problematic eating behaviors are closely linked to dysfunctional attitudes toward food. This result aligns with cognitive-behavioral models of eating disorders.

*Problematic eating behavior and emotional eating.* Moderate to strong correlation ( $r = 0,526$ ,  $p<0,001$ ). Individuals with problematic eating behaviors tend to use food as a way to cope with emotions. The result reflects the role of emotional regulation difficulties in eating disorders.

*Attitudes toward eating and emotional eating.* Weak to moderate correlation ( $r = 0,380$ ,  $p<0,001$ ). Problematic attitudes toward food may predispose individuals to emotional eating behaviors. Dysfunctional beliefs about food can contribute to maladaptive eating patterns.

The results support the existence of a complex interaction between social pressure, problematic eating behaviors, attitudes toward eating, and emotional eating. This network of relationships highlights the multifaceted nature of eating disorders and the importance of addressing both individual and societal factors in prevention and treatment strategies.

Emotional eating shows weaker correlations with the other variables compared to the rest of the associations, yet these correlations remain statistically significant, indicating that this aspect of eating behavior should not be overlooked in the context of social pressure and problematic eating attitudes.

**Hypothesis 5**, which assumed that a model including appearance-related anxiety, body image, self-concept, social pressure, and perfectionism would explain a significant proportion of the variance in problematic eating behaviors, was validated.

*Results of the multiple regression analysis:*

- Significant model:  $F(5, 200) = 54.76, p < 0,001$
- $R^2 = 0,58$  (58% of the variance in eating attitudes explained)
- Standardized coefficients (in order of importance):
  1. Global body image:  $\beta = -0,37, p < 0,001$
  2. Social pressure:  $\beta = 0,30, p < 0,001$
  3. Global self-concept:  $\beta = -0,23, p < 0,01$
  4. Perfectionism:  $\beta = 0,22, p < 0,01$
  5. Appearance-related worry:  $\beta = 0,18, p < 0,01$

The results lead us to the following *conclusions*: body image has the strongest negative effect - a positive body image is associated with healthier attitudes toward eating; social pressure has a significant positive effect - higher pressure correlates with more problematic eating attitudes; self-concept has a moderate negative effect - a positive self-esteem correlates with healthier eating attitudes; perfectionism has a moderate positive effect - higher levels are associated with more problematic eating attitudes; appearance-related worry has the weakest effect, yet remains significant - increased anxiety correlates with more problematic eating attitudes.

This multifactorial model confirms theoretical approaches suggesting that eating disorders are influenced by a combination of psychological and social factors. The substantial explanatory power (58%) highlights the importance of addressing all these factors simultaneously in prevention and intervention strategies for problematic eating behaviors in adolescents [42].

**Chapter 3**, entitled *Psychological Intervention Program for Eating Behavior in Adolescent Girls*, includes the formative research focused on improving problematic eating behavior through multifaceted psychological interventions, which led to improvements in body image, the development of protective personality factors, and a reduction in perceived sociocultural pressure. The aim of the formative experiment consists in the development, implementation, and systematic evaluation of the effectiveness of a multifaceted psychological intervention program designed for adolescent girls with problematic eating behavior. The multifaceted nature of the program targeted multiple levels of functioning: 1.The cognitive dimension (restructuring dysfunctional thoughts about the body, weight, and eating); 2.The emotional dimension (improving emotional regulation and developing distress tolerance); 3.The behavioral dimension (modifying maladaptive eating patterns); 4.The relational dimension (improving family dynamics and interpersonal relationships); 5.The bodily-sensory dimension (rebuilding a healthy relationship with one's own body).

*The specific objectives* of the formative research were: 1. Improving problematic eating behavior (reducing problematic tendencies and the risk of eating disorders, as well as decreasing emotional eating), 2. Developing and increasing self-awareness by improving self-concept, enhancing body self-image, reducing appearance-related anxiety, and cultivating a positive attitude and acceptance of personal qualities and limitations, 3. Personality development through

optimizing general personality factors, improving health-relevant traits, and reducing maladaptive perfectionism, 4. Reducing the perception of social pressure regarding the body.

*The independent variable* is represented by the Formative Program, with two modalities: 1. Participation in the program (experimental group - EG) and 2. Non-participation in the program (control group - CG). The formation of these groups was based on the principle of homogeneity.

*The dependent variables are:* 1. Problematic eating behavior, 2. Eating disorder tendencies (dieting, food preoccupation, oral control), 3. Emotional eating, 4. Appearance-related anxiety, 5. Body self-esteem, 6. Self-concept and its dimensions (academic, social, athletic, physical, professional, romantic, conduct, friendships, global), 7. Personality factors (Extraversion, Agreeableness, Neuroticism, Conscientiousness, Openness), 8. Health-relevant personality factors (Antagonism, Impulsivity, Hedonic capacity, Negative affectivity, Alexithymia), 9. Maladaptive perfectionism, 10. Perceived social pressure regarding physical appearance.

*The formative experiment hypothesis* is that multifaceted psychological interventions can facilitate the improvement of problematic eating behaviors (such as emotional eating, restriction, and overeating) in adolescent girls, as well as their psychological correlates.

The formative research was conducted with the participation of 24 adolescent girls divided into two homogeneous groups: the Experimental Group (EG) and the Control Group (CG). The EG participated in the psychological intervention program, which lasted 7 months.

The intervention program was based on the principles, techniques, and methods of cognitive-behavioral approaches, given that they represent the body of orientations with the strongest scientifically demonstrated efficacy [19]. Cognitive-behavioral therapies (CBT) are based on the premise that thoughts, beliefs, and individual interpretations affect how a person feels and behaves. Therefore, these therapies focus on identifying and improving dysfunctional thoughts, cognitive schemas, and behaviors.

*The models and approaches used in the intervention program were:* 1. The cognitive-behavioral model; 2. The rational-emotive and behavioral model (REBT); 3. The Solution-Focused Brief Therapy model (SFBT); 4. The psychological flexibility model according to ACT; 5. Acceptance and Commitment Therapy (ACT); 6. Mindfulness and body-awareness techniques; 7. Cognitive restructuring; 8. Gradual exposure; 9. Emotional regulation techniques; 10. Social skills training; 11. Psychoeducation; 12. Stress-management techniques; 13. The food and emotion journal; 14. Goal-setting and action planning.

