

Est.  
1841

YORK  
ST JOHN  
UNIVERSITY

Smith, Martin M. ORCID logoORCID:  
<https://orcid.org/0000-0002-4754-3032>, Speth, Tamara A., Sherry, Simon B., Saklofske, Donald H., Stewart, Sherry H. and Glowacka, Maria (2017) Is socially prescribed perfectionism veridical? A new take on the stressfulness of perfectionism. *Personality and Individual Differences*, 110. pp. 115-118.

Downloaded from: <https://ray.yorks.ac.uk/id/eprint/2924/>

The version presented here may differ from the published version or version of record. If you intend to cite from the work you are advised to consult the publisher's version:  
<https://doi.org/10.1016/j.paid.2017.01.031>

Research at York St John (RaY) is an institutional repository. It supports the principles of open access by making the research outputs of the University available in digital form. Copyright of the items stored in RaY reside with the authors and/or other copyright owners. Users may access full text items free of charge, and may download a copy for private study or non-commercial research. For further reuse terms, see licence terms governing individual outputs. [Institutional Repository Policy Statement](#)

# RaY

Research at the University of York St John

For more information please contact RaY at [ray@yorks.ac.uk](mailto:ray@yorks.ac.uk)

Smith, M.M., Speth, T. A., Sherry, S.B., Saklofske, D.H., Glowacka, M. (in press). Is socially prescribed perfectionism veridical? A new take on the stressfulness of perfectionism. *Personality and Individual Differences*.

Is Socially Prescribed Perfectionism Veridical? A New Take on the Stressfulness of  
Perfectionism

Martin M. Smith<sup>a\*</sup>, Tamara A. Speth<sup>b</sup>, Simon B. Sherry<sup>b,c</sup>, Donald H. Saklofske<sup>a</sup>, Sherry H.  
Stewart<sup>c,b</sup>, and Maria Glowacka<sup>b</sup>

—Short Communication (3000 words)—

<sup>a</sup>Department of Psychology, The University of Western Ontario, 1151 Richmond Street, London,  
Ontario, Canada N6A 5C2

<sup>b</sup>Department of Psychology and Neuroscience, Dalhousie University, 1355 Oxford Street,  
PO BOX 15000, Halifax, Nova Scotia, Canada B3H 4R2

<sup>c</sup>Department of Psychiatry, Dalhousie University, 5909 Veteran's Memorial Lane, Halifax, Nova  
Scotia, Canada B3H 2E2

\*Corresponding author. Tel.: +1-519-661-2111.

E-mail: msmit454@uwo.ca (M. M. Smith).

### Highlights

- Examined perfectionism, neuroticism, and stress in 312 targets and 1014 influences.
- In targets, socially prescribed perfectionism (SPP) was related to perceived stress.
- Influences' other-oriented perfectionism was related to the targets' SPP.
- Path analysis revealed influence's OOP indirectly affects target's stress via target's SPP.
- New light is shed on whether SPP is veridical.

## Abstract

Socially prescribed perfectionists play an active role in creating stress through a process known as stress generation. Extensive evidence also suggests that stress among socially prescribed perfectionists stems from perceived external pressures to be perfect. However, the degree to which these sensed outside pressures reflect real or imagined demands is unclear. In particular, does having other-oriented perfectionists in one's social network lead to greater socially prescribed perfectionism and stress? To address this, we recruited 312 undergraduates (targets) and 1014 members of their social networks (influencers). Targets completed measures of self-oriented perfectionism, socially prescribed perfectionism, stress, and neuroticism. Influencers completed a measure of other-oriented perfectionism. As expected, the relationship between other-oriented perfectionism in influencers and self-oriented perfectionism in targets was not significant. However, as anticipated, path analysis revealed that influencers' other-oriented perfectionism contributed to targets' socially prescribed perfectionism, which in turn contributed to targets' stress, even after controlling for targets' neuroticism. Findings underscore the importance of considering the veridical aspects of socially prescribed perfectionism, as well as continuing to investigate the potentially deleterious consequences of having other-oriented perfectionists in one's social network.

