Understanding the Link between Perfectionism and Adjustment in College Students:

Examining the Role of Maximizing

by

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#### Abstract

The present study examined the relations between perfectionism, maximizing, and psychosocial adjustment in a sample of 331 college students. Frost, Lahart, and Rosenblate (1990) defined perfectionism as the setting of excessively high standards for performance accompanied by overly critical self-evaluations. In defining the maximizing construct, Schwartz et al. (2002) drew from Simon's (1955) conceptualization of maximizing as seeking only the best option and not settling for anything less. Consistent with past research, both perfectionism and maximizing were found to be associated with adjustment (viz., life satisfaction, emotional exhaustion, depersonalization, & low personal accomplishment). Moreover, results of regression analyses indicated that even after controlling for maximizing, perfectionism continued to account for a significant amount of additional unique variance in each adjustment measure. Thus, perfection is more important than maximizing in predicting adjustment. Implications of the present findings for future research are discussed.

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Many leading dictionaries have offered varying definitions of perfectionism. One way perfectionism has been defined is as an individual's tendency to regard anything short of perfection as unacceptable, with perfection defined as flawlessness or an unsurpassable degree of accuracy or excellence (Merriam-Webster, 2011). Another way perfectionism has been defined is in terms of religion. Christian perfectionism, a view held by John Wesley, is a Christian doctrine, which holds that the heart of the born-again Christian may attain a high degree of virtue and holiness and become entirely sanctified with the help of the divine grace of Jesus. Christian perfectionism, also called Weslevan perfectionism, is known as perfect love and heart purity (Theopedia, An Encyclopedia of Biblical Christianity, 2011). Further, in medical terms, perfectionism has been defined as a tendency to set rigid high standards of personal performance (American Heritage Medical Dictionary, 2011). It can also be defined as a subjective state in which a person pursues an extremely high standard of performance and, in many cases, demands the same standards of others. Failure to attain the goals may lead to feelings of defeat and other adverse psychological consequences (Mosby's Medical Dictionary, 2010). Yet, another way perfectionism has been defined is in the field of philosophy. In philosophical terms, perfectionism is the persistence of will in obtaining the optimal quality of spiritual, mental, physical, and material being, or practicing the perseverance in obtaining the best possible life or state of living (Stanford Encyclopedia of Philosophy, 2011). Perfectionism has been defined in many ways in our society and in many different aspects of our lives. Despite these differences across different literary sources, one common feature in which perfectionism has been defined is

the focus on achieving high levels of performance or standards. As we'll see, this aspect of perfectionism is also the cornerstone of ways in which psychologists have defined perfectionism.

## Psychological approaches to studying perfectionism

Over the past few decades, researchers in the field of psychology have investigated and found many new findings related to the study of perfectionism. Specifically, a growing number of studies have pointed to the role of perfectionism as an important explanatory construct linked to poor adjustment (Chang, Watkins, & Banks, 2004; Rice, Vergara, & Aldea, 2006; Shafran & Mansell, 2001). Over the past 25 years, research on perfectionism has moved from a unidimensional maladaptive view of perfectionism, to a multidimensional and multifunctional view of perfectionism.

Hollender (1965) was one of the first researchers to define perfectionism in psychology. He defined perfectionism as "the practice of demanding oneself or others a higher quality of performance than is required by the situation" to refer to the manner in which a person performs or aspires to perform. More than a decade later, Burns (1980) defined perfectionism as a network of cognitions that included expectations, interpretations of events, and evaluations of oneself and others. Perfectionists were defined as "people who strain compulsively and unremittingly towards impossible goals and who measure their own worth entirely in terms of productivity and accomplishment" (Burns, 1980, p. 34).

Since these earlier works, two models of perfectionism have become increasingly popular in the extant literature. One popular model of perfectionism by Frost, Marten, Lahart, and Rosenblate (1990) has defined perfection as the setting of excessively high standards for performance accompanied by overly critical self-evaluations, and by six major dimensions. The first major dimension is concern over mistakes (e.g., "I should be upset if I make a mistake").

This has been the key feature distinguishing perfectionists from those who simply set high standards for themselves, because those who set high standards alone are highly competent and successful. The second dimension involves the setting of personal standards (e.g., "I have extremely high goals"). Most theorists describe this as the central feature of perfectionism, because perfectionists set such excessively high standards for themselves that their standards are extremely hard to meet. The third and fourth dimensions measure the concern of parents' attitudes: parents' expectations (e.g., "My parents wanted me to be the best at everything") and parents' criticisms (e.g., "As a child, I was punished for doing things less than perfect"). Burns (1980), Pacht (1984), and Hamacheck (1978) have all described this parental connection as the core of this disorder and its etiology. The fifth dimension is doubts about actions (e.g., "I usually have doubts about the simple every day things I do"). The sixth, and last, dimension is a tendency to be orderly or organized (e.g., "I try to be a neat person"). This dimension reflects an emphasis on order and orderliness, which has often been associated with perfectionism (Hollender, 1965). Within these dimensions, Frost et al. (1990) found concern over mistakes and doubts about actions to be positively correlated with a wide range of symptoms of psychopathology as well as depression. In addition, they found personal standards to be positively correlated with feelings of efficacy and negatively correlated with problematic procrastination. The parental expectations and parental criticisms were not found to be as closely related to psychopathology, but may be important variables in the development of perfectionism. The organizational dimension, although found to be somewhat more separate, was found to be negatively correlated with the frequency of procrastination (Frost et al., 1990).