The intervention program was initially designed as 14 separate modules, with the aim of comprehensively addressing aspects related to the improvement of problematic eating behaviors and their correlates. The duration of the program was 7 months, from February to October 2021, with a planned break during July and August. Two modules were scheduled each month. Each module lasted on average 2-3 hours per day, following homeroom class sessions.

*Analysis of the results of the psychological intervention program for eating behavior in adolescent girls*

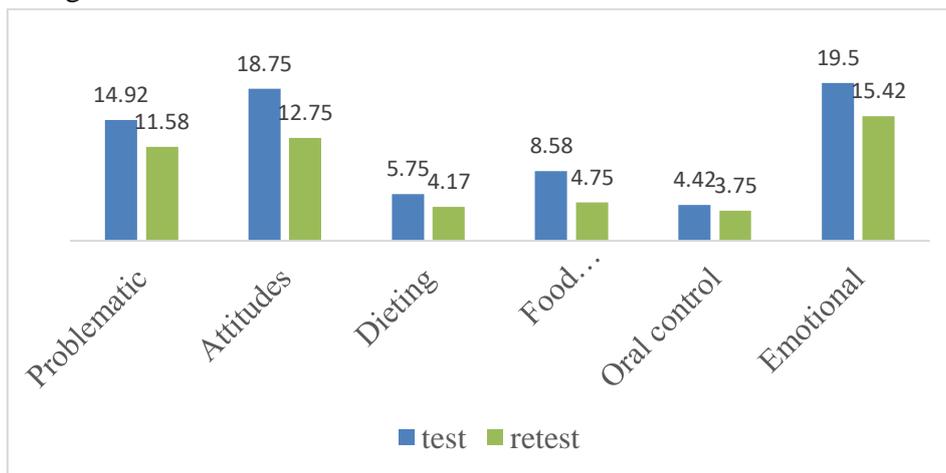
The intervention program “Metamorphosis” demonstrated significant effectiveness in improving problematic eating behavior and associated psychological factors among the adolescents in the experimental group. Below, I present a concise analysis of the results obtained on the main evaluated dimensions.

#### *A. Eating behaviors and attitudes*

The intervention produced statistically significant improvements across all examined variables.

- Problematic eating behavior (*CICAP-5*): Decrease from 14,92 to 11,58 ( $Z = -2,953$ ,  $p = 0,003$ ).
- Eating attitudes (*EAT-26 total*): Decrease from 18,75 to 12,75 ( $Z = -3,089$ ,  $p = 0,002$ )
  - Dieting: Decrease from 5,75 to 4,17 ( $Z = -3,071$ ,  $p = 0,002$ )
  - Food preoccupation: Decrease from 8,58 to 4,75 ( $Z = -3,088$ ,  $p = 0,002$ )
  - Oral control: Decrease from 4,42 to 3,75 ( $Z = -2,271$ ,  $p = 0,023$ )
- Emotional eating (*EEQ*): Decrease from 19,5 to 15,42 ( $Z = -3,068$ ,  $p = 0,002$ )

The most pronounced improvement was observed in the “Food preoccupation” dimension, suggesting a reduction in obsessive thoughts related to eating. The “Oral control” dimension showed the smallest decrease, indicating that aspects related to rigid control overeating are more resistant to change.

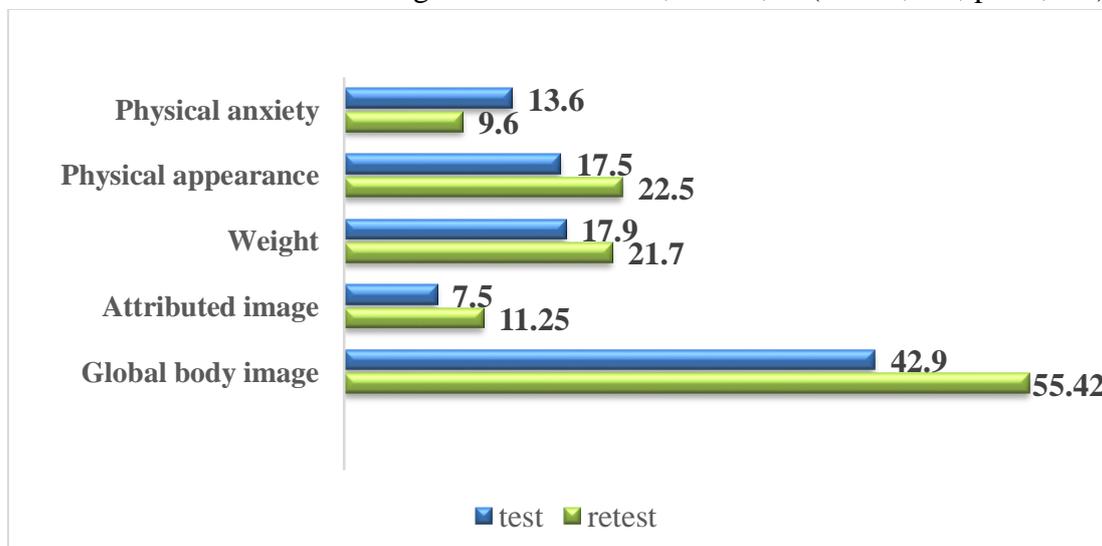


**Figure 3.1. Test–Retest Comparison for Eating Behavior Dimensions, EG**

### B. Body image and self-esteem

Significant improvements were obtained across all components of body image:

- Appearance-related worry (AAI): Decrease from 13,58 to 9,58 ( $Z = -3,081$ ,  $p = 0,002$ )
- Global body image (BESSA): Increase from 42,92 to 55,42 ( $Z = -3,068$ ,  $p = 0,002$ )
- Satisfaction with physical appearance: Increase from 17,5 to 22,5 ( $Z = -2,816$ ,  $p = 0,005$ )
- Satisfaction with weight: Increase from 17,92 to 21,67 ( $Z = -2,741$ ,  $p = 0,006$ )
- Satisfaction with attributed image: Increase from 7,5 to 11,25 ( $Z = -3,093$ ,  $p = 0,002$ )