*Keywords:* perfectionism, stress generation, neuroticism, university students, social network, path-analysis, interpersonal conflict

## 1. Introduction

Hewitt and Flett (1991) assert perfectionism is best understood as a multidimensional personality trait composed of three dimensions: self-oriented perfectionism (demanding perfection from oneself), other-oriented perfectionism (demanding perfection from others), and socially prescribed perfectionism (perceiving others are demanding perfection of oneself). Self-oriented perfectionism is double-edged. On the one hand, self-oriented perfectionism is associated with positive characteristics such as conscientiousness (Stoeber, Corr, Smith, & Saklofske, in press). On the other hand, self-oriented perfectionism places people at risk for increased depressive symptoms over time (Smith, Sherry, Rnic et al., 2016).

Other-oriented perfectionism is similarly double-edged and displays positive associations with grandiose narcissism, Machiavellianism, psychopathy, and aggressive humor and negative associations with pro-social orientations (Smith, Sherry, Chen et al., 2016; Stoeber, 2014, Stoeber, 2015). Nonetheless, other-oriented perfectionism is also tied to lower burnout (Childs & Stoeber, 2010), superior problem solving (Flett, Hewitt, Blankstein, Solnick, & Brunshot, 1996), and positive self-regard (Stoeber, 2015).

Finally, socially prescribed perfectionism shows strong and consistent associations with indicators of psychological maladjustment (Hewitt & Flett, 2002). Compared to other-oriented perfectionists, socially prescribed perfectionists have lower self-esteem and higher vulnerable narcissism (Smith, Sherry, Chen et al., 2016; Stoeber, 2015). And, unlike other-oriented perfectionists, socially prescribed perfectionists think, feel, and behave in ways that generate stress, which in turn increases vulnerability to clinical conditions such as depression and eating disorders (Hewitt & Flett, 2002). For instance, socially prescribed perfectionists generate stress due to both internal factors such as negative social cognitions, and external factors such as

negative life events (Dunkley, Zuroff, & Blankstein, 2003; Hewitt & Flett, 2002; Sherry, Law, Hewitt, Flett, & Besser, 2008).

Yet, whether socially prescribed perfectionists generate stress due to real or imagined demands to be perfect remains unclear. In particular, might other-oriented perfectionists lead others to legitimately perceive outside pressures to be perfect, which in turn generates stress? And might the relationship between socially prescribed perfectionism and stress merely be an artifact stemming from overlap with the dispositional tendency to experience negative emotional states (i.e., neuroticism)?

### *1.2. The present study*

We sought to clarify the relationships between other-oriented perfectionism in influencers and socially prescribed perfectionism and perceived stress in targets. We anticipated other-oriented perfectionism in members of targets' social network would predict targets' socially prescribed perfectionism, but not targets' self-oriented perfectionism. We also anticipated that targets' socially prescribed perfectionism would correlate positively with targets' perceived stress. Furthermore, we expected that influencers' other-oriented perfectionism would indirectly affect targets' perceived stress through targets' socially prescribed perfectionism. Finally, we anticipated that the socially prescribed perfectionism-stress relationship is not simply secondary to overlap with neuroticism. Given that neuroticism overlaps substantially with both socially prescribed perfectionism and stress (Enns, Cox, & Clara, 2005; Smith, Sherry, Rnic et al., 2016), controlling for neuroticism, when examining socially prescribed perfectionism's relationship with stress, is important.

## **2. Method**

### *2.1. Participants*

A sample of undergraduates was recruited from a large university in Eastern Canada ( $N = 312$ ; 247 women). Participants averaged 20.2 years of age ( $SD = 3.6$ ) and were primarily of European descent (69.6%). We call these participants targets. Additionally, 1680 members of the targets' social networks were contacted to participate; we call these participants influencers. Of the 1680 influencers contacted, 1014 (647 women) participated (60.4%). On average, there were 3.0 ( $SD = 1.5$ ) influencers per target. Influencers were composed of friends (43.8%), mothers (16.9%), fathers (10.1%), romantic partners (7.9%), sisters (7.2%), brothers (3.8%), and other relatives (10.3%). Influencers averaged 31.0 years of age ( $SD = 15.4$ ). The average length of the influencers relationship with the target was 11.3 years ( $SD = 8.8$ ). Influencers had face to face contact with the target on average 3.6 ( $SD = 1.7$ ) times per week.

