A First Study of Perfectionism and Multidimensional Life Satisfaction Among Adolescents

Rich Gilman
University of Kentucky

Jeffrey S. Ashby
Georgia State University

Current conceptualizations of perfectionism view the construct as consisting of two subtypes: adaptive and maladaptive. Although research in perfectionism has investigated negative outcomes such as depression and anxiety, little research has investigated how a general sample of children identified as perfectionists differentially might perceive their quality of life. In this exploratory study, a total of 132 middle school students were administered the Almost Perfect Scale–Revised and the Multidimensional Students' Life Satisfaction Scale. Results indicated that both perfectionist subtypes reported significantly higher global satisfaction than did nonperfectionists, whereas adaptive perfectionists reported significantly higher satisfaction ratings on self-satisfaction than both maladaptive and nonperfectionists. Implications of these findings are suggested.

Keywords: life satisfaction; perfectionism; adolescents; middle school

Although a general consensus on characteristics that typify perfectionism remain subject to discussion (Slaney & Ashby, 1996), most authors assert that setting especially high personal standards is the hallmark that differentiates perfectionist individuals from their nonperfectionist cohorts (see Blatt, 1995; Frost, Marten, Lahart, & Rosenblate, 1990; Parker, 2000; Slaney, Rice, & Ashby, 2002). Largely based on early anecdotal claims and theoretical discourse by individuals such as Horney (1950), Missildine (1963), and Hollender (1965), numerous authors believe that individuals who establish such high personal standards inevitably experience psychological distress (e.g., Blatt, 1995; Burns, 1980; Lombardi, Florentino, & Lombardi, 1998). For example, Pacht (1984) conceptualized perfectionists as caught in a “God/
scum phenomenon. . . [where] despite their striving they find it impossible to be perfect and, as a result, spend a lot of time wallowing at the low end of the continuum” (p. 387). Given this rather austere conceptualization, it is not surprising that the majority of research has investigated perfectionism and its relation with a variety of self-defeating aspects such as depression (Enns & Cox, 1999), anxiety (Flett, Hewitt, & Dyck, 1989), and suicide risk (Chang, 1998).

In contrast to these views, a number of other theorists have commented on the positive aspects of establishing high standards. For example, Adler (1956) contended that striving for perfection by individuals to maximize their talents or potential constitutes a major aspect of healthy human development. Outcomes of this striving only become negative when the setting and attainment of high standards is born out of inferiority feelings or as a necessary prerequisite for enhanced feelings of self-worth (see Ashby & Kottman, 1996). Establishing high standards also is in line with Maslow’s (1970) concept of self-actualization in which striving for perfection through self-actualization is an indicator of positive mental health rather than psychological distress (Parker, 1997). Researchers from this perspective thus believe that setting high personal standards and negative mental health should not always be viewed as mutually inclusive (Accrodino, Accordino, & Slaney, 2000; Parker, 2000).