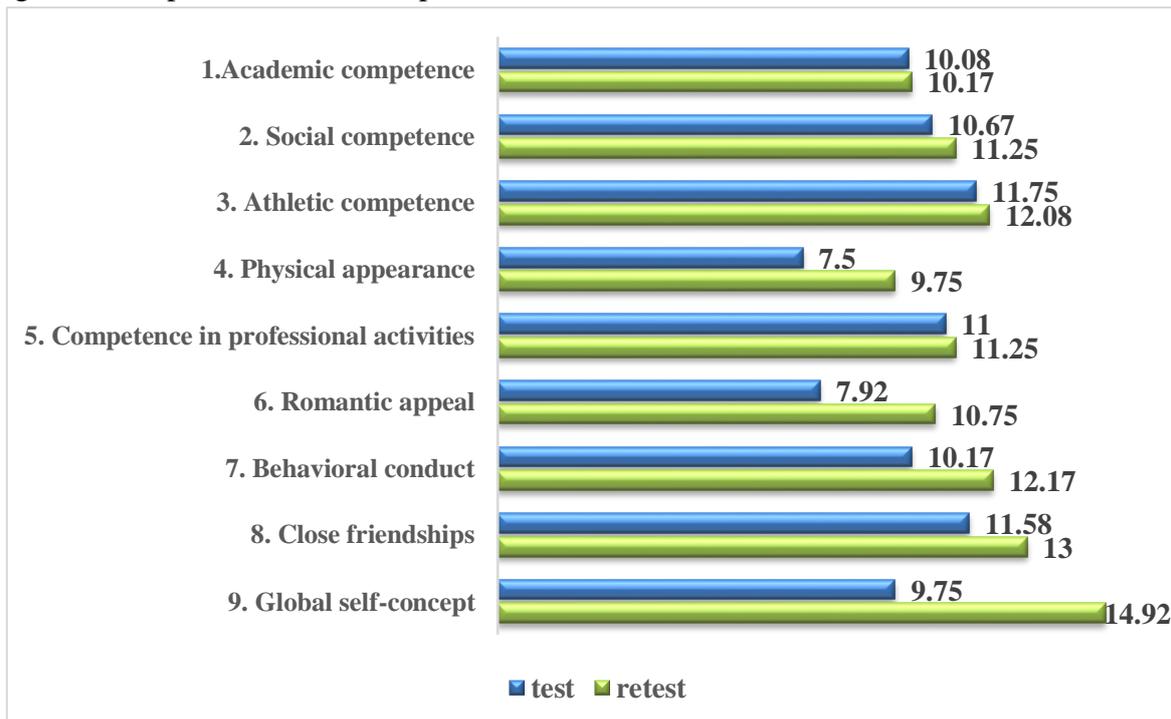
**Figure 3.2. Test–Retest Comparisons for AAI and BESSA, EG**

### 6. Self-Perception Profile (SPPA)

Regarding self-concept (SPPA), significant improvements were recorded in:

- Physical appearance: Increase from 7,5 to 9,75 ( $Z = -3,164$ ,  $p = 0,002$ )
- Romantic appeal: Increase from 7,92 to 10,75 ( $Z = -3,108$ ,  $p = 0,002$ )
- Behavioral conduct: Increase from 10,17 to 12,17 ( $Z = -2,989$ ,  $p = 0,003$ )
- Close friendships: Increase from 11,58 to 13 ( $Z = -2,859$ ,  $p = 0,004$ )
- Global self-concept: Substantial increase from 9,75 to 14,92 ( $Z = -3,071$ ,  $p = 0,002$ )

The academic, social, athletic, and professional domains remained relatively stable, suggesting that the intervention had a more pronounced impact on aspects directly related to body image and interpersonal relationships.

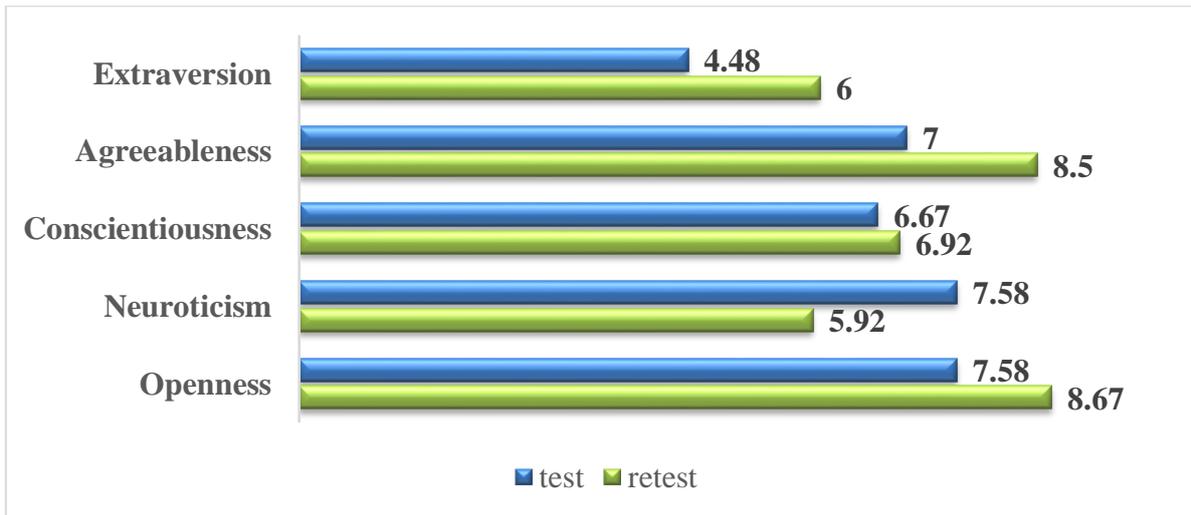


**Figure 3.3. Test–Retest Comparisons for Self-Concept Dimensions (SPPA), EG**

### C. Personality factors

1. BFI-10. Significant increases in extraversion, agreeableness, and openness, and a reduction in neuroticism.

- *Extraversion*. Increase from 4,58 (SD = 1,73) to 6 (SD = 1,3),  $Z = -2,919$ ,  $p = 0,004$ .
- *Agreeableness*. Increased significantly from 7 (SD = 1,41) to 8,5 (SD = 1,16),  $Z = -2,994$ ,  $p = 0,003$ .
- *Conscientiousness*. A slight, statistically non-significant increase was observed, from 6,67 (SD = 1,43) to 6,92 (SD = 1,5),  $Z = -1,732$ ,  $p = 0,083$ .
- *Neuroticism*. Decreased significantly from 7,58 (SD = 2,02) to 5,92 (SD = 0,99),  $Z = -2,831$ ,  $p = 0,005$ .
- *Openness*. A significant increase was recorded, from 7,58 (SD = 2,39) to 8,67 (SD = 1,96),  $Z = -2,919$ ,  $p = 0,004$ .

