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Perfectionism and the Big Five Factors

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Perfectionism and the Big Five Factors

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Perfectionism was assessed using the Multidimensional Perfectionism Scale, along with a measure of the Big Five factor model, in order to describe perfectionism within the set of constructs provided by the Big Five factor model. Self-oriented perfectionism was strongly associated with conscientiousness, and with the achievement striving subscale in particular. Self-oriented perfectionism was also modestly associated with facets of neuroticism and agreeableness. Other-oriented perfectionism was inversely associated with agreeableness. Socially-prescribed perfectionism was associated only with the depression subscale of the neuroticism factor. Self-oriented perfectionism appeared predominately adaptive, while other-oriented and socially-prescribed perfectionism appeared predominately maladaptive.

Perfectionism has been described and referenced in psychological theory for many decades, beginning with Freud's view of perfectionism as a common symptom of obsessional neurosis where a harsh and punitive superego makes demands for superior achievement and conduct (Freud, 1926/1959). More recently, perfectionism has been described as a multidimensional personality trait with some adaptive and maladaptive qualities. Hamachek (1978) described perfectionism as being "normal" when an individual derives pleasure from striving for excellence yet recognizes and accepts individual limitations, but "neurotic" when an individual has unrealistic expectations and is never satisfied with their performance. Perfectionism may benefit individuals who pursue high standards with conscientiousness, but also may impair individuals who are never satisfied with their accomplishments and are prone to self-criticism and a lack of satisfaction with themselves.

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Recently, Blatt (1995) presented a biographical account of three perfectionistic and talented individuals who committed suicide after some experience of failure. Blatt contended that perfectionistic characteristics played a significant role in both the successful achievements, and the depression and suicide of these individuals. Other researchers have also observed an association between perfectionistic characteristics and depression and suicide (Hewitt & Flett, 1990, 1991a; Hewitt, Flett, & Turnbull-Donovan, 1992). Behaviors and traits associated with perfectionism have implications for clinicians, educators (who may encourage perfectionistic thinking) and researchers.

Two multifactor measures of perfectionism have been introduced to assess perfectionism (Frost, Marten, Lahart & Rosenblatt, 1990; Hewitt & Flett, 1991b). The Multidimensional Perfectionism Scale developed by Frost and colleagues assesses the following aspects of perfectionism: excessive concern over making mistakes, high personal standards, perception of high parental expectations and parental criticism, doubt regarding the quality of one's actions, and a preference for order and organization. The authors of this Multidimensional Perfectionism Scale (Frost et al., 1990) have provided some support for the reliability and validity of subscales using primarily female undergraduates as respondents.

Another attempt to measure the construct of perfectionism, the Multidimensional Perfectionism Scale developed by Hewitt and Flett (1991b), describes perfectionism as a three-dimensional construct composed of self-oriented, other-oriented, and socially prescribed perfectionism. First, self-oriented perfectionism is closest to the construct most often referred to as perfectionism by investigators (Blatt, 1995; Hewitt, Mittelstaedt & Wollett, 1989). Self-oriented perfectionism involves the tendency to set unrealistic standards for oneself and to focus on flaws or failures in performance in conjunction with strong self-scrutiny (Hewitt & Flett, 1991b). Second, other-oriented perfectionism reflects the tendency to have exaggerated expectations of others and to evaluate others critically. Third, socially-prescribed perfectionism reflects the perceived need to attain standards and expectations prescribed by significant others in order to win approval (Hewitt & Flett, 1991b). The Hewitt and Flett (1991b) Multidimensional Perfectionism Scale has good reliability and evidence for validity using diverse clinical and non-clinical samples.