Given those disparate views, Hamachek (1978) conceptualized perfectionism as multidimensional in nature, with the construct consisting of two separate but related subtypes: normal or neurotic. Individuals who set high personal standards but nevertheless understand and accept the fact that their standards might not be consistently met are viewed as normal perfectionists. Such individuals feel pleased and satisfied with their attempts to achieve those standards and are motivated by a desire to maximize their capabilities (Preusser, Rice, & Ashby, 1994). Neurotic perfectionists, on the other hand, also set high personal standards but find it difficult to accept situations when these standards are not attained. In that regard, neurotic perfectionists often find it difficult to feel satisfied with themselves or their performance (Hill, McIntire, & Bacharach, 1997; Nugent, 2000; Preusser et al., 1994; Slade & Owens, 1998). The Hamachek (1978) conceptualization was among the first to separate perfectionism into healthy and unhealthy subtypes, with psychological distress being the product of the latter. Furthermore, that duality implied that what differentiates healthy perfectionists from their unhealthy counterparts is not the setting of high personal standards but the ability to accept the fact that the standards attained will not always be consistent or successful.
Other descriptive labels have been applied to the Hamachek (1978) multi-dimensional model (e.g., Owens & Slade, 1987; Piirto, 1994; Slaney et al., 2002), with empirical findings supporting the multidimensionality of perfectionism (Frost et al., 1990; Hewitt & Flett, 1991). This study will focus on the work of Slaney and colleagues (e.g., Slaney, Rice, Mobley, Trippi, & Ashby, 2001) using the recently developed Almost Perfect Scale–Revised (APS-R; Slaney, Mobley, Trippi, Ashby, & Johnson, 1996). Research using this particular scale appears appropriate considering it is the only instrument specifically designed to assess both positive and negative dimensions of perfectionism and has consistently yielded adequate psychometric properties among college students. Specifically, the two-factor structure of the APS-R has been supported via both exploratory and confirmatory factor analyses (Slaney et al., 1996; Rice, Ashby, & Slaney, 1998). The first factor (Standards) is interpreted as a positive indicator of perfectionism and reflects high personal standards and expectations. The second factor (Discrepancy) is interpreted as a negative aspect of perfectionism and assesses the degree of stress experienced when an individual performance consistently does not meet expected standards. The relationship between the two factors has been reported as mild (e.g., $r = –.12$; Slaney et al., 2002), suggesting that although related, each factor measures a unique aspect of perfectionism. A number of psychological constructs also have been significantly and differentially related to each factor. The Standards factor has been positively related to measures of self-esteem (Ashby & Rice, 2000) and adaptive coping styles (Rice & Lapsley, 2000), whereas the Discrepancy factor has been positively related to measures of psychological distress including depression (Rice et al., 1998) and anxiety (Johnson & Slaney, 1996).

Additional evidence for the multidimensionality of perfectionism has been obtained by using the APS-R Standards and Discrepancy scales to distinctly identify individuals with perfectionist tendencies. For example, Ashby and Kottman (1996) and LoCicero and Ashby (2000) identified college students who were adaptive perfectionists (i.e., those with high standards and low discrepancy scores) and students who were maladaptive perfectionists (i.e., those with high standards and high discrepancy scores). The collective findings revealed that adaptive perfectionists reported significantly higher scores on measures of positive well-being, including self-esteem and internal locus of control, than did maladaptive perfectionists (see also Ashby & Rice, 2002; Perisamy & Ashby, in press). Furthermore, Perisamy & Ashby (in press) reported that adaptive perfectionists and maladaptive perfectionists both reported higher locus of control than did...
nonperfectionists. This finding is consistent with Adler’s (1956) concept of perfectionism, indicating that setting high personal standards regardless of their direct or indirect consequences nevertheless contribute to levels of positive well-being above those of individuals who set relatively lower personal standards (see also Manaster & Corsini, 1982; Winner, 1996).

**Perfectionism and Its Relationship With Life Satisfaction**

Although extant findings have illuminated the negative outcomes among many individuals who display perfectionist tendencies (e.g., Blatt, 1995; Hill, Zrull, & Turlington, 1997), there is little understanding of the relationship between perfectionism and life satisfaction, a key component of positive well-being (Diener, 2000). Given the aforementioned beliefs of some personality theorists (Adler, 1956; Maslow, 1970) as well as empirical evidence (e.g., Ashby & Rice, 2000; Perisamy & Ashby, in press) that indicates a relation between the setting of high standards and positive mental outlook, an understanding of the influence of perfectionism on positive psychological outcomes is considered as important as investigating negative outcomes for the purposes of developing a better theoretical understanding of the construct (Chang, 2000).