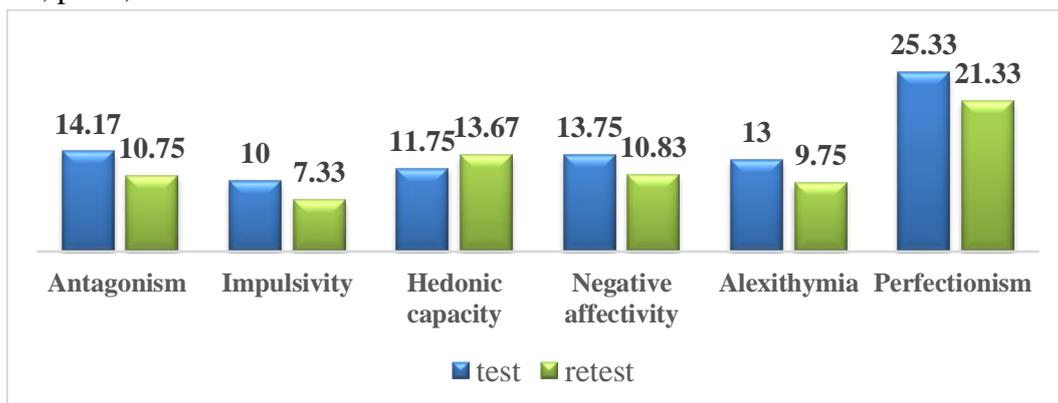


**Figure 3.4. Test–Retest Comparisons for Personality Factors (BFI-10), EG**

### 2. Health-related personality factors (HP5) and Perfectionism (CPQ)

Significant decreases were observed in antagonism, impulsivity, negative affectivity, and alexithymia, as well as a significant increase in hedonic capacity.

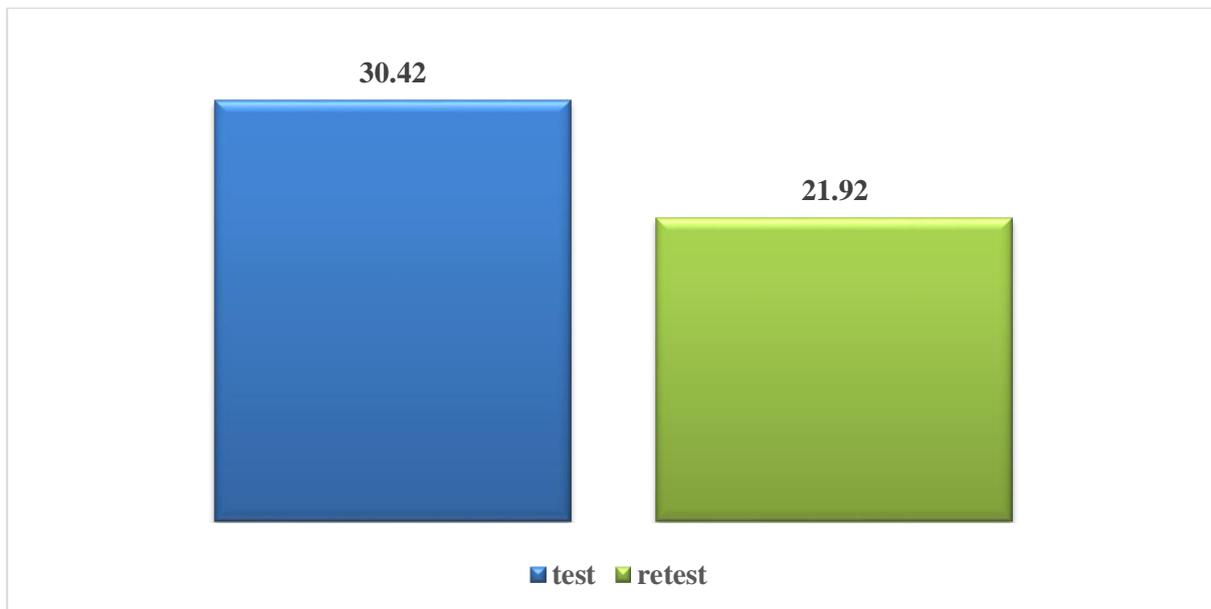
- *Antagonism* decreased significantly from 14,17 (SD = 3,56) to 10,75 (SD = 10,75),  $Z = -3,097$ ,  $p = 0,002$ .
- *Impulsivity* showed a significant decrease from 10,0 (SD = 4) to 7,33 (SD = 2,64),  $Z = -2,829$ ,  $p = 0,005$ .
- *Hedonic capacity* increased significantly from 11,75 (SD = 3,04) to 13,67 (SD = 2,49),  $Z = -2,994$ ,  $p = 0,003$ .
- *Negative affectivity* decreased significantly from 13,75 (SD = 3,1) to 10,83 (SD = 2,55),  $Z = -3,100$ ,  $p = 0,002$ .
- *Alexithymia* decreased significantly from 13 (SD = 1,75) to 9,75 (SD = 1,54),  $Z = -3,109$ ,  $p = 0,002$ .
- *Perfectionism* decreased significantly from 25,33 (SD = 5,15) to 21,33 (SD = 3,79),  $Z = -2,949$ ,  $p = 0,003$ .



**Figure 3.5. Test–Retest Comparison for Health-Relevant Personality Traits (HP5) and Perfectionism (CPQ), EG**

### 3. Sociocultural pressure

A significant reduction in the perception of social pressure (PSPS) was recorded, from 30,42 to 21,92 ( $Z = -3,075$ ,  $p = 0,002$ ), indicating that the participants developed greater resistance to societal pressures regarding beauty and body-weight ideals.



