EFFECT OF PERFECTIONISM ON MENTAL HEALTH OF UNIVERSITY STUDENTS

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Abstract

The current research is designed to assess the impact of perfectionism on the mental health of University students. A sample of 110 students was drawn from different University students of India with the age range of 17-30years. . Among the sample, divisions pertaining to the educational qualification were as follows: 57.7% of the students were of Bachelors level and 42.3% of the students were of Masters level. The Frost Multidimensional perfectionism Scale– Short form FMPS by Frost, R. O., & Marten, P. A. (1990) and Depression Anxiety Stress Scale-21 (DASS-21) a shorter version of DASS-42 by Lovibond, S.H.; Lovibond, P.F. (1995). were employed in this study as instruments to collect psychometric data. The statistical analysis of data involved: Mean, Standard Deviation, Frequency distribution, t-test and correlation analysis. The findings showed that there is no significant difference in the level of mental health and Perfectionism among male and female University students. It also showed that there is a positive correlation between mental health and Perfectionism of University students.

Keywords: Perfectionism, Mental Health, Depression, Anxiety, Stress.

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Introduction

The pursuit of perfection, or an unyielding drive to attain flawlessness and exceptionalism, has been recognized as a considerable risk factor for psychological issues, particularly among college students. While the quest for excellence is often viewed positively, excessive perfectionism can lead to emotional distress and anxiety. This paper investigates the influence of perfectionism on university students' mental health and examines the possible pathways through which it impacts their well-being. Numerous research studies have connected perfectionism to various mental health concerns, such as anxiety, depression, eating disorders, and substance abuse (Flett et al., 2018; Hewitt & Flett, 2017; Stoeber & Damian, 2014).

One way that perfectionism affects mental health is by its connection to self-criticism and negative self-assessment (Egan & Hennessey, 2021; Hewitt & Flett, 2017). Perfectionists often establish unattainable goals and standards, which, when not met, can result in self-criticism and negative self-perception. These critical thoughts can trigger feelings of guilt, shame, and worthlessness, contributing to anxiety and depression symptoms (Egan & Hennessey, 2021). Furthermore, perfectionists are prone to excessive self-criticism and may blame themselves for even the smallest errors, intensifying their negative emotions (Hewitt & Flett, 2017).

Another pathway through which perfectionism influences mental health is its association with academic and social stressors (Flett et al., 2018; Stoeber & Damian, 2014). College students face considerable expectations from parents, peers, and themselves to excel both academically and socially. Perfectionists, in particular, may experience increased pressure to succeed, resulting in chronic stress and exhaustion (Flett et al., 2018). They may also feel isolated and disconnected, as they may avoid situations where they believe the risk of failure is high (Stoeber & Damian, 2014). Moreover, perfectionism can hinder the formation of adaptive coping mechanisms, amplifying its negative impact on mental health (Stoeber & Damian, 2014). Perfectionists often resort to avoidance tactics, such as procrastination and withdrawal, to cope with stress and perceived failure. Although these strategies may offer temporary relief, they can lead to long-term issues, including diminished motivation and self-worth (Stoeber & Damian, 2014).

In summary, perfectionism poses a significant risk to mental health, particularly for university students. It is linked to numerous negative outcomes, including anxiety, depression, eating disorders, and substance abuse. Perfectionism affects mental health through its connections to self-criticism, negative self-evaluation, academic and social pressures, and the development of maladaptive coping strategies. These mechanisms can create a cycle of stress and negative emotions, contributing to the onset and persistence of mental health problems. Consequently, it is essential to recognize and address perfectionism in university students early on to mitigate its detrimental effects on mental health.

METHODS

Objectives

1. To assess the difference on the level of mental health among male and female University students.
2. To examine the difference on the level of Perfectionism of University students with respect to gender.
3. To observe the relationship between perfectionism and mental health among University students.

Hypothesis of the study

1. There will be significant difference among male and female University students on mental health .
2. There will be significant difference among male and female University students on perfectionism.
3. There will be positive correlation between mental health and Perfectionism of University students .

Sample

Random sampling technique was used to yield a sample of 110 university students (55 males and 55 females) with age ranging from 17-30 years from several Universities across the country.

Inclusion criteria of sample:
- Male and Female students
- Between the age group of 17-30 years
- University students

Exclusion criteria of sample:
- School students, dropouts and passed out people
- Students below the age 17 and above the age of 30 years
- Mentally and physically unfit people were kept out of the study
- People who were unwilling to take part in the study were also not included.

Variables

Variables of the study are perfectionism, mental health, age, gender and educational qualification.

Tools used:
1. DASS-21
This stands for the Depression Anxiety Stress Scale-21, which is a widely used questionnaire designed to measure the levels of depression, anxiety, and stress in individuals. It was developed by researchers in Australia and is a shortened version of the original DASS questionnaire, which had 42 items. The DASS-21 is a reliable and valid measure of depression, anxiety, and stress, and has been used extensively in research and clinical settings.

