What if high expectations feel good? Perceived parental expectations, their meanings, and bulimic symptoms in Black and White college women

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A B S T R A C T
This study aimed to test an interactive model of perceived parental expectations and the meaning of those expectations in relation to bulimic symptoms in Black (n = 97) and White (n = 179) college women. Black young women reported higher parental expectations and attached more positive meanings to high parental expectations, in comparison to their White peers. There was an interactive effect for Black young women such that, in the context of perceived high parental expectations, interpreting high parental expectations as negative was associated with higher levels of bulimic symptoms whereas interpreting high expectations as positive was associated with lower levels of bulimic symptoms. However, no interactive effect emerged for White young women. The role of differences in cultural contexts is discussed.

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1. Introduction

An extensive body of research has found links between perfectionism and disordered eating (Bardone-Cone et al., 2007; Stice, 2002). In particular, the perfectionism dimension reflecting high expectations set by others (e.g., socially prescribed perfectionism) has been associated with bulimic symptoms and has been considered maladaptive (Chang, Ivezaj, Downey, Kashima, & Morady, 2008). Feeling that others have very high expectations for oneself may produce negative affect which may motivate escape, albeit temporarily, via binge eating (Heatherton & Baumeister, 1991). However, it seems that perceiving that others have high expectations of oneself could alternatively feel good, even encouraging. In our current study, we propose that the meaning of high expectations set by others can moderate the relation between high expectations from others and bulimic symptoms. More specifically, we examine an interactive model of parental expectations and the meaning of high parental expectations in relation to bulimic symptoms in a sample of Black and White college women.

There is some evidence that perceiving expectations positively can contribute to positive outcomes in academic/vocational realms (Lent, Brown, & Hackett, 1994). For example, in college students, viewing familial expectations as encouraging is related to higher math grades (Ferry, Fouad, & Smith, 2000). To our knowledge, there is no literature applying this perspective to disordered eating. Theoretically, if an individual who perceives high expectations from others views these expectations as unrealistic and burdensome, this may amplify negative affect and contribute to the development and maintenance of bulimic symptoms. However, if high expectations from others are viewed as encouraging and motivational, this may serve as a protective factor because the high expectations do not generate high levels of distress. Examining these factors as they relate to parents is relevant in samples of young women since individuals at this stage of emerging adulthood are still aware of and in contact with their parents and will contend with racism and discrimination. Further, some racial socialization measures explicitly assess communications to Black children regarding the need to work especially hard and excel to the extreme in order to advance, given racial barriers (Neblett, Smalls, Ford, Nguyen, & Sellers, 2009). Because race can be confounded with socio-economic status, it is relevant that Solorzano (1992) found that controlling for socio-economic status, Black parents expected their children to attend college more so than White parents.
Based on different experiences as a minority vs. majority group member, it may be that Black and White college women will differ in the way they interpret (positively, negatively) high parental expectations.

The current study tests an interactive model of perceived parental expectations and their meaning for Black and White young women in the identification of bulimic symptom levels. It is hypothesized that high levels of parental expectations and endorsing that high parental expectations make one feel badly will be associated with higher levels of bulimic symptoms relative to the combination of high parental expectations and the endorsement of high parental expectations making one feel good, which we expect will buffer against bulimic symptoms.

2. Method

2.1. Participants

Participants were 276 young women attending a Midwestern university; 179 (65%) identified as Caucasian non-Hispanic (White) and 97 (35%) as African American (Black). Efforts were made to oversample Black women and recruitment occurred through introductory psychology classes and campus-wide recruitment (e.g., flyers). Mean age was 19.04 years (SD = 1.59) for Black participants, 18.58 years (SD = 1.06) for White participants. Mean body mass index (BMI) from self-reported weight and height was 24.18 kg/m² (SD = 4.66) for Black participants, 22.22 kg/m² (SD = 2.79) for White participants. On average, the highest education attained by parents (used as a proxy for socio-economic status) was 15.80 years (SD = 2.81) for Black participants and 16.42 years (SD = 2.57) for White participants. Only age (t(274) = −2.87, p = .004) and BMI (t(274) = −4.38, p < .001) were significantly different across groups.

