A comparison of adaptive and maladaptive perfectionists and non-perfectionists

Shahrookh Khani¹, Hasan Abdi² and Delaram Nokhbezare³

¹Department of Educational Sciences, Bandar Abbas Branch, Islamic Azad University, Bandar Abbas, Iran
²Department of Physical Education, Shahrood Branch, Islamic Azad University, Shahrood, Iran
³Department of Fisheries, Bandar Abbas Branch, Islamic Azad University, Bandar Abbas, Iran

ABSTRACT

The purpose of this research was to distinguish between adaptive and maladaptive perfectionists based on academic self-efficacy. The sample consisted of 247 students who were selected from basic sciences, humanities, paramedics, and engineering faculties of Arsanjan Branch of IAU using cluster sampling. The instruments were a researcher-made questionnaire (which included the scales of life satisfaction, academic satisfaction, and academic goal setting), the Multidimensional Perfectionism Scale of Hewitt and Flett (1991), and the academic self-efficacy of Motivated Strategies for Learning Questionnaire (MSLQ) by Pintrich et al. (1991). Factor analysis was applied to examine the validity of the questionnaires and Cronbach's alpha was used to determine their reliability, which suggested the validity and reliability of the questionnaires. One-way ANOVA, multivariate ANOVA, and Tukey's test were used to examine the differences between adaptive perfectionists, maladaptive perfectionists (Type A and B), and non-perfectionists. The results indicated significant differences between these groups in self-efficacy.

Keywords: adaptive perfectionists, maladaptive perfectionists, academic self-efficacy

INTRODUCTION

Perfectionism has been conceptualized as a personality variable that underlies a variety of psychological difficulties. Recently, however, theorists and researchers have begun to distinguish between two distinct types of perfectionism, one a maladaptive form that results in emotional distress, and a second form that is relatively benign, perhaps even adaptive (1).

Perfectionism involves striving for perfection and the belief that failure to obtain perfection is unacceptable. Historically, the majority of research on perfectionism has focused on the maladaptive outcomes associated with this personality style (2).

Burns demonstrated the link between perfectionistic beliefs and mental health problems, physical health problems, and poorer performance. He discussed a number of negative outcomes associated with perfectionism including: depression, anxiety, obsessive compulsive disorder, decreased productivity, writer’s block, problems with self-control, low self-esteem, troubled personal relationships, and even increased coronary disease (3).
The following year, Hewitt and Flett published a competing framework of perfectionism, also called the Multidimensional Perfectionism Scale (MPS-HF). It assessed three dimensions of perfectionism: (1) Self-Oriented Perfectionism: striving for perfection and setting high standards for the self; (2) Socially-Prescribed Perfectionism: concern about meeting other’s high expectations of the self; and (3) Other-Oriented Perfectionism: the setting of high standards for others by the self (4). In sum, adaptive perfectionism has been linked to various positive outcomes including: higher exam performance, life satisfaction, positive affect, endurance, extroversion, and conscientiousness (5, 6, 7 & 8). It also is correlated with negative constructs such as anxiety, stress, depression, hopelessness, neuroticism, and suicide ideation (9 & 10).

Self – efficacy refers to perceived capabilities of learning or performing actions at designed levels (11). Since Bandura (1997a, 1997b) introduced the construct of self efficacy to the psychological literature, researchers have explored its role in various domains including education, business, athletics, careers, health, and wellness. Researchers have investigated the operation of self-efficacy among different individuals, developmental levels, and cultures. Self-efficacy has been shown to be a powerful influence on individuals’ motivation, achievement, and self-regulation (11 & 12). In education, It has been shown to affect students’ choices of activities, effort expanded, persistence, interest, and achievement (12 & 13). Bandura (1997) Compared with students who doubt their capabilities to learn or to perform well, those with heigh self –efficacy participate more readily, work harder, persist longer, show greater interest in learning, and achieve at higher levels (14).

Perfectionism is a disposition characterized by a set of excessively high standards for performance, an all-or-nothing mindset, and the strife for flawlessness. Perfectionism is accompanied by overly critical self-evaluations, concern about others’ evaluations, and the emphasis on order and organization (15 & 16).