A second model of perfectionism by Hewitt and Flett (1991) defines perfectionism as a multidimensional construct composed of the three dimensions: self-oriented perfectionism (e.g.,

"I must work to my full potential at all times"), socially prescribed perfectionism (e.g., "The people around me expect me to succeed at everything I do"), and other-oriented perfectionism (e.g., "I have high expectations for the people who are important to me"). Self-oriented perfectionism involves a tendency to strive compulsively for unrealistically high self-standards and to give harsh self-evaluations, often causing deficits in self-esteem and self-evaluation. These characteristics make individuals more prone to depression (Hewitt & Flett, 1991). Socially prescribed perfectionism involves a tendency to have a fear of negative social evaluation and to desire approval from those around them. When perceived standards are not met, individuals blame themselves and lower their self-worth, consequently resulting in depressive symptoms (Hewitt & Flett, 1991). Other-oriented perfectionism involves having unrealistic standards for others. Individuals with tendencies of other-oriented perfectionism have behaviors that are similar to self-oriented perfectionists, but with the behavior directed outward at others rather than the self, resulting in feelings of lack of trust and hostility toward others (Hewitt & Flett, 1991). All three dimensions in Hewitt and Flett's model contain high, unrealistic standards that are potentially detrimental, specifically self-oriented and socially prescribed perfectionism (Hewitt & Flett, 1991).

Although defined and measured differently, both the Frost et al. (1990) and Hewitt and Flett (1991) scales are based on a maladaptive model of perfectionism. Studies on perfectionism have supported the maladaptive theory of perfectionism that is associated with both Frost et al.'s (1990) and Hewitt and Flett's (1991) theories, which propose that perfectionism is a maladaptive personality factor that predisposes individuals to greater vulnerability to stress and consequently, psychological maladjustment (Chang, 2002; Dunkley, Zuroff, and Blankstein, 2006).

### From Multidimensional to Multifunctional Models of Perfectionism

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Going beyond these past definitions, some researchers have begun to reexamine an earlier notion following Hamacheck's (1978) conceptualizations that perfectionism may actually embody multiple functions. In more recent research, perfectionism has been conceptualized as a multidimensional personality disposition with two components; a positive aspect of perfectionism or adaptive perfection, and a negative aspect of perfectionism or maladaptive perfectionism. Hamachek (1978) made a functional distinction between normal and neurotic perfectionism, showing that perfectionism can be positive. This idea came from an initial focus on anorexia nervosa (Slade, 1982), which hypothesized that eating disorders stemmed from a combination of strong perfectionistic tendencies and general dissatisfaction with life. It was found that those with eating disorders were characterized as dissatisfied perfectionists. In Hamachek's (1978) findings, both normal and neurotic perfectionists set high standards for themselves, but normal perfectionists allow themselves to be less precise depending on the situation, while neurotic perfectionists give themselves little room to make mistakes (Hamachek, 1978). Thus, while both processes of perfectionism involve critical evaluations of reaching a high standard, those with high levels of normal perfectionism can accept minor flaws in their performance and still feel successful, while those with high levels of neurotic perfectionism become unsatisfied if their goals have not been met. Individuals who show symptoms of neurotic perfectionism tend to use an all-or-none thinking, in which anything other than perfection is seen as failure. For neurotic perfectionists, even minor flaws cannot be accepted because they represent failure. The major difference between normal and neurotic perfectionists is the level of concern over mistakes they make. This is consistent with Frost et al.'s view (1990) about concern over mistakes being a central part of perfectionism.

Other researchers have also supported the notion that perfectionism has two different distinctions. For example, research done by Slade and Owen (1998) reflect Hamachek's view on normal and neurotic perfectionism by presenting a dual process model of perfectionism. In this view, there are two processes of perfectionism, Type 1 and Type 2. Type 1, dominated by the presence of normal or healthy attributes of perfectionism, carries positive benefits and should be encouraged or fostered. This is similar to Hamachek's concept of normal perfectionism, Frost et al.'s (1990) measure on personal standards and organization, and Hewitt and Flett's (1991) self-oriented perfectionism. Type 2, dominated by unhealthy attributes of perfectionism, is pathological, unhealthy and causes a person to be dissatisfied. This is similar to Hamachek's concept of neurotic perfectionism, Frost et al.'s (1990) parental criticism, parental expectations, and doubts about actions, as well as Hewitt and Flett's (1991) socially prescribed perfectionism.

In addition to theories of perfectionism, some research models imply that perfectionism may be multifunctional. Following Hamacheck's conceptualization, several researchers have begun to propose multifunctional models of perfectionism predicated on the idea that perfectionism may possess both adaptive and maladaptive attributes (e.g., Stoeber, & Otto, 2006). For example, Chang (206) proposed a multifunctional model of performance perfectionism based on four dimensions, namely, positive self-oriented perfectionism, positive socially prescribed perfectionism, negative self-oriented perfectionism, and negative socially prescribed perfectionism. Consistent with the multifunctional model of performance perfectionism, Chang (2006) found negative dimensions of perfectionism to be associated with greater negative outcomes (e.g., negative affect, depressive symptoms), whereas positive dimensions of perfectionism were found to be associated with greater positive outcomes (e.g., positive relations with others).