2.2. Procedure

Participants completed questionnaires (45–60 min) as part of a larger study presented as an investigation of personality and eating patterns. This study was approved by the university’s Institutional Review Board.

2.3. Measures

2.3.1. Parental expectations

Parental expectations were measured using the Parental Expectations subscale of the Multidimensional Perfectionism Scale (MPS; Frost, Marten, Lahart, & Rosenblate, 1990). This subscale assesses beliefs that one’s parents set very high goals for them and is composed of five items (e.g., “My parents set very high standards for me”) rated from 1 = strongly disagree to 5 = strongly agree. Coefficient alpha was .69 for Black women and .81 for White women.

2.3.2. Meaning of high parental expectations

The meaning of high expectations from parents was assessed using a 4-item scale developed for this study that asks about participants’ reactions to high expectations from parents; namely, whether high expectations from parents: felt good because it shows they (parents) are confident in them, felt good because they (parents) think they have potential, felt bad because they (parents) demand too much, and felt bad because they (parents) will inevitably be disappointed. Items were generated based on nominations from Black and White undergraduates as well as theory underlying the nature of expectations from others. Participants responded using a 5-point scale from 1 = disagree to 5 = agree; items were coded so that higher scores reflect more positive feelings toward high parental expectations. Preliminary psychometric support comes from correlations obtained in the current sample: \( r = .44 \) (p < .001) with self-esteem (convergent validity), \( r = −.46 \) (p < .001) with trait anxiety (discriminant validity), and \( r = .60 \) (p < .001) for test–retest reliability over a 5-month period for a subset of 226. Coefficient alpha was .80 for Black women and .83 for White women.

2.3.3. Bulimic symptoms

Bulimic symptoms were assessed using the Bulimia Test-Revised (BULIT-R; Thelen, Farmer, Wonderlich, & Smith, 1991), which has been successfully used to measure bulimic symptom severity in clinical and non-clinical populations and Black and White college women (Fernandez, Malcarne, Wilfley, & McQuaid, 2006; Thelen et al., 1991). Coefficient alpha was .93 for Black women and .95 for White women.

3. Results

Black young women reported higher parental expectations and more positive meanings related to high parental expectations; White young women reported higher levels of bulimic symptoms (see Table 1). In both groups, parental expectations and the meaning of high parental expectations were significantly correlated with bulimic symptoms in the expected directions. Also, high perceived parental expectations were associated with viewing such expectations more negatively.

To test the hypothesized interactions, hierarchical multiple regression analyses were run with and without BMI as a covariate; since the pattern of findings did not differ, results are presented without BMI for parsimony. For Black young women, parental expectations and the meaning of these expectations interacted to identify differential levels of bulimic symptoms, \( t(93) = −3.09, β = −.33, p = .003, ΔR^2 = .07 \). The highest BULIT-R scores were reported by those who had high parental expectations and interpreted such expectations negatively. (See Fig. 1, where high and low levels of the independent variables were determined by one standard deviation above and below the mean, respectively.) Those with high parental expectations who interpreted them positively had lower BULIT-R scores that were comparable to those with low parental expectations. Simple slope analyses revealed that the meaning of high parental expectations was significantly associated with BULIT-R scores at high parental expectations, \( β = −.41, t(93) = −4.46, p < .001 \), but not at low parental expectations, \( β = .002, t(93) = .02, p = .988 \). In marked contrast, there was no significant interactive effect for the White young women (\( t(175) = −.86, β = −0.6, p = .393, ΔR^2 = .004 \),

<table>
<thead>
<tr>
<th>Table 1</th>
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<tr>
<td>Means, standard deviations, and correlations of the study variables for the Black and White college women.</td>
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<tr>
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<tr>
<td>1. Parental expectations</td>
</tr>
<tr>
<td>M: B = 16.04, SD = 3.64</td>
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<tr>
<td>W: M = 14.79, SD = 4.05</td>
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<tr>
<td>Cohen’s d = −.33</td>
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<tr>
<td>2. Meaning of high parental expectations</td>
</tr>
<tr>
<td>M: B = 17.69, SD = 2.76</td>
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<tr>
<td>W: M = 16.45, SD = 3.14</td>
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<tr>
<td>Cohen’s d = −.42</td>
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<tr>
<td>3. BULIT-R</td>
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<td>M: B = 43.22, SD = 15.66</td>
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<tr>
<td>W: M = 51.92, SD = 19.87</td>
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<tr>
<td>Cohen’s d = −.49</td>
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</table>

