



آزمون مدل ۲*۲ کمال گرایی در نمونه‌ی ایرانی

پذیرش نهایی - ارائه به صورت سخنرانی

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Testing the ۲*۲ model of perfectionism in Iranian sample

Abstract

Background and objective: The ۲*۲ model is the newest model of perfectionism that has been raised several hypotheses about the compatibility's level of different types of perfectionism. The main aim of this study is testing these hypotheses.

Methods: ۱۹۸ MA student of Allameh Tabatabaee university of Tehran selected through cluster random sampling and divided into four groups based on perfectionism's types with Hill perfectionism as a screening test. Then, these four groups were compared using multivariate analysis of variance (MANOVA) in terms of the components of general health to test the ۲*۲ model hypotheses.

Results: Hypothesis ۱c and hypothesis ۴ of ۲*۲ model of perfectionism are accepted. But hypothesis ۲ and hypothesis ۳ are not accepted because the results of this research show that the mixed perfectionism is more maladaptive than other combinations of ECP and PSP.



Conclusion: The reason for this result maybe is that the perfectionism tests -especially the Hill perfectionism inventory- are not be able to measure the absolute adaptive perfectionism. Therefore, the main suggestion of this research to future researchers is that they try to understand the characteristics of adaptive perfectionism and design the test that can be measure the quite adaptive perfectionism.

Keywords: perfectionism, ۲*۲ model of perfectionism, general health

۱. Introduction:

Perfectionism, in psychology, is an abstract concept that hasn't a universal definition. One of the hundreds defines of perfectionism as follow: " Perfectionism is a unique combination of a desire for perfection , perfectionism , fear of failure , and emotional conviction that perfection (not " almost perfect ") is the only route to personal acceptance by others" (Greenspon, ۲۰۰۸). But this definition refers only to the negative aspect of perfectionism, while perfectionism has two aspects: "positive versus negative" or "normal versus neurotic" or "adaptive versus maladaptive". Hamachek was one of the first psychologists to argue for two distinct types of perfectionism, classifying people as normal perfectionists or neurotic perfectionists. Normal perfectionists pursue perfection without compromising their self-esteem, and derive pleasure from their efforts. Neurotic perfectionists strive for unrealistic goals and consistently feel dissatisfied when they cannot reach them (Hamachek, ۱۹۷۸). After Hamachek, Frost et al. (۱۹۹۰) identified perfectionism as having five dimensions. The first dimension, which is considered the major dimension, is **concern over mistakes**. This reflects a tendency to interpret mistakes as equivalent to failure, and the belief that one will lose the respect of others following failure. The second dimension is the setting of excessively high **personal standards**, which often cannot be met satisfactorily. The third dimension is **parental expectations**, which involves the extent to which the parents of the individual are perceived as setting high expectations. The fourth dimension is **parental criticism, which** involves the extent to which parents are perceived as being overly critical. The fifth dimension is **doubts about actions**, which is the tendency to doubt the quality of one's performance. Additionally, a sixth dimension has been identified. This is **organization**, which reflects a tendency to be orderly and organized (Frost, Heimberg, Holt, Mattia, & Neubauer, ۱۹۹۳; Frost, Lahart & Rosenblate, ۱۹۹۱; Frost et al. ۱۹۹۰).



Alternatively, Hewitt and Flett identified three dimensions of perfectionism. The first dimension is **self-oriented perfectionism**, in which the individual has unrealistic standards for themselves, strives for these standards, is overly critical of them, tends to overly focus on their flaws, and tries to avoid failure. The second dimension is **other-oriented perfectionism**, in which the individual has unrealistic standards and expectations about the abilities of others, and is often overly evaluative of others' performance. The third dimension is **socially-prescribed perfectionism**, in which the individual believes that others have perfectionist expectations and motives about them, and they feel they must attain these standards (Blankstein & Winkworth, ۲۰۰۴; Flett, Hewitt, Blankstein & Mosher, ۱۹۹۵; Hewitt & Flett, ۱۹۹۱a; Hewitt & Flett, ۱۹۹۱b; Hewitt, Flett & Turnbull, ۱۹۹۲; Hewitt, Flett & Weber, ۱۹۹۴; Hewitt, Newton, Flett & Callander, ۱۹۹۷).