**Figure 3.6. Test–Retest Comparison for Social pressure (PSPS), GE**

In conclusion, the “Metamorphosis” Program proved to be effective in improving problematic eating behaviors and associated psychological factors in adolescent girls. The multifaceted approach-targeting cognitive restructuring, enhanced emotional regulation, modification of maladaptive eating patterns, improvement of interpersonal relationships, and the rebuilding of a healthy relationship with one’s own body-generated statistically significant results across all evaluated dimensions. These findings are consistent with previous studies demonstrating the effectiveness of cognitive-behavioral interventions and prevention programs for eating-related disorders in adolescents [44].

The comparative analysis highlighted two essential aspects: (1) the stability of the variables measured in the control group between the test and retest stages, and (2) significant differences between the experimental and control groups at retesting, indicating the effectiveness of the intervention.

**Table 3.1. Test and Retest comparisons of the Control Group (CG)**

Dimension	Test (Mean)	Retest (Mean)	p-value
<b>Eating behavior</b>			
CICAP	15,25	15,00	>0,05
EAT-26 Total	19,08	18,92	>0,05
EEQ	19,83	19,42	0,059
<b>Body image</b>			
AAI	13,67	13,08	0,197
BESSA Global	8,67	8,83	0,263
Satisfaction with weight	5,83	6,08	0,059
<b>Personality</b>			
Neuroticism	7,50	7,83	0,102
Alexithymia	14,58	14,50	>0,05
<b>Self-perception</b>			
Social competence	11,25	8,42	0,067
Global self-concept	10,58	9,58	0,086
<b>Sociocultural pressure</b>			
PSPS	30,75	30,25	0,655

In the control group (Table 3.1), the comparison of test-retest results showed stability across all measured variables. Problematic eating behaviors, eating attitudes, body image, self-esteem, personality traits, and the perception of sociocultural pressure displayed only minor, statistically non-significant changes ( $p > 0,05$ ), confirming the reliability of the instruments used and the absence of significant external influences during the study period. The only variables that approached the threshold of statistical significance were emotional eating, satisfaction with weight, social competence, and global self-concept; however, these remained within the limits of normal fluctuations.

**Table 3.2. Retest Comparisons between the Experimental Group (EG) and the Control Group (CG) at**

<b>Dimension</b>	<b>EG (Mean)</b>	<b>CG (Mean)</b>	<b>p-value</b>
<b>Eating behavior</b>			
CICAP	7,58	15,00	<0,001
EAT-26 Total	12,75	18,92	<0,001
EEQ	15,42	19,58	<0,001
<b>Body image</b>			
AAI	9,58	13,08	0,062
BESSA Global	8,33	8,83	0,198
Satisfaction with weight	5,25	6,08	0,055
<b>Personality</b>			
Agreeableness	8,50	5,83	<0,001
Neuroticism	5,90	7,83	<0,001
Alexithymia	9,75	14,50	<0,001
<b>Self-perception</b>			
Social competence	14,08	8,42	0,004
Global self-concept	14,92	9,58	<0,001
<b>Sociocultural pressure</b>			
PSPS	21,92	30,25	<0,001

The comparison between the experimental group and the control group at the retest stage (Table 3.2) revealed significant benefits of the intervention. Participants in the EG showed statistically significant improvements ( $p < 0,001$ ) in problematic eating behavior (CICAP), eating attitudes (EAT-26), emotional eating (EEQ), social and athletic competence, physical appearance, and global self-concept. Improvements were also observed in the personality profile, with increases in agreeableness and reductions in neuroticism and alexithymia. The perception of sociocultural pressure decreased significantly in the EG compared to the CG ( $p < 0,001$ ). These results demonstrate the effectiveness of the intervention, with more pronounced effects on eating behaviors, self-concept, and the perception of social pressure, while some aspects of body image showed positive trends that did not reach the threshold of statistical significance, suggesting that a longer period may be needed for changes in these areas to fully manifest.

## GENERAL CONCLUSIONS AND RECOMMENDATIONS

**Problematic eating behavior in adolescent girls** represents a significant concern in the fields of public health, developmental psychology, and clinical psychology, with profound implications for adolescents' physical, psychological, and social development. This paper explored the complexity of the factors that influence eating behavior in adolescent girls, as well as the effectiveness of various intervention and prevention strategies. Our research combined a comprehensive theoretical analysis with a rigorous experimental study, offering a holistic perspective on this multifaceted phenomenon. We examined the role of psychological, social, and cultural factors in shaping eating attitudes and behaviors, paying particular attention to the impact of body image, self-esteem, social pressure, and personality traits.

The conclusions and recommendations presented below are the result of a careful analysis of the collected data and the relevant literature. They provide a synthesis of our main findings and propose concrete courses of action for researchers, psychologists, school counselors, clinicians, educators, and policymakers in the field of public health. These conclusions and recommendations are intended to guide future efforts in research, prevention, and intervention regarding problematic eating behaviors in adolescent girls. They emphasize the need for a comprehensive, multidisciplinary, and culturally adapted approach that considers the complexity and diversity of adolescents' experiences in contemporary society.

The analysis of theoretical and experimental results allowed us to draw the following conclusions:

1. Eating behavior in adolescent girls is a complex phenomenon influenced by a multitude of psychological, social, and cultural factors. This conclusion highlights the multifactorial nature of eating behavior in adolescence. Psychological factors may include self-esteem, body image, and coping mechanisms. Social factors may involve peer pressure, family relationships, and media influence. Cultural factors may include culturally specific beauty ideals, dietary norms, and societal attitudes toward weight and body shape.

2. Appearance-related anxiety, negative body image, and low self-esteem are key determinants in the development of problematic eating behaviors. Adolescent girls with a negative body image and low self-esteem are more likely to adopt unhealthy eating behaviors as a coping mechanism or to improve their appearance. Internal processes such as intense self-criticism, rumination, and negative comparisons with idealized personal standards contribute to heightened appearance-related anxiety and the maintenance of these problematic behaviors.