A study to investigate the relationship between perfectionism and life satisfaction appears relevant given that holding high standards is a characteristic shared by both constructs. Specifically, as perfectionism is primarily defined as possessing high personal standards, life satisfaction is defined as individuals’ cognitive appraisal of their lives based on their own selected standards (Campbell, Converse, & Rodgers, 1976; Headey & Wearing, 1992). This shared attribute suggests that individuals who select high personal standards may report higher levels of life satisfaction than do individuals who do not select the same level of standards (see Diener, Suh, Lucas, & Smith, 1999, for indirect support of this relationship). One recent study has directly investigated the relationship between high personal standards and life satisfaction. Chang (2000) reported that perfectionism was mildly and negatively related to life satisfaction (accounting for 3% of the variance). Nevertheless, perfectionism in this study was examined as a one-dimensional factor. Given previous findings suggesting that positive mental outcomes are particularly related to adaptive perfectionism (e.g., Ashby & Rice, 2000), additional research is needed to determine how life satisfaction may differ with respect to perfectionist subtypes.
Perfectionism in Children

The majority of research on perfectionism has been conducted with college students or adult samples, with a dearth of scholarship investigating the construct among adolescent samples. The little research that has been conducted with this age group has focused primarily on gifted students (Parker, 1997, 2000; Parker & Adkins, 1995; Parker & Stumpf, 1995) and has revealed empirical support for the multidimensionality of perfectionism (Parker, 1997). Nevertheless, research has rarely investigated the construct among a general sample of adolescent students. This paucity of research is interesting given the belief that perfectionism is not specific to high intellectual ability (Nugent, 2000) and is not in keeping with the assertions of various authors (e.g., Baker, Terry, Bridger, & Winsor, 1997; Cowen, 1994; Nugent, 2000; Roesser, Midgley, & Urdan, 1996; Sarason, 1993; Wentzel, 1997) who have argued that healthy emotional development among students is just as important as their intellectual and academic achievements. The study of perfectionism also might be particularly important in the middle school environment where expectations for academic success become more prominent, often to the detriment of fostering supportive and positive school, peer, and family experiences (Eccles & Midgley, 1989; Wentzel, 1997). As Roesser et al. (1996) stated, “At a time when adolescents are known to be sensitive about how they appear to others, middle schools emphasize relative ability . . . in learning situations” (p. 408).

Purpose for the Study

Because very little is known of the relationship between perfectionism and adolescent life satisfaction, a sample of middle school students (i.e., in Grades 6 through 8) completed the APS-R (Slaney et al., 2002) and the Multidimensional Students’ Life Satisfaction Scale (MSLSS; Huebner, 1994). The MSLSS was specifically chosen in this study because perfectionism appears to permeate many areas of individuals lives (e.g., relationships with others, parents, and self; Flett & Hewitt, 2002; Frost et al., 1990). Thus, it was important to assess how perfectionism may differentially affect self-reported life satisfaction across various life domains. Two specific aims were explored in this study. First, the APS-R Standards and Discrepancy scales were compared with domains comprising the MSLSS. Second, the APS-R scores were used to identify adaptive, maladaptive, and nonperfectionist students. The MSLSS scores were then compared across each identified group to determine how specific life satisfaction domains might differ as a function of group membership.
METHOD

Participants

As part of a larger study (LoCicero, 2002), a total of 132 middle school students enrolled in three rural middle schools in one school district in the Southeast participated in the study. Individual socioeconomic status for the participants could not be obtained, although the school populations were known to include a wide range of socioeconomic status levels (as determined by school demographic data). The sample was composed of 83 females and 49 males. There were 101 Caucasian students, 24 African American students, and 7 students categorized as “other.” There were 67 sixth graders, 55 seventh graders, and 6 eighth graders (4 students did not report their grade level). Students were between 11 and 15 years of age (mean = 12.31, SD = .87).

Procedure

Approval to collect data was secured through the district superintendent’s office and from each participating school’s principal. Participants in the study were required to obtain parental or guardian permission via a signed informed consent letter and to give their written assent as well. All participants assembled in their respective school cafeterias and were administered the test instruments. The students were instructed to sit with at least one seat separating them from another student. Furthermore, at least one teacher or administrator was assigned a specific testing location to monitor student behavior. Finally, students were presented the instruments in counterbalanced order. These strategies were employed to minimize response conformity and/or order effects. Prior to administration, the directions to each instrument were read aloud, with the researchers remaining throughout the testing session to answer any questions the students had. Students completed the instruments and also answered questions regarding their age, ethnicity, gender, and grade.