Recently, Hill et al. have introduced a new measure of perfectionism as the Perfectionism Inventory (PI). This inventory includes two main scales: Conscientious Perfectionism (CP) and Self-Evaluative Perfectionism (SEP), and eight subscales: Concern Over Mistakes (CM), High Standards for Others (HSO), Need for Approval (NA), Organization (O), Perceived Parental Pressure (PP), Planfulness (P), Rumination (R) and Striving for Excellence (SE). HSO, O, P and SE are classified in the "Conscientious Perfectionism" scale and CM, NA, PP and R, are classified in the "Self-Evaluative Perfectionism" scale. Hill et al. (۲۰۰۴) have reported that PI Conscientious Perfectionism is most strongly associated with the "self-oriented perfectionism" in the "Hewitt and Flett Multiple Perfectionism Scale", is associated with "personal standards" and "organization" in the "Frost Multiple Perfectionism Scale". Moreover PI Self-Evaluative Perfectionism is most strongly associated with the "socially-prescribed perfectionism" in the "Hewitt and Flett Multiple Perfectionism Scale", is associated with "concern over mistakes", "doubts about actions", "parental criticism" and "parental expectations" in the "Frost Multiple Perfectionism Scale".

Generally, adaptive perfectionism (self-oriented perfectionism or Conscientious Perfectionism) have a positive results. For example, self-oriented perfectionism has been associated with a number of positive adaptive qualities, including achievement striving, positive affect, high self-esteem, self-efficacy, self-actualisation, resourcefulness, perceived control, adaptive coping with stress, positive appraisals of personal projects, adaptive learning



strategies, good academic performance, and positive interpersonal characteristics, such as self-assurance, assertiveness, and altruistic social attitudes (Blankstein & Dunkley, ۲۰۰۲; Burns & Fedewa, ۲۰۰۵). While maladaptive perfectionism (socially-prescribed perfectionism, self-Evaluative Perfectionism and concern over mistakes, parental expectations, parental criticism or doubts about actions) have a positive correlation such as with depression (Gnilka, Ashby, & Noble, ۲۰۱۳; Sherry et al, ۲۰۱۳; Melrose, ۲۰۱۱; Clara, Cox, & Enns, ۲۰۰۷; Flett, Besser, Hewitt, & Davis, ۲۰۰۷), eating disorders (Egan et al, ۲۰۱۳; Sassaroli et al, ۲۰۰۸; Bulik et al, ۲۰۰۳), obsessive compulsive disorder (Sassaroli et al, ۲۰۰۸), anxiety disorders (Gnilka, Ashby, & Noble, ۲۰۱۲; Flett, Greene, & Hewitt, ۲۰۰۴), suicide (O'Connor, ۲۰۰۷), social anxiety (Brown, ۲۰۱۱; Rosser, Issakidis, & Peters, ۲۰۰۳) and many other psychological disorders.

Gaudreau & Thompson (۲۰۱۰) recently, introduced the ۲*۲ model of perfectionism. In this model, based on the amount of “evaluative concerns perfectionism (ECP)” and “personal standards perfectionism (PSP)”, four subtype of perfectionism have been considered: (۱) pure PSP (low ECP, high PSP), (۲) mixed perfectionism (high ECP, high PSP), (۳) pure ECP (high ECP, low PSP), and (۴) non-perfectionism (low ECP, low PSP). The ۲ × ۲ model comprises four hypotheses: Hypothesis ۱a states that pure PSP is more adaptive than non-perfectionism, Hypothesis ۱b that pure PSP is more maladaptive than non-perfectionism, and Hypothesis ۱c that pure PSP and non-perfectionism do not differ in adaptiveness/maladaptiveness; Hypothesis ۲ states that pure ECP is more maladaptive than any other combination of ECP and PSP; Hypothesis ۳ states that mixed perfectionism is less maladaptive than pure ECP; and Hypothesis ۴ states that mixed perfectionism is more maladaptive than pure PSP (Gaudreau and Verner-Filion, ۲۰۱۲; Stoeber, ۲۰۱۲; Franche, Gaudreau and Miranda, ۲۰۱۲; Gaudreau and Thompson, ۲۰۱۰). The current study has attempted to test the hypotheses of this new model.

۲. Method

۲.۱. Participants

۱۹۸ MA student of Allameh Tabatabaee university of Tehran selected through cluster random sampling and divided into four groups based on perfectionism's types. The four groups were matched for age ($F= ۲,۴۸۶, p= ۰,۰۶۳$): pure PSP ($N=۳۰, M= ۲۵,۱۳, SD=$



۲,۱۹۲); pure ECP (N=۳۴, M= ۲۴,۴۴, SD= ۱,۷۲۶); mixed perfectionism (N=۵۳, M= ۲۴,۳۳, SD= ۱,۲۵۴) and non-perfectionism (N=۴۹, M= ۲۴,۱, SD= ۱,۶۲۳).

۲.۲. Procedure

After selecting the members of the sample group, two tests were performed on them. Hill perfectionism as a screening test was used and by this test, the sample group was divided into four distinct groups based on the amount of conscientious perfectionism (CP) and self-evaluative perfectionism (SEP): pure CP (low SEP, high CP), pure SEP (high SEP, low CP), mixed perfectionism (high SEP, high CP), and (۴) non-perfectionism (low SEP, low CP). It is worth noting that CP is equivalent to PSP and SEP is equivalent to ECP in the ۲*۲ model of perfectionism.