Recent research has attempted to describe traits associated with perfectionism in order to better understand the complex set of behaviors and characteristics associated with perfectionism (Blatt, 1995; Flett, Russo & Hewitt, 1994; Hewitt & Flett, 1991a,b). Research on personality characteristics in general has recently been influenced by the Big Five

model of personality as a higher order factor structure for describing and better understanding personality constructs (Costa & McCrae, 1990, 1992; Watson, Clark, & Harkness, 1994). The Big Five model of personality has been proposed as a universal taxonomy of personality which might provide a basis for establishing convergent and discriminant validity for other personality constructs and behaviors (Watson et al., 1994). No investigation to date has described perfectionism in relation to the Big Five model of personality and explored the implications.

The Big Five model of personality has a long and somewhat contentious history which has been reviewed by Digman (1990), Goldberg (1993) and John (1990). The Big Five factors have been derived from a number of factor analytic investigations involving widely diverse conditions, samples, and different trait terms including both self-report and peer ratings, and other languages and cultures (McCrae & Costa, 1987; Watson et al., 1994). While there have been some differences in the description of the Big Five factors (see Goldberg, 1993; Watson et al., 1994) investigations by Costa and McCrae (1988, 1992a,b; McCrae & Costa, 1987) using their Big Five factor measure, the NEO Personality Inventory-Revised (NEO PI-R; Costa & McCrae, 1992b), have resulted in a well validated measure of the Big Five first order personality traits.

The Big Five factors measured by Costa and McCrae's NEO PI-R (1992) are neuroticism, extraversion, openness to experience, agreeableness and conscientiousness. Each of the five factors of the NEO PI-R is composed of six more specific subscales or facets which can be used to develop a more detailed analysis of an individual's personality profile, or help develop convergent and discriminant associations for validating a personality construct (Costa & McCrae, 1992a,b). The facet scales cover a broad range of characteristics and behaviors. For example, neuroticism consists of six dimensions: anxiety, angry hostility, depression, self-consciousness, impulsiveness and vulnerability. Such a broad range of facets permits an analysis of meaningful differences within the domains of the Big Five factors which may prove useful in the analysis of the different dimensions of perfectionism.

Based on previous literature perfectionism might be expected to be associated with the Big Five factor of neuroticism. One investigation (Flett, Hewitt & Dyck, 1989) using a measure of self-oriented perfectionism, found an association with neuroticism as measured by the Eysenck Personality Inventory (Eysenck & Eysenck, 1968). Socially-prescribed perfectionism, measured by the Multidimensional Perfectionism Scale (Hewitt & Flett, 1991b), was also found to be associated with Eysenck's neuroticism for both student and clinical samples (Hewitt, Flett, & Blankstein, 1991). In an effort to help explain this correlation, socially-

prescribed perfectionism was described to be associated with a fear of negative evaluation, desire for social approval and indices of emotional instability such as depression and anxiety (Hewitt, Flett, & Blankstein, 1991).

In a thorough review of the relationship between perfectionism and depression Bart (1995) described a combination of high socially-prescribed and high self-oriented perfectionism as "neurotic" perfectionism and documented numerous investigations linking these perfectionistic characteristics with a wide range of psychological disturbance and distress. Neurotic perfectionism was further described as the need to avoid failure, an inability to derive satisfaction from even superior performance, deep seated feelings of inferiority, and an insatiable need for approval and acceptance from others resulting in chronic negative affect, distress and increased potential for suicide (Blatt, 1995). This investigation expected to document an association between socially-prescribed and self-oriented perfectionism and the Big Five factor of neuroticism and to describe the specific facets of neuroticism that are associated with perfectionism. We hoped to better understand some the maladaptive features of perfectionism through exploring these associations.