Going beyond a multidimensional or multifunctional model of perfectionism, researchers have also taken into account the role of a practice versus performance setting and how that would affect perfectionistic tendencies. More recently, Stoeber, Stoll, Pescheck, and Otto (2008) have proposed a multifunctional model of perfectionism that incorporates a focus on practice and performance dimensions. According to these researchers, striving to achieve perfectionism in practice and performance represent adaptive features, whereas having negative reactions to practice and performance represent maladaptive features of perfectionism. Consistent with this view, Stoeber et al. found that perfectionistic strivings in athletes were positively associated with mastery-approach and performance-approach goals, whereas negative reactions to perfectionism in athletes were positively associated with mastery-avoidance and performance-avoidance goals. Although the multifunctional model proposed by Stoeber and his colleagues appears promising for understanding perfectionism in athletes, only a few studies have examined the utility of their model for understanding perfectionism in non-athletes (e.g., Stoeber & Kersting, 2007). Thus, it would be important to determine if Stoeber et al.'s multifunctional model of perfectionism is also useful for understanding adjustment.

### Is Perfectionism Redundant with Maximizing?

Similar to the construct of perfectionism, which involves the pursuit of important goals, theorists have also noted the importance of different styles in seeking important or desired goals. Simon (1955) suggested that in situations that involve choice, people can choose either a "maximizing" or "satisficing" goal in their choice-making strategies. Simon defined satisficing as reaching a degree of satisfaction at a threshold of acceptability, On the other hand, maximizing is an optimizing alternative that seeks for the best and not settling for anything else. For example, a maximizer will most likely spend so much time surfing through 400 channels on

television to find the best one that little time will be left for viewing, whereas a satisficer will most likely surf until finding the first acceptable show, and actually watch the show (Simon, 1955). Yet, having a choice can be problematic, because people may come to believe that any unacceptable result is their fault (Schwartz, 2000). According to Schwartz et al. (2002), maximization can be seen as unrealistic or unreliable in real life, so people may have satisficing goals instead, to reach that certain degree of acceptability. Thus, satisficing is not pursuing the best option, but instead, an alternative or an option that is good enough. In a study by Schwartz et al., (2002), individual differences were found among people in what they seek when making decisions in various aspects of their lives: maximizers desired the best possible result whereas satisficers desired a result that was good enough to meet some criterion. This may be apparent in particular situations, such as a practice versus performance setting, for example, in sports, public speaking, test taking, or music.

Some researchers suggest that individual differences in standards, such as having a maximizing versus satisficing tendency, might play a strong role in various psychosocial adjustment outcome variables, such as happiness, optimism, satisfaction with life, and self-esteem (Schwartz et al., 2002). It is important to take a closer look at the relationship between standards and perfectionism, such as normal and neurotic perfectionism. Research findings have indicated that maximizing may have an important association with the maladaptive dimension of perfectionism. A person who displays characteristics of maladaptive perfectionism may have maximizing tendencies, such as when learning, studying, or practicing something, in striving for the best performance. During a performance, there is less control over the situation, so individuals may then have less desire to obtain a maximizing level of perfection. In a study done by Frost and Henderson (1991), 40 female athletes were examined for the relationship between

perfectionism and the athletes' reaction to competition. They found that those who obtained high scores on concern over mistakes, an aspect of negative perfectionism related with frequency of procrastination and general distress, reported more anxiety and lower levels of self-confidence in sports, reacted negatively to mistakes, displayed a general tendency to worry and "choke" before a game, and reported more negative thinking in the 24 hours before competition. On the other hand, those who obtained high scores on personal standards, an aspect of positive perfectionism related with positive achievement striving and work habits, had a greater success orientation toward sports and more positive dreams of success or perfection before competition.

Thus, people with perfectionistic tendencies may differ in levels of acceptability in reaching their goals, depending on what process of perfectionism they carry out. For example, in athletes, maximizers may only believe that they have succeeded if they place first, whereas asatisficers may believe that they have succeeded if they beat their own previous record. However, is perfectionism just about maximizing standards and tendencies? Insofar that perfectionism and maximizing are empirically related and that both constructs have been found to be related to adjustment, it would be important to determine if perfectionism and maximizing represent redundant or distinct predictors of adjustment. How does maximizing add to perfectionism in the prediction of adjustment variables such as burnout and life satisfaction?

There are few outcomes especially worth examining in a college student population. One specific outcome worth looking at is burnout. This is because factors such as school-related stress and having multiple responsibilities to take care of seem to make burnout common among college students. In a study done among Chinese college students, researchers found that burnout was correlated with the maladaptive aspects of perfectionism (Zhang, Gan, & Cham, 2007). Long hours of continuous studying, practice, or learning often result in feelings of distress and

fatigue, which manifest themselves not only physically but also emotionally. Emotional burnout can be more harmful than physical burnout in the sense that one may lose the will to continue striving for the top, and give up in the end, never reaching the maximizing result. Past research (Magnusson, Nias, & White, 1996) has shown that stressors that expose individuals to feeling anxious may trigger a discrepancy between an ideal level of performance and actual performance, which is affected by stress and can in turn cause self-doubting individuals to become more fatigued when striving but failing to attain their goals. Individuals who strive for a maximizing performance may then feel much more emotionally burnt out and physically fatigued. Thus, burnout is a good index in understanding the potential impact of perfectionism on negative functioning.

Alternatively, it may be interesting to examine the potential impact of perfectionism and maximizing on positive functioning. One important index of well-being is life satisfaction.

