



The relationship between multidimensional perfectionism and contingencies of self-worth

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ARTICLE INFO

Article history:

Received 7 June 2010

Received in revised form 18 September 2010

Accepted 28 September 2010

Available online 25 October 2010

Keywords:

Motivation

Achievement striving

ABSTRACT

Research suggests that while socially prescribed perfectionism has a robust association with psychological difficulties, self-oriented perfectionism may be best considered a vulnerability factor (Flett & Hewitt, 2007; Hewitt & Flett, 1991). One explanation for their divergent consequences is that these dimensions of perfectionism are underpinned by different contingencies of self-worth. The purpose of the current study was to examine this possibility. Two-hundred and thirty-eight undergraduate students (age $M = 18.94$, $SD = 1.33$, range 18–25), completed measures of perfectionism (self-oriented and socially prescribed) and contingencies of self-worth (based on outperforming others, approval of others, and personal competence). Consistent with the hypotheses, regression analyses revealed that socially prescribed perfectionism was predicted by contingencies of self-worth based on outperforming others and the approval of others, whereas self-oriented perfectionism was predicted by contingencies of self-worth based on outperforming others and personal competence. The results suggest that the nature of the contingencies of self-worth associated with these dimensions of perfectionism may be important when considering their relationship with psychological maladjustment.

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Perfectionism is a multidimensional personality trait that entails an array of inter-personal and intrapersonal dimensions that have a considerable impact on psychological adjustment (e.g., Enns, Cox, Sareen, & Freeman, 2001; Rice & Lapsley, 2001; Rice, Vergara, & Mirela, 2006). Hewitt and Flett (1991) have developed a model of perfectionism that distinguishes between dimensions of perfectionism based on the perceived origins and focus of perfectionistic standards. Socially prescribed perfectionism is the belief that significant others impose extremely high and unrealistic standards on the self and that approval is contingent on their achievement. Self-oriented perfectionism is the tendency to set exceedingly high personal standards and evaluate oneself critically. Research suggests that these dimensions have divergent consequences. While socially prescribed perfectionism appears to be uniformly debilitating, self-oriented perfectionism appears to be best considered a vulnerability factor (Flett & Hewitt, 2007; Hewitt & Flett, 1991). For example, socially prescribed perfectionism is positively related with distress, hopelessness, depression, and suicide ideation, whereas the relationship between self-oriented perfectionism and these variables is weak, inconsistent, or only apparent through an interaction with third-order variables (e.g.,

stress, coping, and socially prescribed perfectionism) (e.g., Blankstein, Lumley, & Crawford, 2007; O'Connor & O'Connor, 2003; Sherry, Hewitt, Flett, & Harvey, 2003).

Proposed explanations for the distinct consequences of self-oriented and socially prescribed perfectionism include disparity in terms of self-critical tendencies (Gilbert, Durrant, & McEwan, 2006; Trumpeter, Watson, & O'Leary, 2006), perceptions of control (Flett, Hewitt, Blankstein, & Mosher, 1995), and coping tendencies (Hewitt & Flett, 1996). A further explanation is that self-oriented and socially prescribed perfectionism entail different beliefs about the relationship between accomplishment and feelings of self-worth. The prominence of a conditional sense of self-worth is evident in conceptualisations of both self-oriented and socially prescribed perfectionism. Self-oriented perfectionism involves the belief that *self*-acceptance is based on the attainment of exceedingly high *personal* standards. In contrast, socially prescribed perfectionism involves the belief that *self* and *other*-acceptance is contingent upon the attainment of exceedingly high standards that are *externally* imposed by others. Empirical findings have confirmed the positive association between these dimensions of perfectionism and conditional sense of self-acceptance and self-worth. Furthermore, this research also suggests that conditional acceptance and worth are significant sources of the psychological and emotional difficulties associated with these dimensions of perfectionism (e.g., Flett, Besser, Davis, & Hewitt, 2003; Flett, Russo, & Hewitt,

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1994; Hill, Hall, Appleton, & Kozub, 2008; Stoeber, Kempe, & Keogh, 2008; Sturman, Flett, Hewitt, & Rudolph, 2009).

The notion that conditional self-acceptance and self-worth provides the basis for psychological difficulties is central to a number of approaches to the examination of self-worth in social and counselling psychology (e.g., Deci & Ryan, 1995; Ellis, 2003; Kernis, 2003; Rogers, 1996). Deci and Ryan (1995) defined contingent self-worth as worth based upon the attainment of generalised inter-personal or intra-psychic expectations. In contrast, non-contingent self-worth (or true self-worth) is described as self-worth that is secure and independent of the attainment of these generalised inter-personal or intra-psychic expectations. According to these models, whether self-worth is contingent or not is a general quality that strongly influences psychological and emotional adjustment (see Kernis, 2003). From this perspective, self-oriented and socially prescribed perfectionism both lead to psychological difficulties because they are associated with contingent, as opposed to non-contingent, self-worth. However, this approach does not explain why contingent self-worth manifests in different consequences depending on the dimension of perfectionism.