Instruments

The APS-R (Slaney et al., 1996) contains 23 items designed to measure adaptive and maladaptive components of perfectionism. Participants respond to the items using a 7-point rating scale (1 = strongly disagree to 7 = strongly agree). The APS-R consists of three scales: Standards (7 items measuring personal standards; e.g., “I have high expectations of myself,” “I try to do my
best at everything I do”), Discrepancy (12 items measuring distress caused by the discrepancy between performance and standards; e.g., “My best just never seems to be good enough,” “I am hardly ever satisfied with my performance”) and Order (4 items measuring degree of orderliness; e.g., “I am an orderly person”). Slaney et al. (1996) reported Cronbach’s coefficient alphas for Standards (.85), Discrepancy (.92), and Order (.68) among a sample of college students. Given the relatively low internal consistency and a lack of utility in classifying perfectionists based on the Order scale, caution was suggested in using this particular scale (Slaney et al., 2002). Thus, only the Standards and Discrepancy scales were used in the present study. Scores for the Standards scale range from 7 through 49, and scores for the Discrepancy scale range from 12 through 84. In the current study, the internal consistencies of the Standards scale (.77) and the Discrepancy scale (.86) were considered adequate for research purposes (Nunnally, 1978). The Pearson correlation between the two scales was –.17, suggesting that each scale was assessing a different and relatively unique aspect of perfectionism. Finally, the readability of the APS-R (using the Flesch-Kincaid analysis; Microsoft Word, 2000) was determined to be at the fourth-grade level, suggesting that the items were easily interpretable for most middle school students.

The MSLSS (Huebner, 1994) is a 47-item self-report instrument that assesses satisfaction across five specific life domains: family (e.g., “My family is better than most”), friends (e.g., “My friends will help me if I need it”), school (e.g., “I look forward to going to school”), living environment (e.g., “I like my neighborhood”), and self (“I am a nice person”) as well as a global subtest (i.e., questions not pertaining to a specific life domain; e.g., “My life is better than most kids”). All questions on the MSLSS are responded to on a 6-point rating scale format (1 = strongly disagree through 6 = strongly agree). Scoring of each domain is obtained by summing the relevant items and then dividing them by the number of items comprising each domain. In addition, all items of the MSLSS are added and divided by the total number of items to form a total satisfaction score. This particular domain forms a second-order factor under which the life-specific MSLSS domains are subsumed (Gilman, Huebner, & Laughlin, 2000; Huebner, Laughlin, Ash, & Gilman, 1998) and assesses students’ general life satisfaction after taking all domains into account. Negatively worded items are reversed keyed so that a higher score is indicative of higher levels of satisfaction. Studies of the MSLSS have consistently demonstrated acceptable psychometric properties across Grades 3 through 12, including stability coefficients ranging from .77 to .86 for the domain scores (Gilman et al., 2000; Huebner & Gilman, 2002), strong evidence of construct validity as indicated by both confirmatory (e.g., Gilman
et al., 2000; Huebner et al., 1998) and exploratory factor analyses (e.g., Dew, 1996), and strong evidence for convergent and discriminant validity (see Gilman & Huebner, 2000; Huebner & Gilman, in press). Table 1 reports the correlations between MSLSS domains. With the exception of the relationship between global and self-satisfaction ($r = .71$, $p < .01$), all domains yielded mild to moderate intercorrelations and were similar to what have been reported elsewhere with middle school students (Gilman & Huebner, 1997).

**Data Analyses**

Bivariate correlations were first computed to determine whether the relationship between the APS-R Standards and Discrepancy scales differed across the MSLSS domains. A hierarchical multiple regression analyses also was conducted using the APS-R Standards and Discrepancy scales (the independent variables) to predict total life satisfaction. Given the sizeable amount of shared variance between the Global and Self-Satisfaction domains, the Total Satisfaction domain was chosen considering that the specific life satisfaction domains form a subordinate factor structure under this second-order factor (Huebner et al., 1998). Analyses of the skewness and kurtosis for all MSLSS domains revealed a moderate negative skew only for the Total Satisfaction domain. Based on recommendations by Tabachnick and Fidell (2001), a logarithmic transformation was applied to this variable before the regression analysis was performed. All variables in the regression equation were standardized, and the Standards and Discrepancy scales were centered and entered on the first step. The product of the predictors was calculated and entered at the second step to assess an interaction effect. The variance inflation factor was computed, and none of the predictor variables had an individual variance inflation factor greater than 2, suggesting little evidence of multicollinearity among the Standards and Discrepancy scales (see Stevens, 1992).