Perfectionism was also expected to be associated with the Big Five factor of conscientiousness. Several of the dimensions of perfectionism described by Frost and colleagues (1990), especially high personal standards and a preference for order and organization, were associated with good work habits and striving for high achievement. A factor analysis of items from both of the Multidimensional Perfectionism Scales described above (Frost, Heimberg, Holt, Mattia, & Neubauer, 1993) resulted in two primary factors: (1) maladaptive evaluative concerns and (2) positive achievement striving. Maladaptive evaluative concerns have been described for perfectionists who procrastinate (Ferrari, 1992) and also as a component of socially-prescribed perfectionism (Hewitt & Flett, 1990, 1991b). The positive achievement striving factor appears to capture an adaptive aspect of perfectionism that involves painstaking effort, high personal standards, a need to excel and good organization among other qualities. These characteristics appear similar to the Big Five factor of conscientiousness which includes the following facets: competence, order, dutifulness, achievement striving, self-discipline and deliberation. This investigation was designed to more specifically characterize the associations between the facets of conscientiousness and the dimensions of perfectionism to more accurately describe some of the adaptive dimensions of perfectionism.

When considering the Big Five factor of extraversion only minimal association with perfectionism was anticipated. Extraversion involves

warmth, gregariousness, assertiveness, high activity, excitement-seeking and a propensity for positive emotions (Costa & McCrae, 1992b). Self-oriented and other-oriented perfectionism have been associated with dominance for men and women which overlaps with the assertiveness facet. Self-oriented perfectionism was also associated with warmth in women (Hill, Zull, & Turlington, in press). Other than these relationships between perfectionism and two extraversion facets, past research suggests little association with extraversion characteristics.

The Big Five factor of openness was not anticipated to be associated with perfectionism. This factor is defined by openness to the following facets: fantasy, aesthetics, feelings, actions, ideas, and values. Individuals high in perfectionism might be expected to be less open to new ideas, actions and values as they fear failure and thus might prefer the tried and true familiar experiences to novel experiences and the uncertainty involved. However, past research provides no empirical basis for anticipating associations between openness and the dimensions of perfectionism.

The Big Five factor of agreeableness is an interpersonal dimension involving the facets of trust, straightforwardness, altruism, compliance, modesty and tender-mindedness. Individuals high in other-oriented perfectionism might be expected to score low in agreeableness as they provide demanding and unrealistic expectations of others. Socially-prescribed and other-oriented perfectionism have also been associated with diverse interpersonal problems (Hill et al., in press) which also suggests low agreeableness scores.

This investigation was designed to explore the relationship between perfectionism and the Big Five factor model of personality in order to further define the nature of perfectionism and establish perfectionism within the well validated set of constructs provided by the facet scales of the Big Five model. Dimensions of perfectionism were clearly expected to be associated with the Big Five factors of neuroticism and conscientiousness, and perhaps with some facets of openness and agreeableness. By further documenting the adaptive and maladaptive characteristics associated with perfectionism we hoped to better inform researchers and clinicians regarding the ramifications of perfectionistic personality traits.

METHOD

Participants

The sample consisted of 214 undergraduates (64 males, 150 females) who averaged 19 years in age ($SD = 1.6$) and received course credit for their participation. Subjects had a mean education level of 13.6 years (SD

= .85). Each respondent completed a voluntary consent form and the two measures described below in groups of 20–30.

Measures

The Multidimensional Perfectionism Scale. The MPS is a 45-item self-report measure of perfectionistic tendencies with a 7-point Likert scale measuring three dimensions of perfectionism: (a) self-oriented perfectionism (e.g., "I strive to be as perfect as I can be. I demand nothing less than perfection of myself"); (b) other-oriented perfectionism (e.g., "I have high expectations of the people who are important to me. I can't be bothered with people who won't strive to better themselves"); (c) socially-prescribed perfectionism (e.g., "People expect nothing less than perfection from me. I find it difficult to meet others' expectations of me").

In a series of five studies, Hewitt and Flett (1991b) provided evidence for the reliability and validity of the three MPS subscales. The inter-item consistencies for the three scales were reflected in alpha coefficients of .86 (self-oriented), .82 (other-oriented), and .87 (socially prescribed). In addition, factor analyses on data from large student and psychiatric samples provide support for three dimensions of perfectionism. The three MPS subscales are not significantly influenced by response biases (Hewitt & Flett, 1991b).