2. FMPS – Measure Perfectionism Levels
The Frost Multidimensional Perfectionism Scale (FMPS) is a questionnaire designed to measure different dimensions of perfectionism. It was developed by Dr. Randy Frost and colleagues and has been widely used in research and clinical settings. The FMPS consists of 35 items that are grouped into six subscales: Concern over mistakes and doubts about actions, excessive concern with parents' expectations and evaluations, Excessively high personal standards, concern over order, precision and organisation.

Procedure
The procedure involved approaching university students directly, through calls and other social media apps. Then briefing them over what the study was about and once consent to collect data was verbally affirmed by them they were presented with the Google forms along with relevant instructions pertaining to each form. The students were assured of the confidentiality of the data being collected through these psychometric tools. The participants were acknowledged for sparing their precious time and being a part of the study. The data was analysed using descriptive, inferential, correlational and regression analysis.

Statistical Analysis:
Statistical analysis involved mean, standard deviations, frequency distribution, T-test and Correlation Analysis through SPSS-22 software.

Results
The present study assesses the Impact of Perfectionism on mental health of University students and analysis was carried out. All the participants were from universities out of whom 45 were men (40.9%) and 55 were women (59.1%). All of them were University students between the Age Range of 17-30 years. In terms of Education 53 of them were in their Under Graduate Course and 57 in post Graduation and above. From the research we found that there is no significant difference at 0.05 level or 0.10 in the level of Perfectionism and mental health among Male and Female University students. The findings also suggested that there was positive correlation between level of mental health and Perfectionism among university students. The study's findings are thoroughly addressed in this section.

Table 1: Frequency distribution on the basis of Gender

	Frequency	Percent	Valid percent	Cumulative percent
Male	45	40.9	40.9	40.9
Female	65	59.1	59.1	100.0
Total	110	100.0	100.0	

Table 1 displays the frequency distribution and percentage of the participants based on the demographic characteristics gender. The table shows that there were 45 and 55 men and women respectively who took part in the test. And their representation in percentage was 40.9 and 59.1 respectively. When the total sample was 110.

Table 2: Frequency Distribution on the basis of Education

	Frequency	Percent	Cumulative percent
Below graduate	53	48.2	48.2
Above graduate	57	51.8	100.0
Total	110	100.0	

Table 2 displays the frequency distribution and percentage of the participants based on the demographic characteristic: Education. The table shows that there were a total of 53(48.2%) students who were in the under Graduate degree and 57(51.8%) who are in their post graduation and above . The total number of students was 110.

Table 3. Table 3 shows the severity levels of Depression, Anxiety and Stress.

	Normal	Mild	Moderate	Very high	Total
Depression	83(75.5%)	16(14.5%)	10(9.1%)	1(0.9%)	110(100.0%)
Anxiety	64(58.2%)	10(9.1%)	29(26.4%)	7(6.4%)	110(100.0%)
Stress	57(51.8%)	13(28.2%)	31(28.2%)	9(8.2%)	110(100.0%)

Among all 110 students the percentage of different levels of severity were as follows: normal(75.5%), mild (14.5%) ,moderate(9.1%) and very high (0.9%) , normal(58.2%), mild(9.1%), moderate (26.4%) and very high(6.4%) and normal (51.8%), mild(28.2%), moderate(28.2%) and very high(8.2%) for depression, anxiety and stress respectively.

Table 4 Tabular representation of Mean differences, standard deviation and T-Value On DASS-21 and FMPS(N=110) on the basis of gender.

	Gender	N	Mean	Standard Deviation	T- Value	P- Value
DASS Total	Male	45	21.31	14.177	-0.434	0.665
	Female	65	22.40	12.018		
Concern over mistakes	Male	45	33.51	7.512	0.512	0.610
	Female	65	32.82	6.642		
Excessive concern with parents' expectations and standards	Male	45	25.87	6.741	-0.144	0.886
	Female	65	26.03	5.235		
Excessively high personal standards	Male	45	24.98	3.911	0.749	0.455
	Female	65	24.38	4.197		
Concern with precision, order and organisation	Male	45	24.27	3.165	1.562	0.121
	Female	65	23.20	3.747		
Total FMPS	Male	45	111.51	15.707	0.780	0.437
	Female	65	109.22	14.799		

The table shows that on the basis of gender there was no significant difference in DASS Total score with mean 21.31 and 22.40, standard deviations 14.177 and 12.018 for male and female respectively and a T-score of -0.434. The table also showed that there is no significant difference in the dimensions of Perfectionism namely, Concern over mistakes and doubts about actions, excessive concern with parents' expectations and standards , excessively high personal standards and Concern with precision, order and organisation and finally the Total Perfectionism as well. Their respective mean and standard deviation for males and females are as follows:
Mean-33.51 and 32.82, 25.87 and 26.03, 24.98 and 24.38,24.27 and 23.20 and 111.51 and 109.22.
Standard deviations-7.512 and 6.642, 6.741 and 5.235,3.911 and 4.197, 3.165 and 3.747 and 15.707 and 14.799.
The respective T-values came out to be:0.512,-0.144,0.749,1.562 and 0.780.