## 2.2. Measures

### 2.2.1. Perfectionism

Perfectionism was measured using the 15-item short-form of Hewitt and Flett's (1991) *Multidimensional Perfectionism Scale* (HFMPSS-SF; Hewitt, Habke, Lee-Baggley, Sherry, & Flett, 2008). Targets completed measures of self-oriented perfectionism (e.g., "It is very important that I am perfect in everything I attempt") and socially prescribed perfectionism (e.g., "People expect nothing less than perfection from me"). Influencers completed a measure of other-oriented perfectionism (e.g., "Everything that others do must be of top-notch quality"). Reliability and validity evidence for the HFMPSS-SF is supported (Stoeber, in press). Participants responded to HFMPSS-SF items using a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*).

### 2.2.2. Neuroticism

Neuroticism was measured using the 8-item neuroticism subscale of the *Big Five Inventory* (BFI-N; e.g., “I see myself as someone who gets nervous easily;”; John, Donahue, & Kentle, 1991). Reliability and validity evidence for the BFI-N is strong (Soto & John, 2009). Targets responded to BFI-N items using a 5-point rating scale from 1 (*disagree strongly*) to 5 (*strongly agree*).

### 2.2.3. *Perceived stress*

Perceived stress was measured using the 14-item *Perceived Stress Scale* (PSS; e.g., “In the past 7 days, how often have you felt nervous or stressed;” Cohen, Kamarck, & Mermelstein, 1983). We modified the PSS such that ratings reflected perceived stress over the past 7 days, as opposed to the past month. Lee (2012) reported evidence indicating good psychometric properties for the PSS. Targets responded to PSS items using a 4-point scale from 0 (*never*) to 4 (*very often*).

### 2.2.4. *Procedure*

Targets were recruited from the Department of Psychology and Neuroscience’s subject pool and completed measures of neuroticism, self-oriented perfectionism, socially prescribed perfectionism, and perceived stress. Targets also provided email contact information for five people in their social network (i.e., influencers). Influencers were required to have known the targets for at least three months and to interact with them at least two times per week (in person, phone, skype, or email). Eligible influencers were contacted via email and directed to an online measure of other-oriented perfectionism. In compensation, targets were awarded one credit to use towards a psychology course and influencers were entered into 1 of 20 cash draws for \$50.

## **3. Results**

### 3.1. *Descriptive statistics*



Means, standard deviations, Cronbach's alpha, and bivariate correlations are in Table 1. Following Cohen's (1992) guidelines for small, medium, and large effect sizes ( $r = .10, .30, .50$ , respectively), influencers' other-oriented perfectionism displayed a small positive association with targets' socially prescribed perfectionism. And targets' socially prescribed perfectionism displayed a moderate positive relationship with targets' perceived stress. Likewise, targets' neuroticism displayed a small positive relationship with targets' socially prescribed perfectionism and a large positive relationship with targets' perceived stress. However, the relationship between influencers' other-oriented perfectionism and targets' neuroticism, as well as the relationship between influencers' other-oriented perfectionism and targets' perceived stress, were non-significant ( $p < .05$ ).

### 3.2. Path analysis

To test whether the targets' socially prescribed perfectionism mediated the relationship between influencers' other-oriented perfectionism and targets' perceived stress, path analysis with maximum likelihood estimation was conducted using Mplus 7.2 (Muthén & Muthén, 2012). The significance of indirect effects was computed using bias-corrected bootstrapping with 20,000 resamples. If the 95% confidence interval for an indirect effect does not contain 0 within its upper and lower bounds, it suggests mediation. Finally, standardized effect sizes for indirect effects were computed using the Sobel test (i.e.,  $P_M$ ; Sobel, 1982; see Preacher & Leonardelli, 2003).

As anticipated, the indirect effect of influencers' other-oriented perfectionism on targets' perceived stress via targets' socially prescribed perfectionism was significant:  $B = .45$ ,  $\beta = .06$  (95% CI, .02, .10),  $P_M = 2.69$  ( $p = .007$ ), and  $SE = .02$ . This indirect effect remained significant even after controlling for neuroticism:  $B = .21$ ,  $\beta = .03$  (95% CI, .01, .05),  $P_M = 2.29$  ( $p = .023$ ),

and  $SE = .01$  (see Figure 1). We also tested a model with socially prescribed perfectionism removed from Figure 1. Influencers' other-oriented perfectionism was not significantly associated with target's perceived stress ( $B = .40$ ,  $\beta = .05$  [95% CI,  $-.04$ ,  $.14$ ],  $SE = .05$ ), whereas target's neuroticism was significantly related to the target's perceived stress ( $B = .81$ ,  $\beta = .65$  [95% CI,  $.59$ ,  $.71$ ],  $SE = .03$ ).