Finally, following the strategy used in previous studies (e.g., Kottman & Ashby, 1999; LoCicero, Ashby, & Kern, 2000), children were placed in adaptive, maladaptive, and nonperfectionist groups based on their APS-R Standards and Discrepancy scale scores. Specifically, given that perfectionism is primarily defined as setting excessively high standards, adaptive perfectionists were students whose Standards score was in the top one-third of that scale’s distribution (mean = 46.54, $SD = 1.45$). Moreover, what distinguishes adaptive perfectionists from maladaptive perfectionists is their relative ability to accept their limitations in consistently meeting their high standards. Thus, in addition to their high Standards score, adaptive perfectionists were
<table>
<thead>
<tr>
<th>Living</th>
<th>Global</th>
<th>Family</th>
<th>Friends</th>
<th>School</th>
<th>Environment</th>
<th>Self</th>
<th>Total</th>
<th>Standards</th>
<th>Discrepancy</th>
<th>Mean</th>
<th>SD</th>
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<tr>
<td>Global</td>
<td>.29**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>4.45</td>
<td>1.17</td>
</tr>
<tr>
<td>Family</td>
<td>3.88</td>
<td>0.62</td>
<td>.20*</td>
<td>.13</td>
<td>.21*</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>4.03</td>
<td>0.46</td>
</tr>
<tr>
<td>Friends</td>
<td>.35**</td>
<td>.05</td>
<td>.12</td>
<td>.11</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>3.55</td>
<td>0.66</td>
</tr>
<tr>
<td>School</td>
<td>.48**</td>
<td>.25**</td>
<td>.11</td>
<td>.48**</td>
<td>.41**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>4.96</td>
<td>0.93</td>
</tr>
<tr>
<td>Living environment</td>
<td>.58**</td>
<td>.57**</td>
<td>.58**</td>
<td>.88**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>4.03</td>
<td>0.43</td>
</tr>
<tr>
<td>Self</td>
<td>.71**</td>
<td>.45**</td>
<td>.15</td>
<td>.48**</td>
<td>.41**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>3.55</td>
<td>0.66</td>
</tr>
<tr>
<td>Total</td>
<td>.84**</td>
<td>.48**</td>
<td>.15</td>
<td>.58**</td>
<td>.88**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>4.96</td>
<td>0.93</td>
</tr>
<tr>
<td>Standards</td>
<td>.45**</td>
<td>.31**</td>
<td>.24**</td>
<td>.29**</td>
<td>.18*</td>
<td>.38**</td>
<td>.42**</td>
<td>—</td>
<td>—</td>
<td>39.71</td>
<td>6.90</td>
</tr>
<tr>
<td>Discrepancy</td>
<td>−.50**</td>
<td>−.38**</td>
<td>−.29**</td>
<td>−.22**</td>
<td>−.35**</td>
<td>−.25**</td>
<td>−.36**</td>
<td>−.17</td>
<td>—</td>
<td>41.70</td>
<td>14.31</td>
</tr>
</tbody>
</table>

NOTE: MSLSS = Multidimensional Students’ Life Satisfaction Scale; APS-R = Almost Perfect Scale–Revised.
*p < .05. **p < .01.
students whose Discrepancy score was in the bottom one-half of that scale’s distribution (mean = 27.75, SD = 6.59). Maladaptive perfectionists, on the other hand, were students who met the same high Standards scale score criterion but whose Discrepancy scale score was in the top one-half of that scale’s distribution (mean = 46.38, SD = 1.38 for Standards and mean = 52.46, SD = 11.03 for Discrepancy). Nonperfectionists were students whose Standards score was below the top one-third of that scale’s distribution (mean = 31.00, SD = 6.25). Through this categorization method, 29 adaptive perfectionists (22% of the sample), 17 maladaptive perfectionists (12% of the sample), and 67 nonperfectionists (50% of the sample) were identified. The breakdown of each group was very similar to previous studies using college students (e.g., LoCicero et al., 2000).