3. Social pressure and unrealistic beauty standards play a significant role in shaping maladaptive eating attitudes and behaviors in adolescent girls. Media, social networks, and peer pressure often promote unattainable beauty standards, leading to body dissatisfaction and problematic eating behaviors. These externalized messages are frequently internalized by adolescents, resulting in constant social comparison and distorted self-evaluation standards. Repeated exposure to such aesthetic models fosters a perfectionistic orientation toward the body, increasing emotional vulnerability and encouraging compensatory eating strategies. The internalization of these social norms can disrupt the development of a healthy relationship with one's body, contributing to a cycle of negative self-evaluation and maladaptive eating behaviors.

4. Personality traits, particularly maladaptive perfectionism, are correlated with an increased risk of developing eating-related disorders. Maladaptive perfectionism can lead to setting unrealistically high standards for physical appearance and adopting extreme eating behaviors to meet these standards. This type of perfectionism is often associated with rigid and conditional self-evaluation, where personal worth is perceived as directly dependent on idealized

aesthetic criteria. Persistent self-criticism and intolerance of mistakes may intensify restrictive or compensatory behaviors, as any deviation is perceived as a personal failure. The cognitive processes specific to maladaptive perfectionism contribute to maintaining and worsening these dysfunctional patterns. The interaction between perfectionism and negative body image creates a psychologically vulnerable context, predisposing adolescent girls to the development of eating-related disorders.

5. Multidimensional interventions that simultaneously address psychological, behavioral, and social aspects are the most effective in treating and preventing problematic eating behaviors and in improving the underlying psychological factors and the social context in which they occur.

### **Recommendations for Implementation**

1. *Education and prevention.* Implement nutritional and psychological education programs in schools, providing adolescent girls with information and skills to develop a healthy relationship with food and their own bodies.

2. *Public awareness and professional training.* Develop awareness campaigns aimed at changing social norms regarding body image, alongside training mental-health and nutrition professionals in techniques specifically tailored for adolescents.

3. *Family support and interdisciplinary collaboration.* Create support programs for parents and promote collaboration among specialists from various fields to ensure comprehensive care for adolescent girls with problematic eating behaviors.

4. *Adaptation and innovation.* Integrate modern technologies (mobile apps, online platforms) and adapt interventions to the cultural and social context of the beneficiaries, while also promoting public policies that regulate body representation in the media.

5. *Ongoing research.* Encourage longitudinal studies and explore new research directions regarding the evolution of eating behaviors, the impact of the digital environment, protective factors, and the psychological mechanisms involved, to develop personalized and effective interventions.

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## LIST OF ABBREVIATIONS

**CAP** – (Adolescents with) Problematic Eating Behavior

**CAE** – (Adolescents with) Balanced Eating Behavior

**CICAP-5A** – Questionnaire for Identifying Problematic Eating Behavior in Adolescents

**EAT-26** – Eating Attitudes Test

**EEQ** – Emotional Eater Questionnaire

**AAI** – Appearance Anxiety Inventory

**BESAA** – Body-Esteem Scale for Adolescents and Adults

**BFI-10** – Big Five Inventory – 10 Item Scale

**HP5** – Health-Relevant Personality Traits

**CPQ** – Clinical Perfectionism Questionnaire

**PSPS** – Perceived Sociocultural Pressure Scale

**EG** – Experimental Group

**CG** – Control Group

## ADNOTARE

**Mariana Ștefan. Particularități psihologice ale comportamentului alimentar la adolescente.  
Teză de doctor în Psihologie. Chișinău, 2026.**

**Structura tezei** este compusă din: adnotări în trei limbi (română, engleză și rusă), lista abrevierilor, lista tabelor, lista figurilor, introducere, trei capitole, concluzii generale și recomandări, bibliografie din 302 de titluri, 6 anexe, 126 de pagini de text de bază, 29 de figuri și 15 de tabele. Ideile fundamentale cât și rezultatele obținute în urma cercetării, au fost publicate în 12 lucrări științifice.

**Cuvinte cheie:** comportament alimentar problematic, adolescență, imagine corporală, imagine de sine, profil psihologic, presiune socio-culturală, factori de personalitate, consiliere psihologică, sănătate mentală.

**Domeniu de studiu:** Psihologia adolescentului.

**Scopul cercetării** este identificarea particularităților psihologice ale comportamentului alimentar la adolescente și dezvoltarea unui program de intervenție psihologică multifacțat orientat spre ameliorarea comportamentelor alimentare problematice, imaginii corporală și imaginii de sine, consolidarea factorilor de personalitate protectivi și diminuarea percepției presiunii sociale privind aspectul fizic și greutatea corporală.

**Obiectivele cercetării:** analiza teoretică a abordărilor conceptuale privind comportamentul alimentar la adolescente; evaluarea comparativă a particularităților psihologice ale comportamentului alimentar între adolescentele cu comportament alimentar problematic și cele cu comportament alimentar echilibrat, pentru a identifica diferențele semnificative în profilurile psihologice ale acestora; investigarea relațiilor complexe dintre componentele comportamentului alimentar (atitudini alimentare, alimentație emoțională) și diversele dimensiuni psihologice relevante, precum anxietatea privind aparența fizică, stima corporală, concepția de sine, factorii de personalitate și percepția presiunii socio-culturale; elaborarea profilului psihologic comprehensiv al adolescentei cu comportament alimentar problematic; dezvoltarea, implementarea și evaluarea eficienței unui program de intervenție psihologică multifacțat destinat adolescentelor cu comportament alimentar problematic, urmărind ameliorarea comportamentului alimentar problematic și a atitudinilor alimentare dezadaptative, îmbunătățirea imaginii corporale și a concepției de sine, consolidarea factorilor de personalitate protectivi.

**Noutatea și originalitatea științifică a rezultatelor obținute** rezidă în realizarea unui demers teoretico-experimental privind particularitățile psihologice ale comportamentului alimentar la adolescente care a condus la elaborarea unui model predictiv multifactorial, comprehensiv de profil psihologic al adolescentelor cu comportament problematic ce integrează în mod complex multiple dimensiuni psihologice; fundamentarea unui model psihodiagnostic multifacțat, focalizarea pe contextul cultural specific și dezvoltarea unor instrumente și intervenții noi; construirea și implementarea unui program de intervenție psihologică inovator destinat ameliorării comportamentului alimentar problematic și a aspectelor psihologice conexe.