NEO Personality Inventory-Revised (Form S). The NEO PI-R is a 240 item self-report scale which measures the following personality domains comprising the Big Five model of personality: Neuroticism, Extraversion, Openness, Agreeableness, and Conscientiousness. The NEO PI-R also measures six facet or subscale traits that comprise each of the five domains. Subjects respond to each item by rating their degree of agreement with items on a five-point Likert scale.

The internal consistency of the NEO PI-R domain scales is evidenced by alpha coefficients ranging from .86 (Agreeableness) to .92 (Neuroticism; Costa & McCrae, 1992b). Stability coefficients of the domain scores over a six-year interval ranged from .68 to .83 (Costa & McCrae, 1988). Numerous investigations have contributed evidence to support the validity of the NEO PI-R including the factor structure, convergent and discriminant validity and construct validity (Costa & McCrae, 1992b).

RESULTS

The purpose of these analyses was to document the associations between the three dimensions of perfectionism described by the MPS and the Big Five factor model of personality. The means and standard deviations of the MPS and NEO PI-R factors are reported in Table 1 and are

TABLE 1
Means and Standard Deviations on the Perfectionism and Big Five Scales (N = 214)

Subscale	Mean	SD
Self Oriented	67.92	15.87
Other Oriented	58.19	10.68
Socially Prescribed	54.56	12.33
Neuroticism	98.01	19.94
Extraversion	118.45	18.98
Openness	116.80	20.07
Agreeableness	117.13	17.10
Conscientiousness	111.92	21.54

consistent with other student samples reported with these data (Costa & McCrae, 1992b; Hewitt & Flett, 1991b). Coefficient alphas for the three MPS scales for this sample were: self-oriented (.91), other-oriented (.75), and socially-prescribed (.83). Zero-order correlation coefficients between the MPS and both the NEO PI-R factors and facet scales are reported in Table 2. Self-oriented perfectionism was strongly associated with conscientiousness, other-oriented perfectionism was inversely associated with agreeableness, and socially prescribed perfectionism was positively associated with neuroticism.

In order to more clearly assess the associations among these data, multiple regression analyses were conducted in three stages. First, a multivariate multiple regression analysis was performed to learn if any of the Big Five factors were significantly associated with the three perfectionism scales. Second, for those factors for which the multivariate test was statistically significant, univariate tests were performed to assess the variance between the three perfectionism scales and the Big Five factors. Third, for the statistically significant univariate tests, additional regression analyses were performed to identify which Big Five facet scales were accounting for the variance in relation to the perfectionism scales. No assumptions regarding causal relationships appeared warranted.

Multivariate Test

A multivariate regression analysis was performed simultaneously regressing the dependent variables, self-oriented, other-oriented, and socially prescribed perfectionism, on the following predictor variables: gender, neuroticism, extraversion, openness, agreeableness and conscientiousness. The multivariate tests for neuroticism ($F(3, 205) = 6.19$),

TABLE 2 Correlations Between MPS Scales and NEO PI-R Subscales (N = 214)