Identifying the three groups was also computed by moving the cutoff of the Discrepancy scale from the top one-half of the scale’s distribution to the top one-third, which is identical to that of the Standards scale. In this way, the cutoff scores were equal across both APS-R scales. The data from this particular analysis was virtually identical to what was obtained using the more established cutoff criterion (Kottman & Ashby, 1999). Thus, the more established cutoff scores (upper one-third for Standards and upper one-half for Discrepancy) were used in the study. Because of the unequal cell sizes across groups, a homogeneity of variance was conducted. Results of Box’s M test of homogeneity were found to be significant, \( F(42, 6,907) = 1.52, p < .05 \). With the identified groups serving as the independent variable, the data were analyzed using a multivariate analysis of variance (MANOVA), with the domains comprising the MSLSS serving as dependent variables. Given the statistical concerns regarding the high correlation between Global and Self-Satisfaction and considering that one of the primary questions of interest in this study was to investigate how perfectionist subtypes may differ across specific life satisfaction domains, the Global domain was excluded from the analysis. The Pillai’s Trace served as the chosen omnibus test.

RESULTS

Pearson bivariate correlations between the APS-R Standards and Discrepancy scales and the MSLSS domains are presented in Table 1. Significant, positive relationships were noted between the Standards subscale and all MSLSS domains, with correlations ranging from .18 (Living Environment, \( p < .05 \)) to .45 (Global, \( p < .05 \)). Conversely, significant negative correlations were noted between the Discrepancy subscale and all MSLSS domains, ranging from –.22 (School, \( p < .05 \)) to –.50 (Global, \( p < .05 \)).
Results of the hierarchical regression revealed that after Step 1, $F(2, 111) = 23.48, p < .000$, and after Step 2, $F(3, 111) = 17.63, p < .000$. Altogether, the model accounted for 30% of the variance (29% adjusted) between the Standards and Discrepancy subscales and their prediction of the MSLSS Total domain, whereas an additional 4% (3% adjusted) of the variability was explained by the interaction term. The change in $R^2$ after Step 2 was significant ($p < .05$). Analysis of the standardized beta weights found that both Standards and Discrepancy were both significant and unique predictors of total satisfaction (at the .05 level) after both steps were completed ($\beta = .41$ and $.45$, $sr^2 = .44$ and $.47$ for Standards and $\beta = -.31$ and -.34, $sr^2 = -.34$ and -.37 for Discrepancy after Step 1 and Step 2, respectively). The interaction term was also significant after Step 2 ($\beta = .17$, $sr^2 = .17$, $p < .05$).

Table 2 reports the means and standard deviations of the satisfaction domains by perfectionism group as well as the individual univariate test results. Results of the MANOVA revealed a significant main effect, Pillai’s Trace $= .16$, $F(5, 106) = 1.90, p < .05$. The magnitude of the differences between groups was .09. Univariate tests were statistically significant for the MSLSS Self-Satisfaction domain. An analysis of Tukey’s pairwise comparisons revealed that adaptive perfectionists and maladaptive perfectionists reported significantly higher self-satisfaction ratings did than the nonperfectionist group. This particular finding yielded the greatest magnitude of difference ($ES = .14$). No other significant differences across groups were found with respect to the other life satisfaction domains.

