



## Facets of self-oriented and socially prescribed perfectionism and feelings of pride, shame, and guilt following success and failure

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### Abstract

According to traditional views of perfectionism, perfectionists are prone to experience shame and guilt and unable to experience pride. However, these views ignore that perfectionism is multidimensional and multifaceted. Consequently, the present study adopted a multidimensional approach and investigated in a sample of  $N = 67$  university students how four facets of perfectionism – perfectionistic striving, importance of being perfect, others' high standards, conditional acceptance – were related to pride, shame, and guilt following experimental manipulation of success and failure. Results showed that perfectionistic striving was associated with more pride following success, whereas all facets were associated with more shame and guilt following failure, particularly conditional acceptance. Furthermore, conditional acceptance was associated with less pride regardless of success or failure. Supporting views of perfectionism that differentiate between adaptive and maladaptive aspects, the findings show that individuals who strive for perfection experience more pride after success. Whereas all facets of perfectionism were related to more shame and guilt after failure, only individuals who think that others' approval is conditional upon being perfect seem to be unable to experience pride. The findings demonstrate that perfectionistic striving per se is not maladaptive, but conditional acceptance may be an important factor in maladaptive and clinical perfectionism.

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## 1. Introduction

Individuals with high levels of perfectionism are characterized by striving for flawlessness and setting excessively high standards for performance accompanied by tendencies for overly critical evaluations of their behavior (Flett & Hewitt, 2002; Frost, Marten, Lahart, & Rosenblate, 1990). Therefore, it has been argued that individuals with high levels of perfectionism – because they have excessively high standards and are overly self-critical – regard all their achievements as under-achievements and thus are prone to experience shame and guilt and unable to experience pride (e.g., Sorotzkin, 1985; see Tangney, 2002 for a comprehensive review).

However, perfectionism has many faces (Benson, 2003), and research has shown that perfectionism is best conceived of as a multidimensional and multifaceted characteristic (e.g., Frost et al., 1990; Hewitt & Flett, 1991; Hill et al., 2004). Regarding multidimensional measures of perfectionism, the most widely used measure is the multidimensional perfectionism scale (MPS; Hewitt & Flett, 1991). Consequently, most studies investigating how perfectionism relates to pride, shame, and guilt have used the MPS. The MPS differentiates between three dimensions of perfectionism of which two are relevant in the present context: self-oriented perfectionism and socially prescribed perfectionism. Self-oriented perfectionism describes self-imposed perfectionistic standards as expressed in perfectionistic striving and the personal belief that it is important to be perfect, whereas socially prescribed perfectionism describes the notion that others exert pressure on oneself as expressed in the belief that others have high expectations and that others' approval is conditional on one's being perfect. A number of studies have investigated how self-oriented perfectionism and socially prescribed perfectionism relate to pride, shame, and guilt (Fee & Tangney, 2000; Hewitt & Flett, 1991; Klibert, Langhinrichsen-Rohling, & Saito, 2005; Lutwak & Ferrari, 1996; Tangney, 2002). Results, however, were inconclusive. Only socially prescribed perfectionism showed positive correlations with shame and guilt across studies, whereas self-oriented perfectionism showed positive correlations with shame and guilt in some studies, but not in others. Moreover, neither self-oriented perfectionism nor socially prescribed perfectionism showed any significant correlations with pride (see Stoeber, Harris, & Moon, 2007 for a comprehensive review).

A potential explanation for this inconclusive pattern of findings may be that the dimensions of self-oriented perfectionism and socially prescribed perfectionism are not homogenous, but comprise different facets that show different relations (Campbell & Di Paula, 2002; Trimpeter, Watson, & O'Leary, 2006; Van Yperen, 2006). According to Campbell and Di Paula (2002), self-oriented perfectionism and socially prescribed perfectionism each comprise two facets: Self-oriented perfectionism comprises the striving for perfection (perfectionistic striving) and the belief that being perfect is important (importance of being perfect), and socially prescribed perfectionism comprises the belief that others have high standards for oneself (others' high standards) and that acceptance by others is conditional on fulfilling these high standards (conditional acceptance). Moreover, Campbell and Di Paula found that these four facets showed differential relationships with affect, self-esteem, and personality. Regarding the two facets of self-oriented perfectionism, perfectionistic striving showed positive correlations with positive affect, self-esteem, extraversion, openness, and conscientiousness and negative correlations with negative affect, depression, and neuroticism whereas importance of being perfect showed a positive correlation with conscientiousness, but a negative correlation with self-esteem. Regarding the two facets of

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