Self-efficacy is one's ability to succeed in specific situations, which plays a significant role in how one approaches goals, tasks, and challenges. People with high self-efficacy believe that they can do well, which allows them to undertake tasks that may be beyond their ability(11, 17). These individuals are more likely to view difficult tasks as something to be mastered rather than something to be avoided. On the contrary, individuals with low self-efficacy believe that tasks are tougher than they really are; a belief that fosters stress, depression, and a narrow vision of how best to solve a problem (18 & 19).

The mechanisms through which perfectionism interferes with performance involve the person's expectation of success (20). Self-efficacy is an important factor in the effect of perfectionism on performance through evaluation of expectations for successful performance. As mentioned, self-efficacy refers to a person's belief regarding their ability to perform well and achieve the expected outcomes (21). Development of self-efficacy is similar to that of perfectionism. Gecas (1989) argues that high expectations for progress are significantly related to the development of self-efficacy in children. These expectations are similar to expectations of perfectionist parents (20). There is evidence for the possible relationship between self-efficacy and perfectionism. Lazarsfeld (1991) believes that people with physical disabilities may lose their confidence in their ability to achieve goals. They may replace imaginary progress with actual progress and resort to the ideal world of perfectionism. Research has shown that the negative ormaladaptiveform of perfectionism (e.g. doubt about actions, excessive concern with mistakes, and socially prescribed perfectionism) is negatively associated with general and specific self-efficacy (22, 23, 24 & 20), and that the positive or adaptive form of perfectionism are positively associated with tendency for order and organization and self-oriented perfectionism (20 & 25).

MATERIALS AND METHODS

Population and sample
The present research was correlational and the population consisted of the BSc students of Arsanjan Branch of IAU who were studying in the period 2011-2012. The sample consisted of 247 students who were selected from basic sciences, humanities, paramedics, and engineering faculties this university using cluster sampling.

Instruments
The Multidimensional Perfectionism Scale (MPS) of Hewitt and Flett (1991) was used to measure perfectionism. This scale consists of three 15-item subscales that measure self-oriented, other-oriented, and socially prescribed perfectionism. The present research focused on two subscales (self-oriented and socially prescribed perfectionism).
The other-oriented perfectionism subscale was not examined, because it focuses on one's irrational expectations in others.

Self-efficacy was measured using the academic self-efficacy subscale of the Motivated Strategies for Learning Questionnaire (MSLQ) by Pintrich et al. (1991). The “Test Anxiety” subscale has seven items that focus on the ability of an individual to perform course assignments and learn course topics. This questionnaire is rated on a five-point Likert scale (1 for ‘totally agree’ and 5 for ‘totally disagree’). Pintrich et al. (1993) reported desirable validity and reliability for this subscale. They obtained a Cronbach’s alpha of 0.90 for this subscale. The translated version of MSLQ to Persian was examined by Fooladchang (2004), who reported desirable validity and reliability for this instrument. Hashemi (2011) also reported a Cronbach’s alpha of 0.82 for MSLQ. In the present research, the Cronbach’s alpha for the subscale of “Test Anxiety” was 0.87, and its validity was examined using factor analysis. The results suggested a factor that accounted for 56% of the variance in the items. The KMO criterion was 0.87 and the value obtained from Bartlett’s Test of Sphericity was equal to 661, which was significant at the 0.001 level. Considering the few number of items, it can be argued that the subscale has very high validity and reliability. A sample of this subscale is provided in Appendix B. Eigenvalue, the explained variance, and factor loading of each item is provided in Table 4.

Procedure
First, an introductory session was held in which the participants were informed of the aims and procedure of the research and they completed a consent form. At the end of the session, few example questions were discussed and the correct way of answering the items of each subscale was fully elaborated.

Completing the instruments lasted for 15-20 minutes on average. In addition, demographic information such as age, gender, and major were included at the end of the Academic Satisfaction Scale. It must be noted that the participants were assured that their identity would remain confidential.