Specificity was tested by substituting self-oriented perfectionism for socially prescribed perfectionism in Figure 1. The indirect effect of influencers' other-oriented perfectionism on targets' perceived stress, via targets' self-oriented perfectionism was not significant:  $B = .09$ ,  $\beta = .01$  (95% CI,  $-.01$ ,  $.03$ ),  $P_M = 1.01$  ( $p = .311$ ), and  $SE = .01$ . In fact, targets' self-oriented perfectionism was not significantly associated with influencers' other-oriented perfectionism ( $B = .62$ ,  $\beta = .08$  [95% CI,  $-.04$ ,  $.20$ ],  $SE = .06$ ), or with targets' perceived stress ( $B = .07$ ,  $\beta = .07$  [95% CI,  $-.02$ ,  $.16$ ],  $SE = .05$ ), or with targets' neuroticism ( $B = .09$ ,  $\beta = .08$  [95% CI,  $-.03$ ,  $.19$ ],  $SE = .06$ ). Thus, socially prescribed perfectionism appears to be more relevant to the relationship between influencers' other-oriented perfectionism and targets' perceived stress than self-oriented perfectionism.

#### 4. Discussion

Our study is the first to consider the role of other-oriented perfectionism in one's social network in contributing to the link between socially prescribed perfectionism and perceived stress. Preliminarily, findings suggest socially prescribed perfectionism is, to a small extent, veridical. In particular, results suggest that having other-oriented perfectionism in one's social network, is tied to feelings of pressure to be perfect which, in turn, is associated with increased stress. Consequently, although socially prescribed perfectionism is often conceptualized as primarily a social-cognitive personality trait, our findings suggest perceived external pressures to

be perfect may not simply be a “between the ears” phenomenon. Rather, perceiving others as critical and demanding may be reflective of actual criticism and demands in one’s social network. Likewise, findings also suggest people who harshly demand perfection from others, while experiencing perpetual dissatisfaction with others’ perceived flaws (i.e., other-oriented perfectionists), may have stress-inducing effects on others.

Moreover, findings also revealed other-oriented perfectionism in one’s social network did not contribute to targets’ self-oriented perfectionism. This finding increases confidence in the specificity of our results, and suggests self-oriented perfectionists may be intrinsically motivated to strive for perfection. In summary, our study underscores the importance of considering socially prescribed perfectionism as more than a social-cognitive personality trait. Socially prescribed perfectionists may experience stress, in part, because they find themselves influenced by other-oriented perfectionists in their social environment.

#### *4.4. Limitations and future directions*

Our study was cross-sectional, precluding us from addressing questions of directionality. Future research might address this by examining the extent to which other-oriented perfectionism in one’s social network predicts longitudinal changes in targets’ socially prescribed perfectionism and stress. We also operationalized stress in terms of cognitions. Future research might investigate the extent to which findings replicate when stress is operationalized in terms of biomarkers (e.g., cortisol). Additionally, we measured other-oriented perfectionism in the targets’ social network, despite theory suggests parenting behaviors are particularly relevant for the development of perfectionism. Thus, future research might investigate the extent to which other-oriented perfectionism in parents influences their child’s socially prescribed perfectionism (Flett, Hewitt, Oliver, & MacDonald, 2002). Moreover, given the association between socially

prescribed perfectionism and suicide (Flett, Hewitt, & Heisel, 2014), future research might consider testing whether having other-oriented perfectionism in one's social network contributes to suicide ideation. Finally, influencers who agreed to participate may have been more agreeable than influencers who declined to participate. Future research could address this potential bias by randomly sampling influencers from the targets' social network.

#### *4.5. Concluding remarks*

Our findings suggest self-oriented perfectionism and socially prescribed perfectionism have distinct interpersonal precipitants, with only socially prescribed perfectionism being tied to proximity to other-oriented perfectionists. Moving forward, we encourage researchers to consider that socially prescribed perfectionism is, to a small extent, veridical and to further investigate the potentially deleterious consequences of having other-oriented perfectionists in one's social network.