Then, these four groups were compared using multivariate analysis of variance (MANOVA) in terms of the components of general health to test the ۲*۲ model hypotheses.

۲.۳. Measures

Hill Perfectionism Inventory (hill et al, ۲۰۰۴)

This inventory includes ۵۹ sentences and ۸ subscales: concentration over mistakes, need for approval, rumination, perceived parental pressure, organization, planfulness, high standards for others, and striving for excellence. Dimensions one to four are among the negative aspects (self-evaluative perfectionism) and dimensions five to eight are among the positive aspects of perfectionism (conscientious perfectionism). This self-report questionnaire and was developed by combining the most salient factors from the Hewitt and Flett Multidimensional Perfectionism Inventory and the Frost et al.'s Multidimensional Perfectionism Inventory. Items are rated on a ۵-point Likert scale ranging from ۱ (strongly disagree) to ۵ (strongly agree). The reported Cronbach's alpha by Jamshidi et al. (۲۰۰۹) was between ۰,۸۳ and ۰,۹۱ using Cronbach's alpha (internal consistency) in Iran.

The General Health Questionnaire, GHQ- ۲۸ (Goldberg, ۱۹۷۲)

This is a self-report questionnaire consisting of ۲۸ items. The questionnaire includes ۴ subscales (physical symptoms, anxiety & sleeping disorder, social function disorder, and



depression symptoms). Test-retest reliability has been reported 0.9 (Sterling, 2011) and cronbach's $\alpha = 0.9-0.95$ (Failde and Ramos, 2000; Sterling, 2011).

۲. Results

Table ۱, shows the mean and standard deviation for each of the groups in general health components.

Table ۱: mean and standard divisions of research groups in general health components

		physical symptoms	anxiety & sleeping disorder	social function disorder	depression symptoms	GHQ
Perfectionism type						
pure PSP	N	۴۷	۴۷	۴۷	۴۷	۴۷
	Mean	۵,۹۷۸۷	۳,۶۵۹۶	۵,۷۴۴۷	۱,۹۵۷۴	۱۷,۳۴۰۴
	SD	۴,۳۲۱۲۸	۳,۱۹۱۵۴	۲,۶۹۰۳۱	۳,۵۹۹۲۶	۹,۹۳۵۱۷
pure ECP	N	۳۴	۳۴	۳۴	۳۴	۳۴
	Mean	۵,۳۲۳۵	۶,۳۸۲۴	۷,۲۳۵۳	۲,۲۰۵۹	۲۱,۳۸۲۴
	SD	۳,۳۴۵۹۲	۳,۲۴۷۵۱	۲,۲۰۲۷۴	۱,۶۲۸۸۹	۸,۶۸۶۵۱
mixed perfectionism	N	۵۶	۵۶	۵۶	۵۶	۵۶
	Mean	۵,۸۳۹۳	۸,۰۷۱۴	۷,۶۶۰۷	۴,۳۹۲۹	۲۵,۹۶۴۳
	SD	۳,۵۶۱۲۹	۳,۹۲۱۳۰	۲,۷۱۸۸۰	۴,۷۸۸۹۲	۱۰,۷۴۸۳۰
non-perfectionism	N	۶۱	۶۱	۶۱	۶۱	۶۱
	Mean	۴,۲۷۸۷	۵,۲۱۳۱	۸,۳۹۳۴	۲,۹۸۳۶	۲۰,۸۶۸۹
	SD	۲,۳۶۷۳۶	۳,۴۲۵۹۵	۲,۸۹۴۱۲	۴,۵۱۴۷۶	۹,۷۲۱۹۳
Total	N	۱۹۸	۱۹۸	۱۹۸	۱۹۸	۱۹۸
	Mean	۵,۳۰۳۰	۵,۸۵۳۵	۷,۳۵۸۶	۳,۰۰۵۱	۲۱,۵۶۰۶
	SD	۳,۴۶۳۹۷	۳,۸۳۸۵۹	۲,۸۴۵۹۱	۴,۱۲۳۱۰	۱۰,۳۲۶۸۳

Since in this section, the comparison between the four groups with multiple dependent variables (general health components) is done, the multivariate analysis of variance (MANOVA) was used.

