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Multidimensional perfectionism and the DSM-5 personality traits



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ABSTRACT

Encouraging further research on the dimensional assessment of personality disorders (PDs), Section III of the DSM-5 introduced a hybrid model for the assessment of six PDs employing self-reports on 25 maladaptive personality traits (“DSM-5 personality traits”). Following suggestions that multidimensional perfectionism is an important characteristic across various personality disorders (Ayeart, Flett, & Hewitt, 2012), the present study investigated how personal (self-oriented) and interpersonal (other-oriented and socially prescribed) forms of perfectionism predicted the DSM-5 personality traits in a sample of 311 university students. Multiple regressions (controlling for the overlap between the different forms of perfectionism) showed that socially prescribed perfectionism positively predicted the traits defining schizotypal, borderline, avoidant, and obsessive-compulsive PD; other-oriented perfectionism positively predicted the traits defining narcissistic PD; and both socially prescribed and other-oriented perfectionism positively predicted only one of the four traits defining obsessive-compulsive PD (rigid perfectionism). Showing that multidimensional perfectionism predicted all DSM-5 traits defining the personality disorders of Section III, the findings suggest that future DSM-5 updates may profit from including interpersonal aspects of perfectionism as a diagnostic criterion.

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1. Introduction

1.1. Background

In a critical article addressed to the personality and personality disorders (P&PD) work group of the DSM-5 task force, Ayeart, Flett, and Hewitt (2012) argued that the group did not recognize the importance of multidimensional perfectionism as a defining trait of personality disorders despite evidence suggesting that multidimensional perfectionism is an important characteristic across various personality disorders. The DSM-5 (American Psychiatric Association, 2013) has now been published retaining the categorical approach to the assessment of the 10 personality disorders from the DSM-IV. However, Section III of the DSM-5 introduced a new hybrid model using a dimensional approach in the assessment of six personality disorders employing self-reports on 25 maladaptive personality traits (consecutively referred to as “the DSM-5 personality traits”). Taking up the American Psychiatric Association’s call to further research on this hybrid model, the present research investigated the relationships between multidimensional perfectionism and the DSM-5 personality traits to explore the role

that personal and interpersonal aspects of perfectionism play in the traits defining the six personality disorders of the model: schizotypal, borderline, antisocial, avoidant, narcissistic, and obsessive-compulsive personality disorder (PD).

1.2. Multidimensional perfectionism and personality disorders

In their article, Ayeart et al. (2012) argued that the P&PD work group’s view of the role perfectionism played in personality disorders was too narrow because it considered only “rigid perfectionism” as a defining trait of obsessive-compulsive PD. Rigid perfectionism – defined as “rigid insistence on everything being flawless, perfect, and without errors or faults, including one’s own and others’ performance” (American Psychiatric Association, 2013, p. 780) – however does not acknowledge that perfectionism is a multidimensional personality characteristic (e.g., Enns & Cox, 2002), which suggests that the unidimensional conceptualization of perfectionism in the DSM-5 is flawed. Moreover, by including “one’s own or others’ performance,” rigid perfectionism confused self-oriented and other-oriented perfectionism; and it completely ignored socially prescribed perfectionism.

According to Hewitt and Flett’s (1991) model of multidimensional perfectionism, it is important to differentiate three forms of perfectionism capturing personal and interpersonal aspects:

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self-oriented, other-oriented, and socially prescribed perfectionism. Self-oriented perfectionism comprises internally motivated beliefs that striving for perfection and being perfect are important. Self-oriented perfectionists have exceedingly high personal standards, strive for perfection, expect to be perfect, and are highly self-critical if they fail to meet these expectations. In comparison, other-oriented perfectionism comprises internally motivated beliefs that it is important for others to strive for perfection and be perfect. Other-oriented perfectionists expect others to be perfect, and are highly critical of others who fail to meet these expectations. In contrast, socially prescribed perfectionism comprises externally motivated beliefs that striving for perfection and being perfect are important to others. Socially prescribed perfectionists believe that others expect them to be perfect, and that others will be highly critical of them if they fail to meet these expectations (Hewitt & Flett, 1991, 2004).

Based on a review of empirical research and case studies, Ayeart et al. (2012) argued that interpersonal aspects of perfectionism (other-oriented and socially prescribed perfectionism) should play a more important role in the assessment of personality disorders than personal aspects (self-oriented perfectionism). The reason is that self-oriented perfectionism – showing substantial conceptual overlap with rigid perfectionism – has failed to show any unique positive relationships with personality disorders other than obsessive-compulsive PD (except for a *negative* relationship with dependent PD). In contrast, other-oriented perfectionism has shown unique positive relationships with narcissistic and antisocial PD; and socially prescribed perfectionism has shown unique positive relationships with obsessive-compulsive, schizotypal, borderline, antisocial, avoidant, paranoid, passive-aggressive, and dependent PD (see also Hewitt & Flett, 1991).