## References

- Besser, A., Flett, G. L., Hewitt, P. L., & Guez, J. (2008). Perfectionism, and cognitions, affect, self-esteem, and physiological reactions in a performance situation. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, *26*, 206-228.
- Childs, J. H., & Stoeber, J. (2010). Self-oriented, other-oriented, and socially prescribed perfectionism in employees: relationships with burnout and engagement. *Journal of Workplace Behavioral Health*, *25*, 269-281.
- Cohen, J. (1992). A power primer. *Psychological Bulletin*, *112*, 155-159.
- Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, *24*, 385-396.
- Dunkley, D. M., Zuroff, D. C., & Blankstein, K. R. (2003). Self-critical perfectionism and daily affect: Dispositional and situational influences on stress and coping. *Journal of Personality and Social Psychology*, *84*, 234-252.
- Enns, M. W., Cox, B. J., & Clara, I. P. (2005). Perfectionism and neuroticism: A longitudinal study of specific vulnerability and diathesis-stress models. *Cognitive Therapy and Research*, *29*, 463-478.
- Flett, G. L., Hewitt, P. L., Blankstein, K. R., Solnik, M., & Van Brunschot, M. (1996). Perfectionism, social problem-solving ability, and psychological distress. *Journal of Rational-Emotive and Cognitive-Behavior Therapy*, *14*, 245-274.
- Flett, G. L., Hewitt, P. L., & Heisel, M. J. (2014). The destructiveness of perfectionism revisited: Implications for the Assessment of Suicide Risk and Prevention of Suicide. *Review of General Psychology*, *18*, 156-172.

- Flett, G. L., Hewitt, P. L., Oliver, J. L., & MacDonald, S. (2002). Perfectionism in children and their parents: A developmental analysis. In G. L. Flett & P. L. Hewitt (Eds.), *Perfectionism: Theory, research and treatment* (pp. 89-132). Washington, DC: American Psychological Association.
- Hewitt, P. L., & Flett, G. L. (1991). Perfectionism in the self and social contexts: Conceptualization, assessment, and association with psychopathology. *Journal of Personality and Social Psychology, 60*, 456-470.
- Hewitt, P. L., & Flett, G. L. (1993). Dimensions of perfectionism, daily stress, and depression: A test of the specific vulnerability hypothesis. *Journal of Abnormal Psychology, 102*, 58-65.
- Hewitt, P. L., & Flett, G. L. (2002). Perfectionism and stress processes in psychopathology. In G. L. Flett & P. L. Hewitt (Eds.), *Perfectionism: Theory, research, and treatment* (255-284). Washington, DC: American Psychological Association.
- Hewitt, P. L., Habke, A. M., Lee-Baggley, D. L., Sherry, S. B., & Flett, G. L. (2008). The impact of perfectionistic self-presentation on the cognitive, affective, and physiological experience of a clinical interview. *Psychiatry, 71*, 93-122.
- John, O. P., Donahue, E., & Kentle, R. (1991). The Big Five Inventory-Versions 4a and 54. Berkeley, CA: Institute of Personality and Social Research.
- Lee, E. (2012). Review of the psychometric evidence of the Perceived Stress Scale. *Asian Nursing Research, 6*, 121-127.
- Muthén, L. and Muthén, B. (1998-2012). *Mplus User's Guide*. Los Angeles, CA: Author.
- Preacher, K., & Leonardelli, G. (2003). *Calculation for the Sobel test*. Retrieved November 30, 2016, <http://quantpsy.org/sobel/sobel.htm>

- Sherry, S. B., Law, A., Hewitt, P. L., Flett, G. L., & Besser, A. (2008). Social support as a mediator of the relationship between perfectionism and depression: A preliminary test of the social disconnection model. *Personality and Individual Differences, 45*, 339-344.
- Smith, M. M., Sherry, S. B., Chen, S., Flett, G. L., & Hewitt, P. L. (2016). Perfectionism and narcissism: A meta-analytic review. *Journal of Personality Research, 64*, 90-101.
- Smith, M. M., Sherry, S. B., Rnic, K., Saklofske, D. H., Enns, M., & Gralnick, T. (2016). Are perfectionism dimensions vulnerability factors for depressive symptoms after controlling for neuroticism? A meta-analysis of 10 longitudinal studies. *European Journal of Personality, 30*, 201-212.
- Sobel, M. E. (1982). Asymptotic confidence intervals for indirect effects in structural equation models. In S. Leinhardt (Ed.), *Sociological methodology* (pp. 290-312). Washington, DC: American Sociological Association.
- Soto, C. J., & John, O. P. (2009). Ten facet scales for the Big Five Inventory: Convergence with NEO PI-R facets, self-peer agreement, and discriminant validity. *Journal of Research in Personality, 43*, 84-90.
- Stoeber, J. (2014). How other-oriented perfectionism differs from self-Oriented and socially prescribed perfectionism. *Journal of Psychopathology and Behavioral Assessment, 36*, 329-338.
- Stoeber, J. (2015). How other-oriented perfectionism differs from self-oriented and socially prescribed perfectionism: Further findings. *Journal of Psychopathology and Behavioral Assessment, 37*, 611-623.
- Stoeber, J. (in press). Comparing two short forms of the Hewitt–Flett Multidimensional Perfectionism Scale. *Assessment*.

