

Complexities of measuring perfectionism: Three popular perfectionism measures and their relations with eating disturbances and health behaviors in a female college student sample[☆]

Edward C. Chang^{*}, Valentina Ivezaj, Christina A. Downey,
Yuri Kashima, Aviva R. Morady

Department of Psychology, University of Michigan, 530 Church, Ann Arbor, MI 48109, United States

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Abstract

The present study investigated the relationships between three popular measures of perfectionism [the Eating Disorders Inventory — Perfectionism scale (EDI-P), the Frost Multidimensional Perfectionism Scale (FMPS), and the Multidimensional Perfectionism Scale (MPS)] and measures of eating disturbances and health behaviors, in a sample of 248 female college students. Results indicated that the adaptiveness or maladaptiveness of certain perfectionism dimensions should still be questioned. Also, self-oriented and socially prescribed perfectionism (from the MPS) were consistently found to be the most important predictors of both eating disturbances and health behaviors. Surprisingly, scores on the EDI-P were not found to be significant predictors of eating disturbances when FMPS and MPS scores were included in regression analyses. Implications of the present findings are discussed.

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1. Introduction

In recent decades, there has been a growing interest in studying *perfectionism*, the tendency to hold and pursue exceedingly high standards. Findings across studies on perfectionism have linked it to a host of psychological and physical outcomes (Chang, 2003; Chang, Downey, & Lin, 2006; Flett & Hewitt, 2002; Shafran & Mansell, 2001). Originally, perfectionism was first studied as a unidimensional construct (Burns, 1980). For example, many early studies utilized the Eating Disorder Inventory — Perfectionism scale (EDI-P; Garner, Olmstead, & Polivy, 1983). The EDI, which was originally developed to measure some of the core affective, behavioral, and cognitive features of

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^{*} Corresponding author.

E-mail address: changec@umich.edu (E.C. Chang).

disturbed eating patterns, includes a six-item scale measuring perfectionism. The inclusion of perfectionism in the EDI indicates the degree to which perfectionism has been thought to represent one of the most important features of disordered eating. While the EDI-P has been widely used to assess perfectionism as a unidimensional construct in predicting eating disturbances for more than 30 years (Franco-Paredes, Mancilla-Diaz, Vazquez-Arevalo, Loopez-Aguilar, & Alvarez-Rayon, 2005), some recent research has questioned the unidimensionality of this scale (Sherry, Hewitt, & Besser, 2004).

1.1. The pursuit of perfectionism: Approaches to theory and measurement

In recent years, several researchers have proposed multidimensional models and measures of perfectionism. The Frost Multidimensional Perfectionism Scale (FMPS; Frost, Marten, Lahart, & Rosenblate, 1990) and the Multidimensional Perfectionism Scale (MPS; Hewitt & Flett, 1991), while similar in name, posit perfectionism to be comprised of quite different dimensions. For example, the FMPS taps six perfectionism dimensions (viz., concern over mistakes, personal standards, parental expectations, parental criticism, doubts about actions, and organization), whereas the MPS taps three different perfectionism dimensions (viz., self-oriented, other-oriented, and socially prescribed perfectionism). Given such differences and the fact that most perfectionism studies use one or the other, it is not surprising that some inconsistencies have emerged in the findings. Therefore, it would be useful in conducting a study on perfectionism to consider all three popular measures of perfectionism (viz., EDI-P, FMPS, and MPS). Also, such a study would provide an opportunity to investigate previous assertions that subscales from existing perfectionism measures represent adaptive and maladaptive dimensions. Specifically, Frost, Heimberg, Holt, Mattia, and Neubauer (1993) have suggested that scales tapping some dimensions of perfectionism are adaptive (viz., personal standards, organization, and self-oriented perfectionism), whereas others are maladaptive (viz., concern over mistakes, parental expectations, parental criticism, doubts about actions, other-oriented and socially prescribed perfectionism).

1.2. Eating disturbances in college women as an important arena for the study of perfectionism

Young women frequently engage in disturbed eating behaviors (Heatherton, Mahamedi, Striepe, Field, & Keel, 1997). While many girls are considered chronic dieters by the time they reach high school, rates of disturbed eating behaviors increase further with the transition to college (Vohs, Heatherton, & Herrin, 2001). Although eating disorders such as anorexia nervosa and bulimia nervosa may not be commonly diagnosed within the college population, the prevalence of eating disturbances among college students is still high (Mutterperl & Sanderson, 2002). In a study conducted by Mintz and Betz (1988), results revealed that only 33% of college women maintained normal eating patterns, while 64% fell into more disturbed eating patterns between the range of normal and bulimic, and prevalence rates of eating disturbances may actually be rising in this population (Anstine & Grinenko, 2000; Pyle, Halvorson, Neuman, & Mitchell, 1987).

While a review of the literature points to many factors predicting eating disturbances (e.g., parental pressure, body dissatisfaction, and peer influences; Strong & Huon, 1996; Vincent & McCabe, 2000), perfectionism is often a salient characteristic in women with eating disturbances (Vohs, Bardone, Joiner, Abramson, & Heatherton, 1999). Indeed, research has indicated that perfectionism predicts symptoms of both anorexia nervosa (e.g., Bastiani, Rao, Weltzin, & Kaye, 1995; Hewitt, Flett, & Ediger, 1995) and bulimia nervosa (e.g., Bulik et al., 2003; Hewitt & Flett, 1991). In addition, because studies have found a reliable association between body dissatisfaction (often found in both anorexia and bulimia) and perfectionism (Downey & Chang, in press; Joiner, Heatherton, Rudd, & Schmidt, 1997; Vohs et al., 1999), it would also be important to look at body dissatisfaction in studies of eating disturbances. Furthermore, little is known about the associations between perfectionism and broader indicators of general physical adjustment. According, it would be useful to examine perfectionism's relationships to both disturbed eating behaviors and health behaviors in general.

2. Purpose of the present study

Given the present concerns, we had three objectives in conducting the present study: 1) to examine the relations between three popular measures of perfectionism (viz., EDI-P, FMPS, and MPS); 2) to examine the relations of

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