1.3. DSM-5 personality traits

If Ayeart et al. (2012) analyses are correct, multidimensional perfectionism should also play a role in the six personality disorders of the hybrid model introduced in Section III of the DSM-5 (see 1.1.). Applying this model, clinicians would assess personality disorders based on an individual's self-ratings on the DSM-5 personality traits defining borderline and antisocial PD (each defined by seven traits), schizotypal PD (six traits), avoidant and obsessive-compulsive PD (four traits each), and narcissistic PD (two traits; see Table 1, Column 2 for details). Moreover, following Ayeart and colleagues' analyses, multidimensional perfectionism – and in particular other-oriented and socially prescribed perfectionism – should be expected to show significant unique relationships with the DSM-5 personality traits defining the six personality disorders.

The DSM-5 personality traits are assessed with the Personality Inventory for the DSM-5 (PID-5) developed by members of the P&PD work group (see Krueger, Derringer, Markon, Watson, & Skodol, 2012, for details) and published as an online supplement to the DSM-5 (Krueger, Derringer, Markon, Watson, & Skodol, 2013). The PID-5 is a self-report inventory assessing 25 maladaptive personality traits that are considered facets of five broad trait domains: negative affect, detachment, antagonism, disinhibition, and psychoticism (see Table 1, Column 1 for details). Note that the five domains show close correspondence to the domains of the five-factor model of personality representing maladaptive variants of low emotional stability, low extraversion, low agreeableness, low conscientiousness, and high openness to experience (e.g., De Fruyt et al., 2013). Consequently, expectations can also be formulated regarding how the three forms of perfectionism should be related to the DSM-5 personality trait domains (see 1.4.).

1.4. The present study

Against this background, the present study was designed to investigate the relationships of multidimensional perfectionism with the DSM-5 personality traits examining how personal (self-oriented) and interpersonal (other-oriented and socially prescribed) aspects of perfectionism predicted the DSM-5 trait facets and domains in a large sample of university students. Based on Ayeart et al.'s (2012) analyses, socially prescribed perfectionism was expected to positively predict the DSM-5 traits defining schizotypal, borderline, avoidant, and obsessive-compulsive PD, and other-oriented perfectionism to predict the traits defining narcissistic and antisocial PD. In contrast, there were no clear expectations for self-oriented perfectionism other than the expectation that it would positively predict rigid perfectionism. Moreover, from research on how the three forms of perfectionism are related to the domains of the five-factor model of personality (Hewitt & Flett, 2004; Hill, McIntire, & Bacharach, 1997), self-oriented perfectionism was expected to negatively predict disinhibition (low conscientiousness), other-oriented perfectionism to positively predict antagonism (low agreeableness), and socially prescribed perfectionism to positively predict negative affect (low emotional stability) and detachment (low extraversion).

2. Methods

2.1. Participants

A sample of 311 students (39 male, 272 female) studying at the University of Kent was recruited via the School of Psychology's Research Participation Scheme (RPS). Mean age of students was 19.9 years ($SD = 4.5$). Students volunteered to participate for RPS credits or a £50 raffle (~US \$83). Participants completed all measures online using the School's Qualtrics® platform which required participants to respond to all questions to prevent missing values. The study was approved by the relevant ethics committee and followed the British Psychological Society's (2009) code of ethics and conduct.

2.2. Measures

2.2.1. Multidimensional perfectionism

The 45-item Multidimensional Perfectionism Scale (MPS; Hewitt & Flett, 2004) was used to measure self-oriented perfectionism (15 items; e.g., "I demand nothing less than perfection of myself"), other-oriented perfectionism (15 items; "If I ask someone to do something, I expect it to be done flawlessly"), and socially prescribed perfectionism (15 items; "People expect nothing less than perfection from me"). The MPS has demonstrated reliability and validity in numerous studies (see Hewitt & Flett, 2004). Items were presented with the MPS's standard instruction ("Listed below are a number of statements concerning personal characteristics and traits..."), and participants responded on a scale from 1 (*strongly disagree*) to 7 (*strongly agree*).

2.2.2. DSM-5 personality traits

The 220-item adult version of the Personality Inventory for DSM-5 (PID-5; Krueger et al., 2013) was used to measure the DSM-5 personality traits (in alphabetical order): anhedonia (8 items; e.g., "I don't get as much pleasure out of things as others seem to"), anxiousness (9 items; "I worry about almost everything"), attention seeking (8 items; "I crave attention"), callousness (14 items; "I don't care if my actions hurt others"), deceitfulness (10 items; "I don't hesitate to cheat if it gets me ahead"), depressivity (14 items; "Everything seems pointless to me"), distractibility

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