Table 5 Tabular representation of Mean differences, standard deviation and T-Value On DASS-21 and FMPS(N=110) on the basis of education.

	Education	N	Mean	Std. Deviation	T Value	P value
Excessively High Personal standard	Under Graduation	53	25.45	3.886	2.080**	0.050
	Post Graduation	57	23.86	4.129		
Concern with precision, order and organisation	Under Graduation	53	23.68	3.257	0.122	0.903
	Post Graduation	57	23.60	3.821		
Total FMPS	Under Graduation	53	112.96	15.527	1.897	0.061
	Post Graduation	57	107.54	14.436		
DASS Total	Under Graduation	53	23.49	14.577	1.207	0.230
	Post Graduation	57	20.53	11.042		

**p<0.05

The table shows that on the basis of education there was no significant difference in DASS Total score

and in the dimensions of Perfectionism namely, Concern with precision, order and organisation except forone dimension i.e. excessively high personal standards with significant difference at 0.05 level and mean -25.45 and 23.86 and standard deviation-3.886 and 4.129 for under graduates and post graduates and above respectively. It's T-Value came out to be 2.080. The respective mean and standard deviation for under graduates and post graduates and above of the remaining data are as follows:

Mean-23.45 and 23.86,23.68 and 23.60, 112.96 and 107.54 and 23.49 and 20.53.

Standard deviations- 3.886 and 4.129, 3.257 and 3.821, 15.527 and 14.436 and 14.577 and 11.042.

Their respective T-values came out to be 0.122,1.897 and 1.207.

Table 6 shows the relationship of Perfectionism (FMPS) and Mental Health (DASS-21)) . The study revealed the following:

		Dass total	FMPS total
Total FMPS	Pearson Correlation Sig (2- Tailed) N	1 110	432* 000 110
Total DASS	Pearson Correlation Sig (2- Tailed) N	432* 000 110	1 110

The table showed that the Pearson Correlation for DASS Total and PERFECTIONISM came to be 432 which shows that there is positive correlation between Perfectionism and Mental health.

Discussion:

The aforementioned summarization and interpretation of the results shed light on multiple facets of the current investigation, which primarily examined the influence of Perfectionism on university students' mental health. The outcome affirmed that Perfectionism significantly correlated with Mental Health (refer to Table 6), thereby supporting the third hypothesis of the study. Hill et al.'s (2015) meta-analytic review, "Perfectionism and Psychological Adjustment," which analyzed 95 studies, corroborates this concept. The authors found that specific elements of perfectionism, such as high personal expectations and organization, corresponded with improved mental health outcomes, including heightened life satisfaction, self-esteem, and academic accomplishment. This aligns with the positive correlation between mental health and Perfectionism. Another noteworthy reference is "Positive aspects of perfectionism and mental health: a review of the literature" by Hill, AP, and Curran, T.

The study also highlighted that there is no significant disparity in mental health levels between male and female university students at either the 0.05 or 0.01 level. This contradicts the first hypothesis, which suggested a notable difference. The study, "Gender Differences in Mental Health: Results from a Large Population-Based Study in Brazil" by Mariana V. Fonseca et al. (2016), supports this finding. The study, involving 3,949 university students in Brazil, found no significant differences in mental health scores between male and female participants, suggesting that gender does not significantly impact university students' mental health. Similarly, our study showed no notable difference in Perfectionism levels between male and female

university students, contradicting the second hypothesis. This is supported by "Gender Differences in Perfectionism: A Meta-Analytic Review" by Stoeber and Otto (2006), which found no significant gender differences in overall perfectionism or its dimensions.

Conclusion:

In summation, Perfectionism, characterized by setting lofty goals and constantly striving for excellence, can have both positive and negative implications. Despite its advantageous nature, it can also detrimentally affect mental health, particularly in students. Research indicates that students with perfectionistic tendencies are more prone to experience symptoms of anxiety, depression, and other mental health disorders. The incessant pressure to fulfill unattainable standards can instigate ongoing stress and self-doubt, leading to feelings of inadequacy and low self-esteem. Perfectionism can also precipitate negative coping strategies, such as procrastination, avoidance, and substance abuse, which can further aggravate mental health issues. It is crucial for students to acknowledge the adverse effects of perfectionism on their mental health and to seek assistance from mental health professionals or other resources as needed. Fostering realistic expectations, embracing self-compassion, and adopting healthy coping strategies can aid students in mitigating the detrimental effects of perfectionism, thereby enhancing their overall well-being.

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