Crocker and colleagues (Crocker, Luhtanen, Cooper, & Bouvrett, 2003; Crocker & Park, 2004; Crocker & Wolfe, 2001) provide a model that differentiates between the consequences of contingent self-worth. In contrast to emphasising between-person differences in contingent or non-contingent self-worth, their approach considers the domains in which worth is contingent. Contingencies of worth are the domains in which self-esteem is staked, enhanced and threatened (Crocker et al., 2003). Although contingencies of self-worth are likely to be wide and varied, Crocker and colleagues (Crocker et al., 2003; Crocker & Park, 2004; Crocker & Wolfe, 2001) have identified a number of common and important contingencies of worth that include personal competencies, inter-personal competition, approval of others, family affection, physical appearance, God's love and virtue. Attempts to satisfy contingencies of self-worth are associated with personal and inter-personal costs such as thwarting psychological needs and poorer mental and physical health (see Crocker & Park, 2004). However, from this perspective, some contingencies are considered to be more divisive than others. In particular, contingencies that involve external validation (e.g., approval of others) are associated with greater psychological maladjustment than those that can be internally referenced (e.g., personal competence) (see Crocker, 2002; Crocker & Park, 2004).

The potential similarities and differences between self-oriented and socially prescribed perfectionism in terms of the underlying contingencies of worth is evident in extant research. Both self-oriented and socially prescribed perfectionism have been found to be related to performance goals that entail the belief that demonstrating comparative ability defines personal success (e.g., Spiers Neumeister & Finch, 2006; Van Yperen, 2006). Consequently, both self-oriented and socially prescribed perfectionism are likely to include the desire to establish a sense of self-worth through superior performance in inter-personal competition. However, unlike self-oriented perfectionism, socially prescribed perfectionism is also likely to be associated with contingencies that pertain to the importance of the acceptance of others (e.g., others' approval). This is because this inter-personal dimension of perfectionism is purported to partly reflect a neurotic need to please others (Hewitt & Flett, 1991). In accord, previous research has demonstrated that this dimension of perfectionism is associated with a strong desire for approval and a fear of negative evaluation (Hewitt & Flett, 1991). Self-oriented perfectionism, on the other hand, is more likely to be associated with contingencies that pertain to personal competencies (e.g., academic competence, sport competence) because of the intrapersonal nature of the standards associated with this dimension (Hewitt & Flett, 1991). Research supports this possibility as self-oriented perfectionism has been found to be unre-

lated to the desire for approval from others or fear of negative evaluation but is associated with facets of Type A personality that reflect a preoccupation with personal accomplishment (Flett, Hewitt, Blankstein, & Dynin, 1994; Hewitt & Flett, 1991).

The purpose of this study is to extend previous research by examining the possibility that self-oriented and socially prescribed perfectionism are underpinned by different contingencies of self-worth. Based on the preceding argument, it was hypothesised that socially prescribed perfectionism would be predicted by contingencies of self-worth based on outperforming others and the approval of others whereas self-oriented perfectionism would be predicted by contingencies of self-worth based on outperforming others and personal competence.

1. Method

1.1. Participants

Participants were 248 (134 males, 86 females, and 28 non-respondents) undergraduates (age $M = 19.08$, $SD = 2.36$, range 18–49). The participants completed a multi-sectional questionnaire that contained measures of self-oriented and socially prescribed perfectionism and contingencies of self-worth prior to a research methods class. Informed consent was gained from each participant prior to completion of the questionnaire.

1.2. Measures

1.2.1. Multidimensional perfectionism

Self-oriented (SOP) and socially prescribed perfectionism (SPP) were assessed using Hewitt and Flett's (1991) multidimensional perfectionism scale (MPS). The third dimension measured by this scale, other-oriented perfectionism (OOP), entails beliefs about the performances of others and was therefore not included in the study. The two subscales of the MPS each contain 15-items measured on a seven-point Likert scale (1 = *strongly disagree* to 7 = *strongly agree*). Responses on the self-oriented perfectionism subscale reflect excessive striving for high personal standards and self-critical tendencies (e.g., "I demand nothing less than perfection of myself."). In contrast, responses to the socially prescribed perfectionism subscale reflect the belief that significant others have exceedingly high standards and that acceptance is based on the attainment of those standards (e.g., "The people around me expect me to succeed at everything I do."). Evidence to support the validity and reliability of measurement associated with the scale has been provided by Hewitt and Flett (1991, 2004). This evidence includes good internal consistency ($\alpha = \text{SOP } 0.89$ and $\alpha = \text{SPP } 0.86$) and test-retest reliability for these scales ($r = \text{SOP } 0.88$ and $r = \text{SPP } 0.75$) in student and general samples (Hewitt & Flett, 1991).

1.2.2. Contingencies of self-worth

Self-worth contingent on the approval of others and outperforming others was measured using two subscales from Crocker et al.'s (2003) contingencies of self-worth scale. Both the approval from generalised others subscale (OA) (e.g., "My self-esteem depends on the opinions others hold of me." "I can't respect myself if others don't respect me.") and the competition subscale (C) (e.g., "My self-worth is affected by how well I do when competing with others." "Knowing that I am better than others on a task raises my self-esteem.") contain five items. Each is scored on a seven-point Likert scale (1 = *strongly disagree* to 7 = *strongly agree*). Crocker et al. (2003) have provided evidence to support the validity and the reliability of the measurement associated with these two subscales. This includes good factor stability, internal consistency ($\alpha = \text{OA } 0.82$ and $\alpha = \text{C } 0.87$) and test-retest reliability ($r = \text{OA}$

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