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The good, the bad, and the interactive: Evaluative concerns perfectionism moderates the effect of personal strivings perfectionism on self-esteem



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ABSTRACT

Early conceptualizations of perfectionism regard it as a unidimensional and maladaptive construct. However, multiple recent studies have proposed a two-factor model of perfectionism that distinguishes between adaptive and maladaptive features of perfectionism. The purpose of this study was to examine the interaction of these two factors of perfectionism on self-esteem, by partially incorporating the recently proposed 2×2 model of perfectionism. This objective was examined in a sample of 290 female college students. Findings showed that personal strivings perfectionism¹ (PSP) was positively associated with self-esteem, while evaluative concerns perfectionism² (ECP) was negatively related to self-esteem. Moreover, results demonstrated that the interaction of PSP and ECP accounted for a small but significant amount of the variance in self-esteem. Overall, these findings indicate that ECP moderates the relationship between PSP and self-esteem, such that as levels of ECP increase, the relationship between PSP and self-esteem decreases. Theoretical and practical implications are discussed.

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1. Introduction

Perfectionism was originally operationalized as a unidimensional and maladaptive construct (Dunkley, Berg, & Zuroff, 2012; Frost, Marten, Lahart, & Rosenblate, 1990; Suddarth & Slaney, 2001) associated with concurrent psychopathology, a chronic sense of failure, indecisiveness, procrastination, and shame (Bieling, Israeli, & Antony, 2004; Hamachek, 1978; Hewitt & Flett, 1991; Hollender, 1965; Pacht, 1984; Stoeber, 2012). However, this conceptualization did not explain why high levels of perfectionism appear beneficial in some circumstances and detrimental in others. To account for this. researchers proposed a two-factor model of perfectionism that distinguishes between its adaptive and maladaptive features (Dunkley et al., 2012; Frost, Heimberg, Holt, Mattia, & Neubauer, 1993; Hamachek, 1978; Suddarth & Slaney, 2001), which later evolved to an understanding of perfectionism as a multidimensional personality trait (Flett & Hewitt, 2006; Frost et al., 1993; Gaudreau & Thompson, 2010). Overall, this multidimensional construct of perfectionism can be defined as consisting of a tendency to strive toward perfection as well as a propensity toward critical self-evaluation (Frost et al., 1993). Specifically, mounting empirical evidence differentiates between two main

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dimensions of perfectionism: personal strivings perfectionism (PSP) and evaluative concerns perfectionism (ECP; for a review see Stoeber & Otto, 2006).

PSP is characterized by the striving for and the setting of excessively high standards for oneself and others with a particular focus on flaws (Frost et al., 1993). ECP, on the other hand, reflects a fear of making mistakes, unrealistic parental expectations and criticism, doubts about one's actions (Frost et al., 1990), as well as the fear of being unable to meet extremely high standards perceived to be set by others (Hewitt & Flett, 1991). Research has demonstrated that PSP positively correlates with positive affect and life satisfaction (Chang, Watkins, & Banks, 2004) as well as aspects of personality such as conscientiousness and psychological endurance (Stumpf & Parker, 2000) and negatively correlates with suicidal ideation (Chang et al., 2004). On the other hand, ECP has been positively associated with perceived stress, negative affect, and suicide ideation (Chang et al., 2004), as well as neuroticism (Stumpf & Parker, 2000), and is negatively associated with positive affect and life satisfaction (Chang et al., 2004), as well as self-esteem (Stumpf & Parker, 2000).

Extant theory and research have mainly focused on outcomes associated with these two core dimensions of perfectionism rather than on examining how these aspects may interact within an individual (Chang et al., 2004; Flett, Hewitt, Blankstein, & O'Brien, 1991; Frost et al., 1993, 1990; Gaudreau & Thompson, 2010; Hewitt & Flett, 1991; Stoeber & Otto, 2006; Stumpf & Parker, 2000). However, in support of an interactive perspective, recent theoretical advances have produced evidence for group-based frameworks of perfectionism. These group-based approaches differentiate between subtypes of perfectionism

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¹ Personal strivings perfectionism (PSP).

² Evaluative concerns perfectionism (ECP).

characterized by varying coexisting levels of PSP and ECP. For example, the tripartite model (Parker, 1997; Rice & Ashby, 2007; Stoeber & Otto, 2006) proposes three categories of perfectionism: healthy, unhealthy, and non-perfectionistic. A review of the literature (Stoeber & Otto, 2006) shows that while a number of studies (Ashby & Bruner, 2005; Rice & Mirzadeh, 2000; Rice & Slaney, 2002) provide support for the tripartite model, other studies reveal conflicting results. For example, some studies showed that healthy perfectionists exhibited lower levels of positive characteristics than non-perfectionists (Parker, 1997; Rice & Dellwo, 2002), while others reported null-findings with no meaningful differences between healthy and unhealthy perfectionists (Martin & Ashby, 2004).