Note: B = Black young women, W = White young women. Correlations for Black young women appear above the diagonal; correlations for White young women appear below the diagonal. Variables are continuous, with higher values reflecting higher levels of the construct. In the case of Mean of High Parental Expectations, higher values mean that high parental expectations are viewed more positively. Possible ranges for the study variables are as follows: Parental Expectations (5–25), Meaning of High Parental Expectations (4–20), and BULIT-R (28–140).

*** p < .001.

** p < .01.

*p < .05.
meaning that the relation between parental expectations and bulimic symptoms did not depend on how high parental expectations were interpreted.

We reran the interactive models excluding the small number of women who endorsed each of the five items of the Parental Expectations subscale as disagree or strongly disagree, thus excluding those reporting consistent disagreement with the notion that their parents had high expectations for them (n = 15 White young women, n = 2 Black young women). The same pattern of findings emerged: an interactive effect only for Black young women.

4. Discussion

This study found support for the meaning of high expectations serving as a moderator for Black young women (but not White young women), elucidating for whom perceived high parental expectations are associated with bulimic symptoms. We also found that Black young women reported perceiving higher parental expectations as well as ascribing more positive meanings to high parental expectations. For Black families in the U.S., communication of high expectations may be viewed by their children as a form of supportive cheerleading for a minority culture with institutional disadvantages in a White majority world. Relatedly, to the degree that Black parents explicitly state why excelling in a majority culture is important and contextualize their high expectations as such (i.e., racial socialization; Nebbett et al., 2009), high expectations may be viewed more positively. It could also be that factors such as self-esteem, which is higher in Black young women compared to their White peers (Twenge & Crocker, 2002), may influence the meaning assigned to parental expectations.

Regarding the interactive findings, it could be that Black and White females value parental expectations in different ways, so that parental expectations and the interpretation of these expectations may have stronger connections with emotional and behavioral responses for Black than White young women. This speculation is consistent with studies that indicate a stronger emphasis on familial ties in Black families (Giordano, Cernkovich, & DeMaris, 1993). It could also be that White young women contend with expectations from more sources (e.g., thin ideal expectations from the media and peers), which serves to dilute the influence of the meaning of parental expectations relative to Black young women.

Strengths of this study include the inclusion of Black women in eating disorder research, the use of parental expectations and bulimic symptom measures with psychometric support in Black and White samples, and the novel application of the meaning of high parental expectations to bulimic symptoms. Limitations include: the cross-sectional analyses; restricted generalizability to Black and White college women.

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The meaning of high parental expectations, a newly conceptualized construct for the eating disorder field, should continue to be examined in relation to disordered eating. Self-efficacy should be investigated as a mediator, whereby the combination of high parental expectations and interpreting these positively may lead to increased self-efficacy which may provide a buffer against bulimic symptoms. Additionally, whether or not the perceived expectations are ones the youth feels she can meet should be considered in future models, as should other familial variables, such as the quality of the relationship with parents, and other individual variables, such as degree of racial identity.

In summary, the current findings suggest a role for the meaning of high expectations in the relation between the perfectionism dimension of high expectations from others and bulimic symptoms. Rather than assuming high parental expectations lead to a negatively pressured lifestyle for young adults with the possible consequence of bulimic behavior as escape, perceiving such high expectations positively appears to buffer the effects of the risk factor of perfectionism on disordered eating, at least for Black college women. If supported with longitudinal data, this finding suggests that contextualizing high parental expectations in ways that make them well-received and supportive may provide a buffer against bulimic symptoms.

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Contributors

Anna Bardone-Cone and Clarissa Boyd designed the study and wrote the protocol. Anna Bardone-Cone and Megan Harney conducted literature searches. Anna Bardone-Cone conducted the statistical analyses. Anna Bardone-Cone wrote the first draft of the manuscript and all authors contributed to and have approved the final manuscript.

Conflict of interest

All authors declare they have no conflict of interest.

References