Stoeber, J., Corr, P. J., Smith, M. M., & Saklofske, D. H. (in press). Perfectionism and personality. In J. Stoeber (Ed.), *The psychology of perfectionism: Theory, research, applications*. London: Routledge.



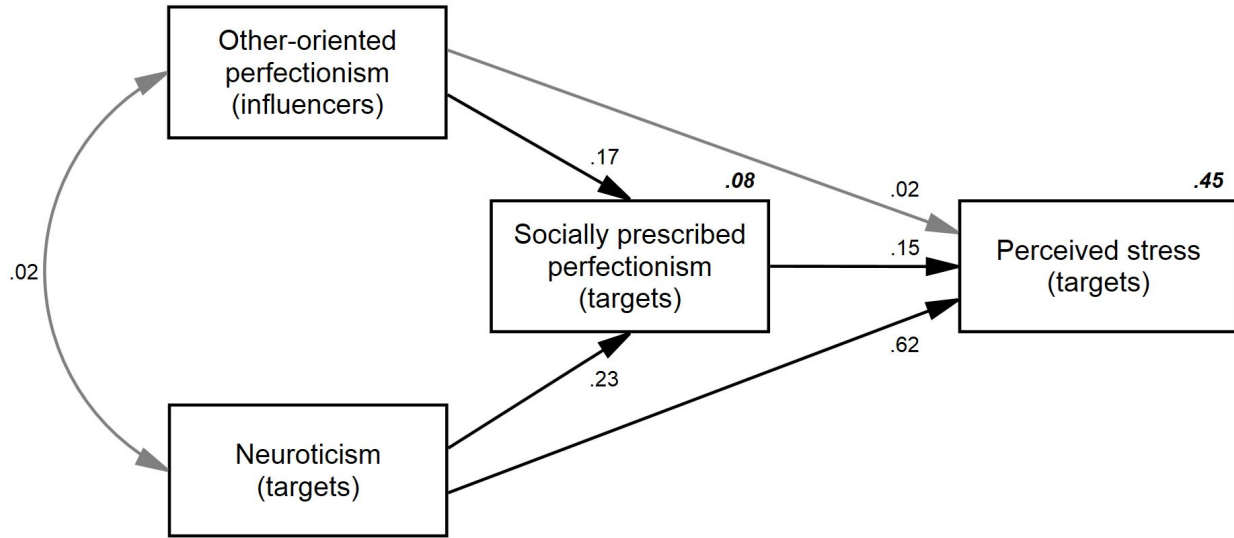
Table 1

*Means, standard deviations, Cronbach's alpha, and bivariate correlations*

Variable	1	2	3	4	5
<b>Influencers</b>					
1. Other-oriented perfectionism	—	.02	.18**	.08	.06
<b>Targets</b>					
2. Neuroticism		—	.23***	.08	.65***
3. Socially prescribed perfectionism			—	.49***	.30***
4. Self-oriented perfectionism				—	.13*
5. Perceived stress					—
<i>M</i>	4.13	2.81	3.90	4.44	1.94
<i>SD</i>	0.68	0.81	1.23	1.50	0.57
Cronbach's alpha ( $\alpha$ )	.77	.83	.79	.89	.81

*Note.* Targets ( $N = 312$ ); influencers ( $N = 1014$ ).

\*  $p \leq .05$ ; \*\*  $p \leq .01$ ; \*\*\*  $p \leq .001$ .



*Figure 1.* Path diagram depicting associations among variables. Rectangles represent observed variables. The double-headed grey arrow represents a nonsignificant correlation ( $p > .001$ ). The single-headed grey arrow represents a nonsignificant direct effect ( $p > .001$ ). Single-headed black arrows represent significant direct effects ( $p < .001$ ). Bolded italicized numbers in the top right hand corner of rectangles represents the amount of variance explained by exogenous variables. All estimates are standardized.