In order to account for these conflicting results, Gaudreau and Thompson (2010) expanded the tripartite model into a more nuanced 2×2 model, which has received growing empirical support in the literature (Gaudreau & Thompson, 2010). Overall, this model proposes four subtypes of perfectionism (non-perfectionists: low ECP, low PSP; pure ECP: high ECP, low PSP; pure PSP: high PSP, low ECP; mixed perfectionists: high ECP, high PSP) and four main hypotheses for comparing these subtypes (see Gaudreau & Thompson, 2010). Multiple recent studies have provided empirical support for the 2×2 model of perfectionism (e.g., Douilliez & Lefèvre, 2011; Gaudreau, 2012, 2015; Gaudreau & Thompson, 2010; Gaudreau & Verner-Filion, 2012) indicating that the definitions of subtypes of this model more accurately capture the nuances of within-person interactions of perfectionism than the tripartite model. However, the use of a 2×2 model artificially dichotomizes variables (both ECP and PSP) that are both conceptualized as and measured on a continuous scale. This practice, though useful in a setting where meaningful scale cutoff values exist (e.g., established national normative values or meaningful clinical cutoff values), results in serious data analysis problems including a significant loss of both meaningful variance and power (Royston, Altman, & Sauerbrei, 2006). This practice is also sample-specific, as mean- or median-cutoff values can vary greatly between samples, which can result in conflicting or null findings as well as the inability to compare outcomes across studies (Royston et al., 2006).

Therefore, the purpose of the current study is to extend the empirical literature on the multidimensional nature of perfectionism by incorporating Gaudreau and Thompson's theoretical framework while maintaining the continuous nature of the construct, which allows for a more accurate assessment of its effects. Specifically, we will examine this with self-esteem, an outcome that has been independently associated with both ECP and PSP.

Self-esteem, a global evaluation of self-worth, is an influential factor in a number of important life aspects such as overall well-being, education, and mental health (e.g., Alves-Martins, Peixoto, Gouveia-Pereira, Amaral, & Pedro, 2002; Donnellan, Trzesniewski, Robins, Moffitt, & Caspi, 2005; Pyszczynski, Greenberg, Solomon, Arndt, & Schimel, 2004; Rumberger, 1995). For example, it is positively correlated with happiness, optimism, and motivation and negatively correlated with depression, anxiety, and negative affect (Pyszczynski et al., 2004). Moreover, low self-esteem levels play a significant role in high school drop-out rates (Rumberger, 1995), academic achievement (Alves-Martins et al., 2002) as well as decreased aggression, anti-social, and delinquent behavior (Donnellan et al., 2005). Moreover, recent research has examined the relationship between each of the two factors of perfectionism and self-esteem. One study demonstrated a strong negative correlation between ECP and self-esteem (Kempke et al., 2011), but this study did not examine PSP. In addition, Dunkley et al. (2012) examined the differential relationship between perfectionism (ECP vs. PSP) on aggregated daily reports of self-esteem, attachment, and negative affect. These authors found that ECP was correlated with decreases in self-esteem over time (when controlling for PSP), while PSP was associated with increases in self-esteem over time (when controlling for ECP), but the interaction between both factors of perfectionism was not examined.

Therefore, in the current study, we hypothesize that ECP moderates the association between PSP and self-esteem such that as levels of ECP increase, the positive association between PSP and self-esteem will diminish. In other words, we predict that the association between PSP and self-esteem will be more positive at lower levels of ECP than higher levels of ECP.

2. Materials and methods

2.1. Participants

The current study utilized data collected as part of a previous Institutional Review Board (IRB)-approved research project conducted at a large southeastern university investigating individual differences and eating behaviors in women. The original sample consisted of 316 female undergraduate students recruited from the psychology department subject pool. Therefore, the convenience sample utilized in the present study consisted only of female participants. Twenty-six participants were excluded due to lack of adherence to study protocol and/or falling outside the desired age range, resulting in a sample size of 290. Participants ranged in age from 18 to 25 (M=19.68, SD=1.50). Fifty-seven percent reported their race/ethnicity as White or European–American, 23% as Black or African–American, 8% as Hispanic or Latino, 6% as Asian or Asian–American, .3% as Hawaiian/Pacific Islander, and 5% selected other.

2.2. Measures

2.2.1. Perfectionism

Perfectionism was assessed with the Multidimensional Perfectionism Scale (MDPS-F; Frost et al., 1990). This scale consists of 35 items distributed among 6 subscales, rated from 1 (*Strongly Agree*) to 5 (*Strongly Disagree*). *ECP* was measured by averaging the Personal Standards (7 items) and Organization (6 items) subscales, whereas *PSP* was measured by averaging scores on the Concern Over Mistakes (9 items), Parental Expectations (5 items), Parental Criticism (4 items), and Doubts About Actions (4 items) subscales. Internal consistency in the current study was acceptable for both factors (α = .86 and .91, respectively). Additionally, the ECP and PSP factors of perfectionism have each demonstrated good convergent and divergent validity. Specifically, ECP is positively associated with depression and negative affect and is not associated with positive affect (Frost et al., 1993). Conversely, PSP is significantly related to positive affect and unrelated to depression and negative affect (Frost et al., 1993).

2.2.2. Self-esteem

Self-esteem was measured with the Rosenberg Self-Esteem Scale (RSE; Rosenberg, 1965), which measures global self-worth by evaluating an individual's positive and negative qualities. The measure consists of 10 items that are rated on a scale of 1 (Strongly Agree) to 4 (Strongly Disagree). In the current study, the RSE was scored so that higher scores would reflect higher self-esteem. The RSE has demonstrated good internal consistency in past research ($\alpha=.88$; Robins, Hendin, & Trzesniewski, 2001) as well as in the current study ($\alpha=.89$). This measure has also demonstrated good convergent and discriminant validity (Robins et al., 2001). For example, self-esteem was positively related to life-satisfaction and positive dispositional affect as well as negatively correlated with neuroticism and perceived stress (Robins et al., 2001). Additionally, self-esteem was significantly related to higher scores on measures of self-serving biases but was unrelated to SAT scores and college GPA (Robins et al., 2001).

2.3. Statistical analysis

The data was analyzed using the SPSS version 22.0 statistical program. To investigate the hypothesis that ECP moderates the relationship

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