	Perfectionism Scales		
	Self	Other	Social
NEO PI-R Scale			
Neuroticism			
N1 Anxiety	.07	.09	.28***
N2 Angry-Hostility	.14*	.06	-.20**
N3 Depression	.14*	.24***	.21**
N4 Self-Consciousness	.04	.05	-.31***
N5 Impulsiveness	.10	-.01	.22**
N6 Vulnerability	-.07	-.06	.14*
Extraversion			
E1 Warmth	.01	-.05	-.15*
E2 Gregariousness	-.11	-.13*	-.20**
E3 Assertiveness	-.14*	-.11	-.15*
E4 Activity	.24***	.20**	-.01
E5 Excitement Seeking	.30***	.16*	.12
E6 Positive Emotions	-.05	-.05	-.06
Openness			
O1 Fantasy	-.13	-.03	-.10
O2 Aesthetics	.01	.05	-.06
O3 Feelings	.00	.05	.03
O4 Actions	-.23**	-.11	-.07
O5 Ideas	.04	.04	.01
O6 Values	-.23***	-.18*	-.26***
Agreeableness			
A1 Trust	-.12	-.31***	-.17*
A2 Straight-Forwardness	-.13	-.19**	-.23**
A3 Altruism	-.09	-.23**	-.15*
A4 Compliance	.05	-.20**	-.10
A5 Modesty	-.09	-.32***	-.15*
A6 Tender-Mindedness	-.11	-.22**	-.06
Conscientiousness			
C1 Competence	-.09	-.05	.06
C2 Order	.59***	.16*	.01
C3 Dutifulness	.38***	.19**	-.10
C4 Achievement-Striving	.36***	.03	-.01
C5 Self-Discipline	.50***	.14*	.04
C6 Deliberation	.65***	.27***	.14*
	.47***	.08	-.04
	.28***	.03	-.03

Note: Abbreviations: Self, Self-Oriented Perfectionism; Other, Other-oriented Perfectionism; Social, Socially-prescribed perfectionism.
*p < .05; **p < .01; ***p < .001.

TABLE 3 Summary of Regression Analyses for Big Five Scales Predicting Perfectionism (N = 214)

Dep. Variable	Predictor	B	B	SE	Total R ²
Self-Oriented	Neuroticism	.15*	.19	.05	.40
	Agreeableness	-.16*	-.18	.05	
Other-Oriented	Conscientiousness	.47*	.63	.04	.13
	Agreeableness	-.18*	-.31	.04	
Socially-Prescribed	Conscientiousness	.11*	.22	.03	.08
	Neuroticism	.18*	.29	.04	

Note: Abbreviations: B, partial regression coefficient; B, partial standardized regression coefficient.
*p < .01

agreeableness (F(3, 205) = 6.72) and conscientiousness (F(3, 205) = 53.57) were statistically significant, p < .001 in each case. The multivariate tests for gender, extraversion, and openness were not statistically significant, p > .20 in each case. No further analyses were performed with the nonsignificant factors.

Univariate Tests

Univariate analyses regressing each of the perfectionism scales individually on the Big Five factors indicated that neuroticism was a significant predictor of self-oriented and socially prescribed perfectionism, F(1, 207) > 10.56, p < .001 in both cases, but was not significantly associated with other-oriented perfectionism, F(1, 207) = 3.07, p = .08. Agreeableness was a significant predictor of self-oriented and other-oriented perfectionism, F(1, 207) > 9.35, p < .003 in both cases, but was not significantly associated with socially prescribed perfectionism, F(1, 207) = 2.99, p = .09. Conscientiousness was also a significant predictor of self-oriented and other-oriented perfectionism, F(1, 207) > 10.96, p < .001 in both cases. Conscientiousness was not significantly associated with socially prescribed perfectionism, F(1, 207) = .56, p = .45. The univariate regression analyses are summarized in Table 3.

Facet Scale Analyses

For the three Big five factors that were found to be significantly associated with perfectionism scales, we examined the extent to which

the relevant Big Five facets (subscales) were contributing variance.

Taken together, the six facet scales that make up the Big Five neuroticism factor accounted for 8% of the self-oriented perfectionism variance ($F(6, 207) = 2.29, p = .009$), and the angry hostility and vulnerability facet scales were the only significant predictors, $t > 1.9, p < .05$ in both cases (standardized regression coefficients = .14 and -.17, respectively). The six neuroticism facet scales accounted for 12% of the socially prescribed perfectionism variance ($F(6, 207) = 4.55, p < .001$) with the depression facet scale being the only significant predictor ($t = 3.0, p = .00$, standardized regression coefficient = .22).