**Rezultatele obținute care contribuie la soluționarea problemei științifice** constau în: elaborarea unui model de profil al adolescentei cu comportament alimentar problematic; identificarea corelațiilor semnificative între anxietatea privind aspectul fizic și comportamentele alimentare problematice, între imaginea corporală și comportamentele alimentare dezadaptative, precum și între presiunea socială și atitudinile alimentare dezadaptative/alimentația emoțională; dezvoltarea unui model predictiv multifactorial, comprehensiv de profil care oferă o înțelegere aprofundată a factorilor asociați comportamentului alimentar dezordonat la adolescente, integrând anxietatea fizică, imaginea corporală, concepția de sine, presiunea socială și perfecționismul; proiectarea, implementarea și validarea unui program de intervenție psihologică destinat abordării comportamentului alimentar problematic și factorilor asociați.

**Semnificația teoretică a cercetării.** Rezultatele cercetării teoretico-experimentale furnizează noi cunoștințe și perspective de înțelegere a comportamentului alimentar la adolescente. Modelul integrat de profil psihologic al adolescentei cu comportament alimentar problematic oferă un cadru teoretic nou pentru înțelegerea interacțiunilor complexe dintre factorii implicați în acest fenomen. Programul de intervenție psihologică elaborat și validat în cadrul acestei cercetări aduce o contribuție teoretică importantă prin integrarea inovatoare a diverselor abordări terapeutice și adaptarea lor la nevoile specifice ale adolescentelor cu comportament alimentar problematic.

**Valoarea aplicativă a cercetării** constă în elaborarea unui model psihodiagnostic al componentelor structurale ale comportamentului alimentar și al dimensiunilor psihologice asociate, precum și conturarea unui profil psihologic multifacțat al adolescentei cu comportament alimentar problematic care poate fi utilizat în contexte educaționale și clinice. Totodată a fost elaborat și implementat un program inovator de intervenție psihologică pentru optimizarea comportamentului alimentar la adolescente, fundamentat pe o abordare integrativă și personalizată, orientat spre reducerea comportamentelor alimentare dezadaptative, îmbunătățirea imaginii corporale și consolidarea unei relații sănătoase cu alimentația și propriul corp.

**Implementarea rezultatelor științifice** Rezultatele cercetării teoretico-experimentale au fost implementate în activitatea de consiliere psihologică și în procesul didactic de pregătire a studenților și masteranzilor în cadrul disciplinelor Psihologia dezvoltării, Psihologia educației, Psihologia clinică a copilului și adultului, Psihodiagnostic clinic din cadrul Universității Pedagogice de Stat „Ion Creangă” din Chișinău.

## ANNOTATION

**Mariana Ștefan. Psychological Particularities of Eating Behavior in Adolescent Girls.  
Doctoral Thesis in Psychology. Chisinau, 2026.**

**The structure of the thesis** consists of: annotations in three languages (Romanian, English, and Russian), list of abbreviations, list of tables, list of figures, introduction, three chapters, general conclusions and recommendations, bibliography of 302 titles, 6 appendices, 126 pages of main text, 29 figures, and 15 tables. The fundamental ideas, as well as the results obtained from the research, have been published in 12 scientific papers.

**Keywords:** problematic eating behavior, adolescence, body image, self-image, psychological profile, sociocultural pressure, personality factors, psychological counseling, mental health.

**Field of study:** Adolescent Psychology.

**The aim of the research** is to identify the psychological characteristics of eating behavior in adolescent girls and to develop a multifaceted psychological intervention program aimed at improving problematic eating behaviors, body image, and self-image, strengthening protective personality factors, and reducing the perception of social pressure regarding physical appearance and body weight.

**The research objectives:** theoretical analysis of conceptual approaches regarding eating behavior in adolescent girl; comparative evaluation of the psychological characteristics of eating behavior between adolescent girls with problematic eating behavior and those with balanced eating behavior, in order to identify significant differences in their psychological profiles; investigation of the complex relationship between components of eating behavior (eating attitudes, emotional eating) and various relevant psychological dimensions such as appearance-related anxiety, body esteem, self-concept, personality factors, and perceived socio-cultural pressure: development of a comprehensive psychological profile of the adolescent girl with problematic eating behavior; development, implementation, and evaluation of the effectiveness of a multifaceted psychological intervention program designed for adolescent girls with problematic eating behavior, aiming to improve problematic eating behaviors and maladaptive eating attitudes, enhance body image and self-concept, and strengthen protective personality factors.

**The scientific novelty and originality** of the obtained results lie in conducting a theoretical-experimental approach to the psychological characteristics of eating behavior in adolescent girls which led to the development of a comprehensive multifactorial predictive model of the psychological profile of adolescents with problematic eating behavior, integrating multiple psychological dimensions in a complex manner; substantiating a multifaceted psychodiagnostic model, focusing on the specific cultural context, and developing new tools and interventions; designing and implementing an innovative psychological intervention program aimed at improving problematic eating behavior and related psychological aspects.

**The results contributing to solving the scientific problem consist of:** developing a profile model of the adolescent girl with problematic eating behavior; identifying significant correlations between appearance-related anxiety and problematic eating behaviors, between body image and maladaptive eating behaviors, as well as between social pressure and maladaptive eating attitudes/emotional eating; developing a comprehensive multifactorial predictive profile model that provides an in-depth understanding of the factors associated with problematic eating in adolescent girls, integrating physical appearance anxiety, body image, self-concept, social pressure, and perfectionism; designing, implementing, and validating a psychological intervention program aimed at addressing problematic eating behavior and associated factors.

**The theoretical significance of the research.** The results of the theoretical-experimental research provide new knowledge and perspectives for understanding eating behavior in adolescent girls. The integrated psychological profile model of the adolescent girl with problematic eating behavior offers a new theoretical framework for understanding the complex interactions among the factors involved in this phenomenon. The psychological intervention program developed and validated within this research makes an important theoretical contribution through the innovative integration of various therapeutic approaches and their adaptation to the specific needs of adolescent girls with problematic eating behavior.