Desirable outcomes are often caused by well-being (Diener & Seligman, 2009). People with high levels of life satisfaction are more likely to have better social relationships, and perform better at work (Diener, Emmons, Larsen, and Griffins, 1985). Conversely, they are also less likely to suffer from physical ailments and psychological distress. In a study done by Garcia and Siddiqui (2009), it was found that adolescents with high positive affect also had high psychological well-being. Psychological well-being, in turn, predicted life satisfaction for three of the four temperaments (high affective, low affective, and self-destructive). It would be interesting to examine if one's desire to achieve a maximizing result could affect one's satisfaction with life. One who constantly strives for maximizing perfection in all aspects of life is more likely to feel elevated stress from always striving for the unattainable standard. College students in particular are also exposed to unusual pressure, such as adjusting to new social and physical environments,

shifting social networks, and high academic demands, all while pursuing career goals. Thus, individuals with a maximizing perfectionistic tendency who are unable to meet these goals may have lower levels of overall life satisfaction.

## Purpose of the present study

Given these discussions about perfectionism being both adaptive and maladaptive, and normal and neurotic, it is easy to assume that perfectionism is multifunctional due to individual differences. That is, the association between perfectionism and adjustment may be different in individuals who seek different levels of perfection. Although maximizing tendencies were found to be positively associated with a maladaptive measure of perfectionism (Schwartz et al., 2002), these researchers did not use a multifunctional measure of perfectionism. Therefore, it is not clear if maximizing is necessarily and positively associated with all facets (i.e., adaptive and maladaptive) of perfectionism. Moreover, insofar as standards and perfectionism share some overlap, it is not clear if they remain unique and useful predictors of adjustment. In order to more fully understand perfectionism and its many aspects, we need to first understand the different dimensions of perfectionism. Given these considerations, the purpose of our present study was three-fold: (a) to examine the relationship between Stoeber et al.'s multifunctional model of perfectionism and adjustment (e.g., distress) in non-athletes; (b) to examine the relations of multifunctional perfectionism with maximizing tendencies; and (c) to examine the extent to which multifunctional perfectionism accounts for variance in adjustment beyond what is accounted for by maximizing.

#### Method

### **Participants**

A total of three hundred and thirty-one students from a large Midwestern university participated in the present study. Ages across participants ranged from 18 to 37 years, with a mean age of 19.9 (SD = 2.94) years. Participants were predominantly European American (73.7%).

#### **Measures**

**Maximizing.** To assess for maximizing tendencies, we used the Maximizing (MAX) scale (see Appendix A; Schwartz et al., 2002). The MAX scale is composed of 13 items that assess for maximizing tendencies (e.g., "No matter how satisfied I am with my job, it's only right for me to be on the lookout for better opportunities"). All items are rated on a 7-point Likert-type scale, ranging from 1 (*completely disagree*) to 7 (*completely agree*). In general, higher scores on the MAX scale indicated a greater emphasis on seeking maximizing outcomes whereas lower scores on the MAX scale indicated a greater emphasis on satisficing outcomes.

Multifunctional perfectionism. To assess for multifunctional perfectionism, we used the Multidimensional Inventory of Perfectionism (MIP) (see Appendix B). The MIP was based off the Multidimensional Inventory of Perfectionism in Sport (MIPS; Stober, Otto, & Stoll, 2004). Similar to the MIPS, the MIP is composed of two positive and two negative scales. The two positive scales are Striving for Perfection During Practice (MIP-SPT; e.g., "During practice, I strive to be as perfect as possible") and Striving for Perfection During Performance (MIP-SPF; e.g., "During performance, I strive to be as perfect as possible"). The two negative scales are Negative Reactions to Imperfection During Practice (MIP-NRPT; e.g., "During practice, I get frustrated if I do not fulfill my high expectations") and Negative Reactions to Imperfection During Performance (MIP-NRPF; e.g., "During performance, I get frustrated if I do not fulfill my high expectations"). Each of the four scales are composed of 5 items. Respondents are asked

to rate their agreement to each item across a 6-point Likert-type scale, ranging from 1 (*never*) to 6 (*always*). In general, higher scores on each scale indicate greater levels of perfectionism.

Psychosocial Adjustment. To assess for psychosocial adjustment in college students, we used two measures, namely, the College Student Survey (see Appendix C; CSS; Gold, Bachelor, & Michael, 1989) and the Satisfaction With Life Scale (see Appendix D; SWLS; Diener, Emmons, Larsen, & Griffin, 1985). The CSS is made up of three scales. There is a 9-item Emotional Exhaustion scale (CSS-EE; e.g., "I feel emotionally drained from school"), a 5-item Depersonalization scale (CSS-DP; e.g., "I feel I treat some friends and classmates as if they were impersonal objects"), and a 8-item Low Personal Accomplishment scale (CSS-LPA; e.g., "I have accomplished many worthwhile things in college"). Score on the CSS-LPA are reverse scored. Respondents are asked to indicate how frequently they experience each item across a 7-point Likert-type scale, ranging from 0 (never) to 6 (always). In general, higher scores on the CSS indicate lower levels of psychosocial functioning.

The SWLS is a 5-item measure of global life satisfaction or a person's satisfaction with life as a whole, rather than in any specific domain (e.g., "I am satisfied with my life").

Respondents are asked to indicate their agreement or disagreement with each statement across a 7-point Likert-type scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). Higher scores reflect greater levels of satisfaction with life.

### Procedure

This study was conducted at a large Midwestern university. Participants were recruited through a randomly generated list of undergraduate students obtained from the Office of Registrar. Students who received the email were invited to voluntarily participate in this study by completing an online version of the survey.