The six facet scales that make up the Big Five agreeableness factor accounted for 6% of the self-oriented perfectionism variance, $F(6, 207) = 2.11, p = .054$. Because of the small amount of variance accounted for, no further analysis of facet scale contributions was conducted. The six agreeableness facet scales accounted for 13% of the other-oriented perfectionism variance, $F(6, 207) = 5.28, p < .001$, with the compliance and modesty facet scales being the significant inverse predictors ($t > 2.01, p < .05$ in both cases, standardized regression coefficients = -.25 and -.15 respectively).

Taken together, the six facet scales making up the Big five conscientiousness factor accounted for 46% of the self-oriented perfectionism variance, $F(6, 207) = 28.91, p < .001$. The dutifulness and achievement striving facet scales were the significant predictors, $t > 3.11, p < .001$ in both cases (standardized regression coefficients = .21 and .53, respectively). The six conscientiousness facet scales accounted for 11% of the other-oriented perfectionism variance with the achievement striving facet scale being the only significant predictor ($t = 3.9, p = .00$, standardized regression coefficient = .35).

DISCUSSION

The results of this investigation described the dimensions of perfectionism associated with different aspects of the Big Five factor model. Analyses involving the Big Five factor facet scales proved helpful in further specifying the nature of the different dimensions of perfectionism with respect to the Big Five factor model.

Self-oriented perfectionism was strongly associated with conscientiousness. Achievement striving and dutifulness were two elements of conscientiousness which contributed most to self-oriented perfectionism. Individuals high in achievement striving aspire to high levels of performance, are purposeful, determined, planful, and work hard. They are described as diligent, and particularly intent on realizing their goals (Costa & McCrae, 1992b). They are also at risk for investing so much in

their careers or projects that they lack the flexibility to relax and set aside their work. Individuals high in dutifulness report being scrupulous in fulfilling their commitments and abiding by their ethical principles. They reflect a well developed conscience with strong moral standards (Costa & McCrae, 1992b). These conscientiousness personality characteristics captured by the achievement striving and dutifulness subscales help document some of the adaptive features of self-oriented perfectionism. Previous investigations have reported self-oriented perfectionism related to constructive striving and resourcefulness (Flett, Hewitt, Blankstein, & Mosher, 1991), high self-standards (Hewitt & Flett, 1991b), and high levels of positive behavioral coping, including an action orientation and conscientiousness (Flett, Russo, & Hewitt, 1994) which are consistent with the adaptive facets of conscientiousness.

Self-oriented perfectionism was more modestly associated with the Big Five factor of neuroticism and in particular the facet scales of angry hostility and inversely with vulnerability. Individuals are reportedly more likely to express their anger or frustration if they are low in agreeableness (Costa & McCrae, 1992b). However, a modest association was observed between self-oriented perfectionism and agreeableness suggesting characteristics such as thoughtfulness, courtesy, empathy and a willingness to help others, which may moderate the self-oriented perfectionist's likelihood of expressing anger. The inverse association between self-oriented perfectionism and the neuroticism facet scale of vulnerability indicates confidence in coping with stress and handling difficult situations, which again reflects a more adaptive aspect of self-oriented perfectionism.

Previous research has described an association between self-oriented perfectionism and neuroticism measured by the Eysenck Personality Questionnaire for female but not male subjects (Hewitt, Flett, & Blankstein, 1991). While other research has also reflected some gender differences in the manifestation of perfectionism (Hewitt & Flett, 1991a,b; Hewitt, Flett, Turnbull-Donovan, & Mikail, 1991; Hill et al., in press), gender did not account for any significant variance in the relationship between the dimensions of perfectionism and the Big Five factors. The analysis of the relevant Big Five neuroticism facet scales indicates that self-oriented perfectionists appear to endorse not the anxious, inferior, depressed discomfort that most typically characterizes neuroticism, but instead a readiness to experience anger or frustration along with some confidence in coping with stress and difficulty.