**The applied value of the work** lies in the development of a psychodiagnostic model of the structural components of eating behavior and associated psychological dimensions, as well as in outlining a multifaceted psychological profile at the adolescent girl with problematic eating behavior that can be used in educational and clinical contexts. Additionally, an innovative psychological intervention program was developed and implemented to optimize eating behavior in adolescent girls, based on an integrative and personalized approach aimed at reducing maladaptive eating behaviors, improving body image, and strengthening a healthy relationship with food and one's own body.

**The implementation of scientific results.** The results of the theoretical-experimental research were implemented in psychological counseling practice and in the teaching process for undergraduate and master's students within the courses Developmental Psychology, Educational Psychology, Clinical Psychology of Children and Adults, and Clinical Psychodiagnostic at the State Pedagogical University „Ion Creangă” of Chișinău.

## АННОТАЦИЯ

Мариана Штефан. Психологические особенности пищевого поведения у девочек-подростков.  
Докторская диссертация по психологии. Кишинев, 2026.

**Структура диссертации.** Работа состоит из аннотаций на трех языках (румынском, английском и русском), списка сокращений, списка таблиц, списка рисунков, введения, трех глав, общих выводов и рекомендаций, библиографии из 302 наименований, 6 приложений, 126 страниц основного текста, 29 рисунков и 15 таблиц. Фундаментальные идеи, а также результаты, полученные в ходе исследования, были опубликованы в 12 научных работах.

**Ключевые слова:** проблемное пищевое поведение, подростковый возраст, образ тела, образ себя, психологический профиль, социокультурное давление, личностные факторы, психологическое консультирование, психическое здоровье.

**Область исследования:** Психология подростка.

**Цель исследования** заключается в выявлении психологических особенностей пищевого поведения у девушек-подростков и разработке многоаспектной программы психологического вмешательства, направленной на коррекцию проблемного пищевого поведения, образа тела и образа себя, укрепление защитных личностных факторов и снижение восприятия социального давления в отношении физического облика и массы тела.

**Задачи исследования:** теоретический анализ концептуальных подходов к исследованию пищевого поведения в подростковом возрасте; сравнительная оценка психологических особенностей пищевого поведения у девушек-подростков с проблемным и со сбалансированным пищевым поведением для выявления значимых различий в их психологических профилях; исследование сложных взаимосвязей между компонентами пищевого поведения (пищевые установки, эмоциональное питание) и различными релевантными психологическими измерениями, такими как тревога по поводу физической внешности, телесная самооценка, концепция «Я», личностные факторы и восприятие социокультурного давления; разработка комплексного психологического профиля девушки-подростка с проблемным пищевым поведением; разработка, внедрение и оценка эффективности многоаспектной программы психологического вмешательства для девушек-подростков с проблемным пищевым поведением, направленной на коррекцию проблемного пищевого поведения и дезадаптивных пищевых установок, улучшение образа тела и концепции «Я», а также укрепление защитных личностных факторов.

**Научная новизна и оригинальность** полученных результатов заключается в реализации теоретико-экспериментального исследования психологических особенностей пищевого поведения у девушек-подростков, которое привело к разработке многофакторной прогностической модели – комплексного психологического профиля подростков с проблемным пищевым поведением, объединяющего в себе множество психологических измерений. Также были обоснованы многоаспектная психодиагностическая модель с акцентом на специфический культурный контекст и разработаны новые инструменты и методы вмешательства; создана и внедрена инновационная программа психологического вмешательства, направленная на коррекцию проблемного пищевого поведения и сопутствующих психологических аспектов.

**Результаты, способствующие решению научной проблемы, заключаются в:** разработке модели профиля девушки-подростка с проблемным пищевым поведением; выявлении значимых корреляций между тревогой по поводу физической внешности и проблемным пищевым поведением, между образом тела и дезадаптивным пищевым поведением, а также между социальным давлением и дезадаптивными пищевыми установками / эмоциональным питанием; разработке многофакторной прогностической модели (комплексного профиля), которая обеспечивает глубокое понимание факторов, связанных с нарушениями пищевого поведения у подростков, интегрируя показатели физической тревожности образа тела, Я-концепции, социального давления и перфекционизма.

**Теоретическая значимость** исследования. Результаты теоретико-экспериментального исследования предоставляют новые знания и перспективы для понимания пищевого поведения у девушек-подростков. Интегрированная модель психологического профиля девушки-подростка с проблемным пищевым поведением предлагает новую теоретическую основу для понимания сложных взаимодействий между факторами, вовлеченными в данный феномен. Программа психологического вмешательства, разработанная и валидированная в рамках данного исследования, вносит важный теоретический вклад благодаря инновационному объединению различных терапевтических подходов и их адаптации к специфическим потребностям девушек-подростков с проблемным пищевым поведением.

**Практическая значимость исследования** заключается в разработке психодиагностической модели структурных компонентов пищевого поведения и связанных с ними психологических измерений, а также в формировании многоаспектного психологического профиля девушки-подростка с проблемным пищевым поведением, который может быть использован в образовательном и клиническом контекстах. В то же время была разработана и внедрена инновационная программа психологического вмешательства для оптимизации пищевого поведения у девушек-подростков, основанная на интегративном и персонализированном подходе, направленная на снижение дезадаптивных форм пищевого поведения, улучшение образа тела и укрепление здоровых отношений с питанием и собственным телом.

**Внедрение научных результатов.** Результаты теоретико-экспериментального исследования были внедрены в практику психологического консультирования и в учебный процесс подготовки студентов и магистрантов в рамках дисциплин «Психология развития», «Педагогическая психология», «Клиническая психология ребенка и взрослого», «Клиническая психодиагностика» в Кишиневском Государственном Педагогическом Университете имени Иона Крянгэ.

**ȘTEFAN MARIANA**

**PSYCHOLOGICAL PARTICULARITIES OF EATING BEHAVIOR  
IN ADOLESCENT GIRLS**

**Summary of the doctoral thesis in psychology**

**Specialisation: 511.02 Developmental psychology and educational psychology**

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Approved for printing: 02.02.2025

Paper format 60x84 1/16

Offset paper. Offset printing.

Circulation 5 ex.

Printing papers: 1.5

Order no. 52

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**Editorial-Printing Center of the “Ion Creangă” State Pedagogical University  
Chișinău, Ion Creangă Street, No. 1, MD-2069**