After collecting the instruments, the responses were coded. The coded data were transferred to a computer and analyzed in SPSS software. One-way analysis of variance was used to compare the scores of the four groups: adaptive perfectionists, maladaptive perfectionists (Type A and B), and non-perfectionists. Moreover, Tukey’s post hoc test was applied for determining significant differences.

RESULTS

One-way ANOVA was applied to examine the differences between four perfectionist groups (Adaptive Perfectionists, Maladaptive Perfectionists Type A, Maladaptive Perfectionists Type B, and Non-Perfectionists) in self-efficacy. The results are provided in Table 1.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Source of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Self-Efficacy</td>
<td>Between-group</td>
<td>594.32</td>
<td>3</td>
<td>198.10</td>
<td>9.01</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>Within-group</td>
<td>2965.21</td>
<td>135</td>
<td>21.96</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

As the above table shows, the F-value for the variable of Academic Self-Efficacy is significant. This suggests that there are significant differences between at least two groups in academic self-efficacy. Tukey’s post hoc test was applied to find significant differences between each two groups. The results are provided in Table 2. It must be noted that only significant differences are provided in this table and all other ANOVA tables that follows, and non-significant differences are not displayed.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Groups</th>
<th>Mean Difference</th>
<th>Standard Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Self-Efficacy</td>
<td>Maladaptive Perfectionists (Type A)</td>
<td>Non-Perfectionists</td>
<td>3.63</td>
<td>0.91</td>
</tr>
<tr>
<td></td>
<td>Adaptive Perfectionists</td>
<td>Non-Perfectionists</td>
<td>5.25</td>
<td>1.17</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Maladaptive Perfectionists (Type B)</td>
<td>4.33</td>
<td>1.66</td>
</tr>
</tbody>
</table>
The above table shows that subjects in the Adaptive Perfectionists group have reported higher academic self-efficacy than the subjects in the Non-Perfectionists group and the Maladaptive Perfectionists Type B group.

**DISCUSSION**

The results of one-way ANOVA and Tukey's HSD test indicated that adaptive and maladaptive perfectionists have higher levels of academic self-efficacy than non-perfectionists. Moreover, adaptive perfectionists scored higher in self-efficacy than maladaptive perfectionists.

The present findings are consistent with the results of LoCicero and Ashby (2000) who showed that maladaptive perfectionists have lower general and social self-efficacy than adaptive perfectionists. This finding can be attributed to the positive correlation of the positive aspects of perfectionism (self-oriented perfectionism, high personal standards, and perfectionist efforts) and self-efficacy (e.g. Shcherbakova, 2001; Sinden, 1999) and the inverse correlation of the negative aspects of perfectionism (excessively high standards, extreme concern with mistakes, and socially prescribed perfectionism) to self-efficacy (e.g. Shcherbakova, 2001; Sinden, 1999; Campbell & Di Paolo, 2002; LoCicero & Ashby, 2000; Frost & Henderson, 1991; Tsu, 2008). For instance, Shcherbakova (2001) reported a negative relationship between general self-efficacy and the subscales of concern with mistakes and doubt about actions. Sinden (1999) also found a negative relationship between general self-efficacy and overconcern with mistakes. Frost and Henderson (1991) reported a negative correlation between self-efficacy in sports and concern with mistakes. Campbell and Di Paolo (2002) found that society prescribed perfectionism is negatively associated with goal-efficacy.

On the contrary, Shcherbakova (2001) and Sinden (1999) found a significant positive relationship between general self-efficacy and High Standards and Order subscales. Ashby and Rice (2002) also found that the above measures were important predictors of self-esteem (a similar construct to self-efficacy).

The higher self-efficacy scores of maladaptive perfectionists as compared to non-perfectionists can be attributed to the way these groups were formed. Maladaptive perfectionists had higher scores in self-oriented perfectionism, while non-perfectionists had low scores in this subscale. Considering the positive correlation between perfectionism and academic self-efficacy ($r = 0.56$) in this research and similar studies (e.g. Tsu, 2008), high self-efficacy of maladaptive perfectionists seems logical.

**REFERENCES**