Other-oriented perfectionism was negatively associated with agreeableness, with the compliance and modesty facet scales best defining this inverse relationship. Low compliance scores indicate a tendency to compete rather than cooperate, to assert one's position when in conflict, and to

express anger when necessary. Low modesty scores suggest the opposite of humbleness and self-effacement, with self-confident, self-centered, even narcissistic attitudes contributing to these scores (Costa & McCrae, 1992b). Other-oriented perfectionism has previously been reported to be associated with other-blame and several dimensions of narcissism (Hewitt & Flett, 1991b; Hewitt et al., 1992). The Big Five agreeableness facets associated with other-oriented perfectionism suggest a liability for interpersonal conflict which is consistent with another recent investigation that described a relationship between dominant, arrogant and vindictive interpersonal problems associated with other-oriented perfectionism (Hill et al., in press).

The Big Five factor of conscientiousness was also modestly associated with other-oriented perfectionism. Achievement striving was the only facet scale accounting for any significant variance in this relationship. This tendency to diligently pursue goals with hard work and persistence was much less strongly associated with other-oriented perfectionism than with self-oriented perfectionism, consistent with a previous finding that high self-standards were much more strongly associated with self-oriented than other-oriented perfectionism (Hewitt & Flett, 1991b). Thus, other-oriented perfectionism may have stronger maladaptive than adaptive consequences characterized by interpersonal self-centeredness and dominance, along with an achievement orientation and a tendency to critically scrutinize the performance of others.

The only Big Five factor associated with socially-prescribed perfectionism was a modest relationship with neuroticism, and with the depression facet scale in particular. The depression facet scale reflects a tendency toward guilt, sadness, hopelessness, discouragement, and loneliness. Costa and McCrae (1992b) also report that anxiety and dependence have been associated with the depression facet scale. Depression was associated somewhat with self-oriented perfectionism and strongly with socially-prescribed perfectionism in a sample of depressed subjects (Hewitt & Flett, 1991a), and socially-prescribed perfectionism was found to be predictive of suicide potential (Hewitt et al., 1992). Socially-prescribed perfectionism has also been related to diverse emotional maladjustment including anxiety (Hewitt & Flett, 1991a,b), symptoms of several personality disorders (Hewitt & Flett, 1991b; Hewitt et al., 1992), diverse interpersonal problems (Hill et al., in press), diverse somatic complaints, self-criticism, fear of negative evaluation, anger and other negative clinical symptoms (Hewitt & Flett, 1991b). Socially-prescribed perfectionism lacks an association with any of the more adaptive aspects of the Big Five model, and appears instead to involve a constant need for approval from others, a predisposition to find oneself lacking in accom-

plishment and a consequent vulnerability to depression.

In summary, this investigation has enabled perfectionism to be characterized from the vantage of the Big Five model. Self-oriented perfectionism was strongly associated with conscientiousness, and with achievement striving in particular. Self-oriented perfectionism was also modestly associated with the angry hostility facet and inversely with the vulnerability facet of neuroticism, which when combined with a modest association with the agreeableness factor suggests a relatively controlled experience of anger along with resilience, and adaptive, altruistic social attitudes. Other-oriented perfectionism was inversely associated with agreeableness, with a lack of compliance and lack of modesty characterizing this less socially adaptive dimension of perfectionism. Other-oriented perfectionism was also associated with the achievement striving facet of conscientiousness. Socially-prescribed perfectionism was associated only with the depression facet of the neuroticism factor, consistent with previous findings that describe this dimension of perfectionism as maladaptive.

The implications of these findings for practitioners suggest that self-oriented perfectionism is predominately adaptive with perhaps some exception for individuals with overly rigid standards. However, individuals with high levels of other-oriented perfectionism may have difficulties with intimacy and maintaining successful social relationships with others. Individuals high in socially-prescribed perfectionism may struggle with depression, particularly if they experience a lack of approval or validation from others.

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