#### **Results**

## Relations Between Standards, Perfectionism, and Adjustment

Results of computing correlations, means, and standard deviations for all study variables are presented in Table 1. As the table shows, MAX scores were positively associated with perfectionism and burnout, but negatively associated with life satisfaction. Consistent with the notion that the inclusion of maximizing plays a key conceptual role in defining perfectionism, MAX scores were found to be significantly and positively associated with each of the MIP scales, range in r's = .29 to .47. Similarly, in support of the contention that maximizing plays a central role in adjustment, MAX scores were also found to have significant associations with each of the adjustment measures, ranging in r's = .15 to .39.

Alternatively, scores on the two adaptive MIP-SPT and MIP-SPF scales were found to have limited associations with adjustment. Specifically, MIP-SPT scores were found to only be significantly associated with CSS-EE, r = .12, p < .05, and CSS-LPA, r = -.15, p < .01, scores. Similarly, MIP-SPF scores were found to only be significantly associated with CSS-LPA, r = -.17, p < .01, and SWLS, r = .10, p < .05, scores. In contrast, scores on the two maladaptive MIP-NRPT and MIP-NRPF scales were found to be associated with all four indices of adjustment. Specifically, MIP-NRPT scores were found to be positively associated with scores on each of the CSS scales, r's = .12 to .45, and negatively associated with scores on the SWLS, r = -.24, p < .001. Similarly, MIP-NRPF scores were found to be positively associated with scores on each of the CSS scales, r's = .13 to .42, and negatively associated with scores on the SWLS, r = -.21, p < .01.

Taken together, the present correlational findings indicate that maximizing is significantly involved in both perfectionism and psychosocial adjustment. Our findings also

indicate that maladaptive, as compared to adaptive, perfectionism dimensions are more consistently associated with adjustment.

## Maximizing as a Predictor of Adjustment: Should Perfectionism Still be Considered?

As indicated earlier, maximizing was found to be significantly associated with each of the four measures of psychosocial adjustment examined in the present study. To examine the extent to which perfectionism, as measured by the MIP scales, may account for additional variance in adjustment beyond what is accounted for by maximizing, we conducted a series of hierarchical regression analyses in predicting scores on each of the adjustment measures. In predicting each outcome, MAX scores were entered as a set in Step 1, followed by the four MIP scores as a set in Step 2. Results of these analyses are presented in Table 2. To determine if maximizing and perfectionism scores accounted for a small, medium, or large amount of the variance in adjustment, we used Cohen's (1977) convention for small,  $f^2 = .02$ , medium,  $f^2 = .15$ , and large effects,  $f^2 = .35$ .

In predicting emotional exhaustion, MAX scores were found to account for a medium,  $f^2 = .15$ , yet significant 13% of the variance in CSS-EE scores. This result was driven by MAX scores,  $\beta = .36$ , p < .001. When MIP scores were entered in the second step, they were found to account for a medium,  $f^2 = .16$ , yet significant 14% of additional variance in CSS-EE scores. This result was driven by MIPS-SPT,  $\beta = .17$ , p < .05, MIP-NRPT,  $\beta = .36$ , p < .001, and MIP-NRPF,  $\beta = .18$ , p < .05. The full prediction model including maximizing and perfectionism were found to account for a large,  $f^2 = .37$ , and significant 27% of the variance in CSS-EE scores, F(5, 323) = 23.91, p < .001. In predicting depersonalization, MAX scores were found to account for a medium,  $f^2 = .19$ , yet significant 16% of the variance in CSS-DP scores. This result was driven by MAX scores,  $\beta = .39$ , p < .001. When MIP scores were entered in the second step, they were

found to account for a small,  $f^2 = .06$ , yet significant 6% of additional variance in CSS-DP scores. This result was driven by MIP-NRPT,  $\beta = .21$ , p < .05. The full prediction model including maximizing and perfectionism was found to account for a large,  $f^2 = .28$ , and significant 22% of the variance in CSS-DP scores, F(5, 323) = 17.81, p < .001. Finally, in predicting low personal accomplishment, MAX scores were found to account for a small,  $f^2 = .02$ , albeit significant 2% of the variance in CSS-LPA scores. This result was driven by MAX scores,  $\beta = .15$ , p < .01. When MIP scores were entered in the second step, they were found to account for a medium,  $f^2 = .11$ , yet significant 10% of additional variance in CSS-LPA scores. This result was driven by MIP-SPT,  $\beta = -.20$ , p < .05, and MIP-SPF,  $\beta = -.21$ , p < .05. The full prediction model including maximizing and perfectionism was found to account for a medium,  $f^2 = .14$ , yet significant 12% of the variance in CSS-LPA scores, F(5, 323) = 9.05, p < .001.

In predicting life satisfaction, MAX scores were found to account for a small,  $f^2 = .09$ , albeit significant 8% of the variance in SWLS scores. This result was driven by MAX scores,  $\beta = .27$ , p < .001. When MIP scores were entered in the second step, they were found to account for a small,  $f^2 = .09$ , 9% of additional variance in SWLS scores. This result was driven by MIP-SPF scores,  $\beta = .21$ , p < .001, and MIP-NRPT scores,  $\beta = .23$ , p < .05. The full prediction model including maximizing and perfectionism was found to account for a medium,  $f^2 = .20$ , yet significant 17% of the variance in SWLS scores, F(5, 323) = 12.79, p < .001.