Table ۲: The multivariate analysis of variance (MANOVA)

Effect		Value	F	Hypothesis df	Error df	Sig.
Perfectionism types	Pillai's Trace	.۵۰۷	۷,۸۰۸	۱۵,۰۰۰	۵۷۶,۰۰۰	.۰۰۰
	Wilks' Lambda	.۵۷۰	۷,۹۰۳	۱۵,۰۰۰	۵۲۴,۹۰۸	.۰۰۰
	Hotelling's Trace	.۶۲۷	۷,۸۸۲	۱۵,۰۰۰	۵۶۶,۰۰۰	.۰۰۰



	Roy's Largest Root	.۳۱۹	۱۲,۲۶۱	۵,۰۰۰	۱۹۲,۰۰۰	.۰۰۰
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The data of table ۲, show that the four groups were compared in this study, were significant differences in the components of general health questionnaire.

Table ۳: Tests of between-subjects effects

Scales	Levin test	Sig.	F	Sig.
physical symptoms	۳,۵۰۴	.۰۱۶	۲,۹۰۴	.۰۳۶
anxiety & sleeping disorder	۲,۵۰۵	.۰۶۰	۱۴,۶۵۳	.۰۰۰
social function disorder	۱,۲۴۰	.۲۹۶	۸,۹۱۸	.۰۰۰
depression symptoms	۷,۴۳۱	.۰۰۰	۳,۶۹۹	.۰۱۳
GHQ	۲,۰۳۷	.۱۱۰	۶,۶۲۹	.۰۰۰

Based on the table ۳, the research groups are deferent in all of the general health components. So the post hock tests are needed to determine the exact differences between groups. Two post hock tests: Scheffe (for non-significant Levin tests) and Dunnett T۳ (for significant Levin tests) are used.

Table ۴: Post hoc tests (only significant cases)

Dependent variable	Post hock test type	(I) perfectionism type	(J) perfectionism type	Mean difference (I-J)	Std. Error	Sig.
physical symptoms	Dunnett T۳	mixed perfectionism	non-perfectionism	۱,۵۶۰,۶*	.۵۶۴۲۳	.۰۴۰
anxiety & sleeping disorder	Scheffe	pure PSP	pure ECP	-۲,۷۲۲۸*	.۷۸۶۳۴	.۰۰۹
		mixed perfectionism	non-perfectionism	-۴,۴۱۱۹*	.۶۹۰۹۲	.۰۰۰
social function disorder	Scheffe	pure PSP	mixed perfectionism	-۱,۹۱۶۰*	.۵۳۱۸۳	.۰۰۶
			non-perfectionism	-۲,۶۴۸۸*	.۵۲۱۷۹	.۰۰۰
depression symptoms	Dunnett T۳	pure PSP	mixed perfectionism	-۲,۴۳۵۴*	.۸۲۷۷۵	.۰۲۴
		pure ECP	mixed perfectionism	-۲,۱۸۷۰*	.۶۹۸۲۶	.۰۱۵
GHQ	Scheffe	pure PSP	mixed perfectionism	-۸,۶۲۳۹*	۱,۹۶۰۰۸	.۰۰۰

According to the table ۴:



a) The mean of mixed-perfectionism group scores in all of the general health components are significantly more than the mean of other groups.

b) Pure ECP group has higher mean of scores than pure PSP group in the “anxiety & sleeping disorder” and lower mean of scores than mixed- perfectionism group in the “depression symptoms”.

c) Pure PSP group has lower mean of scores than non-perfectionism group in the “social function disorder”.

۴. Conclusion

According to the results, we can say that hypothesis 'c and hypothesis ۴ are accepted but hypothesis ۲ and hypothesis ۳ are not accepted because the results of this research show that the mixed perfectionism is more maladaptive than other combinations of ECP and PSP. This finding is almost the opposite of the previous researches like Gaudreau (۲۰۱۲), Gaudreau and Verner-Filion (۲۰۱۲), Stoeber (۲۰۱۲), Franche, Gaudreau and Miranda (۲۰۱۲), Gaudreau and Thompson (۲۰۱۰).

On the one hand, it seems that a reason for this result is that this study has used a new test to measuring the perfectionism. The Hill perfectionism inventory may not be able to measure the ECP and PSP, properly. But, on the other hand, the results obtained in this study seems reasonable because we know that extremism perfectionism of any kind, is maladaptive and if two maladaptive kind of perfectionism combined with together, the degree of incompatibility will increase; so, the mixed perfectionism should be more maladaptive. The reason for this maybe is that the perfectionism tests are not be able to measure the absolute adaptive perfectionism. Therefore, the main suggestion of this research to future researchers is that they try to understand the characteristics of adaptive perfectionism and design the test that can be measure the quite adaptive perfectionism. Studying the Hamachek theory can help them because all of the recent tests of perfectionism like Hewitt and Flett multidimensional perfectionism inventory and Hill perfectionism inventory classify the types of perfectionism based on high personal standards or standards imposed by others, but the Hamachek theory,



classify the types of perfectionism based on the flexibility of standards. It seems that the “flexibility” is a good clue to find the features of adaptive perfectionism.

Resources

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