Given these results indicating that perfectionism remained an important predictor of psychosocial adjustment even after accounting for maximizing, we decided to conduct another set of regression analyses to determine if standards still mattered. Specifically, we conducted these analyses by reversing the order and entering MIP scores as a set in Step 1, followed by MAX scores as a set in Step 2. Results of these analyses are presented in Table 3. As the table

shows, the results from these analyses indicate a pattern supporting the idea that maximizing remains an important unique predictor of adjustment even after controlling for perfectionism. However, it is also worth noting that the amount of variance uniquely accounted for by maximizing was much smaller,  $\Delta R^2$  range = .01 to .08, after accounting for perfectionism in the model. Overall, our regression findings point to the value of an inclusive prediction model of psychosocial adjustment that is predicated on both an appreciation of maximizing and perfectionism.

#### **Discussion**

One goal of the study was to examine the relations between perfectionism, maximizing, and psychosocial adjustment. We found that perfectionism and maximizing are related, but not redundant. Maximizing scores were found to be positively and significantly correlated with each of the perfectionism measures, r's = .29 to .47. Thus, the present findings indicate that although perfectionism involves a maximizing tendency held by the individual, it is not wholly predicated on this standard of performance. Alternatively, maximizing does not appear to be a sufficient marker of perfectionism. As some researchers have argued, perfectionism can and does involve perceptions associated with externally prescribed standards and goals. For example, Frost et al. (1990) defined perfectionism involving parental criticism and meeting the expectations of parents. Similarly, Hewitt and Flett (1991) identified socially prescribed perfectionism as a core dimension involving meeting expectations imposed by others. Hence, it would be interesting in future research to determine how much of perfectionism involves maximizing versus satisficing tendencies associated with meeting personal versus socially prescribed goals.

Another key goal of this study was to determine if, beyond maximizing, perfectionism still mattered in predicting psychosocial adjustment. In that regard, we found that perfectionism,

as measured by the MIP, consistently accounted for significant amounts of unique variance in each of the present four outcome measures,  $\Delta R^2 = 6\%$  to 14%, beyond maximizing. Interestingly, maximizing accounted for the largest amount of variance in depersonalization,  $R^2 = .15$ , and the smallest amount of variance in low personal accomplishment,  $R^2 = .02$ . These findings are consistent with those from other studies linking maximizing with lower levels of subjective well-being (e.g., happiness, life satisfaction; Iyengar, Wells, & Schwartz, 2006).

Alternatively, results of conducting additional analyses looking at the importance of maximizing above and beyond perfectionism showed that maximizing, as measured by the MAX scale, also consistently accounted for small, albeit significant amounts of unique variance in each of the four outcome measures,  $\Delta R^2 = 1\%$  to 8%, beyond perfectionism. In general, and consistent with our correlational findings, the negative dimensions of perfectionism tapped by the MIP represented the most robust predictors of psychosocial adjustment within the perfectionism set. Taken together, the present regression results indicate two important insights. On the one hand, although maximizing is involved in different dimensions of perfectionism, the inclusion of this core standard alone is not sufficient for developing comprehensive models of psychosocial adjustment in adults. On the other hand, although perfectionism has been found to represent an important predictor of adjustment in adults, the present findings point to the importance of including other important variables as complimentary predictors of human adjustment.

The present study was initiated to examine the relations between perfectionism and standards and their relation to psychosocial adjustment. Past research suggests that perfectionism begins positively but can lead to maladjustment, due to being unable to achieve a higher goal (Shafran & Mansell, 2001). The results from this study imply that future investigations or possible interventions in promoting positive adjustment and abating negative adjustment need to

take an even closer look at the relation between perfectionism and standards and the role of standards in driving perfectionism and adjustment According to our results, emotional exhaustion, depersonalization, low personal accomplishment, and life satisfaction are all significantly and largely driven by perfectionism, rather than maximizing.

Our research findings imply that we may be able to help students achieve less psychosocial stress due to emotional burnout and higher life satisfaction by helping students lower their maximizing tendencies. For example, for a patient with maximizing perfectionism tendencies and high levels of emotional exhaustion, we should focus on identifying which specific dimension of perfectionism it is highly correlated with. According to our results, emotional exhaustion is significantly correlated with negative reactions to practice and negative reactions to performance, as well as striving for perfectionism during practice. By working with these specific dimensions, we could help lower their experience of emotional exhaustion. Studies have shown that different methods such as mindfulness programs or relaxation therapies can be used in our daily lives to lower or manage stress and consequently enhance performance (Carroll, 2007; Palmer, 2008). Additionally, we should try to reduce maximizing motives, because maximizing and emotional exhaustion are positively correlated. Increasing satisficing motives might also lower the experience of emotional exhaustion, because in theory, maximizing and satisficing are on opposite ends. However, this alone is not enough, because our results show that although maximizing motives account for a large amount of the variance in emotional exhaustion, so do various dimensions of perfectionism. This implies that we need to work on modifying both perfectionism and maximizing standards in future research in order to best promote positive adjustment and abate negative adjustment. Without fully understanding both

perfectionism and standards and the relation between the two, we cannot understand how the two may drive or maintain psychosocial adjustments.

#### **Some Limitations**

Despite the interesting findings from this study, a number of limitations are worth noting. First, the present study involved a college student population. College students are more likely to be more emotionally stressed or burnt out from the constant demands of school, extracurricular activities, and the need for excellent time management. In a study done by Stallman (2010), the rate of psychological distress among college students (83.9%) is almost three times higher than in the general population (29%). Thus, it would be useful to study a clinical sample to further research perfectionism and standards. Second, the maximizing scale (Schwartz, 2002) did not have a very high alpha. More recently, a modified version of the maximizing scale was developed (Nenkov, Morrin, Ward, Schwartz, & Hulland, 2008). It would be interesting to replicate the present research using a modified measure of a maximizing scale with a higher reliability and validity to assess for similarities or possible differences in results. Third, the present sample was predominantly European American. However, different cultures may drastically affect an individual. For example, Asian American college students with interdependent cultural concerns and parental relations were found to have elevated maladaptive perfectionism and parent-driven perfectionism associated with depressive symptoms while demonstrating perfectionistic tendencies (Yoon & Lau, 2008). It would be interesting to determine if different racial groups with different cultural backgrounds react differently to perfectionism and standards and to see if the effects perfectionism and standards play on psychosocial adjustment have the same effect on different ethnic groups.

### Conclusion

In conclusion, we set out to examine the relations between maximizing, perfectionism, and adjustment in adults. Consistent with past research and theory, we found that maximizing was related to perfectionism. Furthermore, we were able to show that perfectionism remained an important predictor of adjustment, even after controlling for maximizing standards.

Alternatively, we were also able to show that maximizing remained an important predictor of adjustment beyond perfectionism. Thus, our findings suggest the importance of considering both perfectionism and standards in developing prediction models of adjustment in adults.

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Table 1 Zero-Order Correlations between Maximizing, Perfectionism and Adjustment

	1	2	3	4	5	6	7	8	9
1. Maximizing	-								
2. Striving Practice	.29***	-							
3. Striving Performance	.29***	.72***	-						
4. Negative Reactions Practice	.47***	.60***	.43***	-					
5. Negative Reactions Performance	.45***	.47***	.51***	.77***	-				
6. Emotional Exhaustion	.36***	.12*	.09	.45***	.42***	-			
7. Depersonalization	.39***	.06	.02	.32***	.30***	.61***	-		
8. Low Personal Accomplishment	.15**	15**	17**	.12*	.13*	.27***	.24***	-	
9. Life Satisfaction	28***	.04	.10*	24***	21**	44***	34***	.53***	-
M	55.20	20.50	23.86	14.22	16.47	26.75	8.03	31.08	24.88
SD	11.93	5.74	5.87	5.32	6.16	10.76	6.16	7.53	6.37
α	.76	.92	.94	.91	.91	.89	.76	.80	.89

*Note.* N = 331

<sup>\*</sup>p < .05. \*\*p < .01. \*\*\*p < .001

Table 2 Hierarchical Regression Analyses Showing Amount of Variance in Adjustment Accounted for by Maximizing, Followed by Perfectionism in Students (N = 331)

Maximizing, Followed by Pe	B	in Stuaeni R <sup>2</sup>	$\frac{S(N=331)}{\Delta R^2}$	df	$\overline{F}$
Outcome  Emotional Exhaustion	р	K	ΔK	aj	Г
Emotional Exhaustion		12		(1 227)	17 (1***
Step 1	.36***	.13		(1, 327)	47.64***
Maximizing	.30***	27	1.4	(5, 222)	1.5.00***
Step 2	174	.27	.14	(5, 323)	15.88***
Striving practice	17*				
Striving performance	08				
Negative reactions	.36***				
practice	104				
Negative reactions	.18*				
performance					
Depersonalization		1.6		(1, 227)	50.00 to the stee
Step 1	2 0 26 26 26	.16		(1, 327)	59.90***
Maximizing	.39***	22	0.6	(5. 222)	
Step 2	4.0	.22	.06	(5, 323)	6.30***
Striving practice	10				
Striving performance	15				
Negative reactions	.21*				
practice					
Negative reactions	.11				
performance					
Low Personal					
Accomplishment					
Step 1		.02		(1, 327)	7.18**
Maximizing	.15**				
Step 2		.12	.10	(5, 323)	9.33***
Striving practice	20*				
Striving performance	21*				
Negative reactions	.14				
practice					
Negative reactions	.17				
performance					
Life Satisfaction					
Step 1		.08		(1, 327)	27.29***
Maximizing	28***				
Step 2		.17	.09	(5, 323)	8.78***
Striving practice	.14				
Striving performance	.21**				
Negative reactions	23*				
practice					
Negative reactions	11				
performance					
* < 05 ** < 01 *** <	001				

<sup>\*</sup>p < .05. \*\*p < .01. \*\*\*p < .001.

Table 3

Hierarchical Regression Analyses Showing Amount of Variance In Adjustment Accounted for by Perfectionism, Followed by Maximizing in Students (N = 331)

Outcome	$\alpha \alpha \alpha \beta \beta$	$\frac{R^2}{R^2}$	$\frac{3(1\sqrt{331})}{\Delta R^2}$	df	$\overline{F}$
Emotional Exhaustion	Р				
Step 1		.25		(4, 325)	26.55***
Striving practice	18*			(1,)	
Striving performance	06				
Negative reactions	.42***				
practice					
Negative reactions	.21*				
performance					
Step 2		.27	.02	(5, 324)	10.29***
Maximizing	.18**			(- ) - )	
Depersonalization					
Step 1		.13		(4, 325)	13.30***
Striving practice	13			( ) )	
Striving performance	11				
Negative reactions	.32**				
practice					
Negative reactions	.16				
performance					
Step 2		.20	.08	(5, 324)	30.97***
Maximizing	.32***				
Low Personal					
Accomplishment					
Step 1		.11		(4, 325)	10.23***
Striving practice	21*				
Striving performance	19*				
Negative reactions	.19				
practice					
Negative reactions	.19*				
performance					
Step 2		.12	.01	(5, 324)	3.95*
Maximizing	.12*				
Life Satisfaction					
Step 1		.13		(4, 325)	12.19***
Striving practice	.16				
Striving performance	.19*				
Negative reactions	31**				
practice					
Negative reactions	15				
performance					
Step 2		.17	.03	(5, 324)	13.35***
Maximizing	21***				
* <i>p</i> < .05. ** <i>p</i> < .01. *** <i>p</i> < .	.001.				

# Appendix A

# Maximizing Scale

<u>Instructions</u>: Using the 1-7 scale below, indicate the extent to which you agree or disagree with each item by placing the appropriate number on the line preceding that item.

	Completely Disagree	Disagree	Slightly Disagree	Neutral	Slightly Agree	Agree	Strongly Agree	
1		watch TV, I			scanning	through	the available	options even
2 to.			_				other stations I with what I	
3	I treat r	elationships	like clothir	ng: I expec	et to try a	lot on b	efore I get the	e perfect fit.
4		ter how satis er opportuni		vith my jo	b, it's on	ly right f	For me to be o	on the lookout
5	I often	fantasize abo	out living ir	n ways tha	t are quit	e differe	nt my actual	life.
6	I'm a b best ath	ig fan of list letes, the be			things (t	he best r	novies, the be	est singers, the
7	I often	find it diffic	ult to shop	for a gift f	or a frien	ıd.		
8	When s	hopping, I h	ave a hard	time findi	ng clothi	ng that I	really love.	
9	Renting	g videos is re	ally difficu	lt. I'm alv	vays strug	ggling to	pick the bes	t one.
10	I find th						a letter to a fafts of even si	
11	No matt	er what I do	, I have the	highest st	andards	for myse	lf.	
12	I never	settle for sec	cond best.					
13	Whenev	er I'm facedes that aren'			_	e what a	ll the other po	ossibilities are

# Appendix B

Multidimensional Inventory of Perfectionism (MIP)

<u>Instructions</u>: Read each of the following statements and indicate your response by writing the appropriate number on the line next to each item.

Never 1	Rarely 2	Occasionally 3	Often 4	Almost always 5	Always 6		
2. During 3. During 4. During	practice, practice, practice,	I feel the need to I am a perfection	me to be be perfe nist as far	perfect in everythin			
7. During 8. During 9. During	performa performa performa	nce, I feel the nonce, I am a perfe	ant to me eed to be dectionist a	to be perfect in eve	are concerne	-	
		line next to each		and indicate your i		vriting the	
l l	2	3	4	Annost arways 5	6		
<ol> <li>During <i>practice</i>, I feel extremely stressed if everything does not go perfectly.</li> <li>During <i>practice</i>, I get completely furious if I make mistakes.</li> <li>During <i>practice</i>, I get frustrated if I do not fulfill my high expectations.</li> <li>During <i>practice</i>, I feel depressed if I have not been perfect.</li> <li>During <i>practice</i>, If something does not go perfectly, I am dissatisfied with the whole practice session.</li> </ol>							
 7. During 8. During	performa performa	nce, I get complence, I get frustra	letely furicated if I do	sed if everything do ous if I make mistal o not fulfill my high	kes.  expectations	•	

\_\_\_\_\_ 10. During *performance*, If something does not go perfectly, I am dissatisfied with the whole performance.

## Appendix C

College Student Survey (CSS)

<u>Instructions:</u> Please indicate how often you feel the way described in each of the following statements by writing the appropriate number on the line next to each statement

<b>How Often:</b>	0	1	2	3	4	5	6
	Never	A few	Once a	A few	Once	A few	Every
		times a	month	times a	a	times a	day
		year or	or less	month	week	week	
		less					

<b>How Often:</b>	
1.	I feel emotionally drained from school.
2	I feel used up at the end of the school day.
3	I feel fatigued when I get up in the morning and have to face another day of school.
4	I can easily understand how my friends and classmates feel about things.
5	I feel I treat some friends and classmates as if they were impersonal objects.
6	Working with people all day is really a strain for me.
7	I deal very effectively with the problems of my friends and classmates.
8	I feel burned out from school.
9	I feel I'm positively influencing other people's lives through my work at school.
10	I've become more callous toward people since I started college.
11	I worry that school is hardening me emotionally.
12	I feel very energetic.
13	I feel frustrated by school.
14	I feel I'm working too hard at school.
15	I don't really care what happens to some friends and classmates.
16	Working with people puts too much stress on me.
17	I can easily create a relaxed atmosphere with my friends and classmates.
18	I feel exhilarated after working closely with my friends and classmates.
19	I have accomplished many worthwhile things in college.
20	I feel like I'm at the end of my rope.
21	At school, I deal with emotional problems very calmly.
22	I feel friends and classmates blame me for some of their problems.

## Appendix D

Satisfaction with Life Scale (SWLS)

<u>Instructions</u>: Using the 1-7 scale below, indicate the extent to which you agree or disagree with each item by placing the appropriate number on the line preceding that item.

1	2	3	4	5	6	7
Strongly	Disagree	Slightly	Neutral	Slightly	Agree	Strongly
Disagree		Disagree		Agree		Agree
1 In r	nost ways my	life is close	to my ideal			
	, ,		•			
2. The	e conditions of	f my life are	excellent.			
3. I an	n satisfied wit	th my life.				
4. So	far I have gott	ten the impo	rtant things l	want in life.		
5. If I	could live my	life over, I	would chang	ge almost noth	ning.	