**DISCUSSION**

The results of the present study yielded a number of findings. First, there was a positive and significant relationship between the setting of personal standards and all MSLSS domains. In addition, the inability to consistently meet these standards was negatively and significantly related to the various life satisfaction domains. These differential relationships were most evident with respect to global satisfaction, a dimension of life satisfaction without reference to any particular life domain that is relatively sensitive to changes in life quality (Bender, 1997). Furthermore, establishing high standards significantly and positively predicted total (overall) satisfaction, whereas perceived difficulties in continually maintaining these high standards was a negative and significant predictor of overall satisfaction. Perhaps most important, insofar as the conceptual underpinnings of perfectionism is concerned, was the finding that the prediction of standards to total life satisfaction varied according to changes in discrepancy. This particular result sug-
**TABLE 2:** MSLSS Means (and standard deviations) by Perfectionism Group With Results of Univariate F Tests, Tukey’s Post Hoc Testing, and $R^2$ as a Measure of Effect Size

<table>
<thead>
<tr>
<th>MSLSS domains</th>
<th>Total Group</th>
<th>Adaptive Perfectionists</th>
<th>Nonperfectionists</th>
<th>Maladaptive Perfectionists</th>
<th>F</th>
<th>p</th>
<th>$R^2$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td>3.64 (.52)</td>
<td>3.57 (.50)</td>
<td>3.70 (.53)</td>
<td>3.48 (.45)</td>
<td>1.51</td>
<td>.22</td>
<td>.03</td>
</tr>
<tr>
<td>Self</td>
<td>4.95 (.92)</td>
<td>5.39 (.60)$^a$</td>
<td>4.68 (1.00)$^b$</td>
<td>5.31 (.59)$^a$</td>
<td>8.41</td>
<td>.00</td>
<td>.14</td>
</tr>
<tr>
<td>Family</td>
<td>3.85 (.62)</td>
<td>3.98 (.40)</td>
<td>3.79 (.70)</td>
<td>3.92 (.60)</td>
<td>1.02</td>
<td>.36</td>
<td>.02</td>
</tr>
<tr>
<td>Living environment</td>
<td>3.54 (.66)</td>
<td>3.59 (.50)</td>
<td>3.46 (.74)</td>
<td>3.71 (.55)</td>
<td>1.04</td>
<td>.36</td>
<td>.02</td>
</tr>
<tr>
<td>School</td>
<td>4.00 (.45)</td>
<td>4.24 (.39)</td>
<td>4.06 (.47)</td>
<td>4.21 (.47)</td>
<td>1.71</td>
<td>.18</td>
<td>.03</td>
</tr>
</tbody>
</table>

**NOTE:** $N = 113$ (adaptive perfectionists = 29, maladaptive perfectionists = 17, nonperfectionists = 67); $F$ test $df = 2,110$ for each univariate comparison; rows with differing superscripts denote significant mean score differences. MSLSS = Multidimensional Students’ Life Satisfaction Scale.
gests that the prediction of high standards to overall life satisfaction is moderated by the perceived difficulty in continually meeting these high standards.

Although these findings provide support for the distinction of APS-R subscales and their relationship with MSLSS domains, it is also important to understand how perfectionist subtypes view their life quality in comparison to students who do not establish comparably high personal standards. The results of the MANOVA found that adolescents who reported high standards, regardless of whether these standards are consistently met, also reported significantly higher self-satisfaction than did adolescents who reported lower standards. The mean ratings on this domain were the highest reported for both perfectionism groups (equivalent to strongly agree). Given that the self-satisfaction items largely assess self-worth (Huebner, 1994), it may be that adolescents who set higher standards maintain a level of self-worth that transcends any distress that occurs when such standards are not met, a speculation that has been discussed elsewhere (Roberts & Lovett, 1994).

Although the significant differences with respect to self-satisfaction provided important information regarding how perfectionism may differentially influence some specific satisfaction domains, the nonsignificant findings across most MSLSS domains was equally telling. Adolescents reported equivalent levels of satisfaction with their families, friends, schools, and living environments regardless of the presence (or absence) of adaptive or maladaptive perfectionist tendencies. These findings run counter to anecdotal claims (e.g., Adderholt-Elliott, 1987; Blatt, 1995), illustrating the negative quality of life attributed to perfectionism (particularly, maladaptive perfectionism). Given that this was one of the first studies to investigate perfectionism among a general sample of middle school students, the generalizability of the findings may be limited. Nonetheless, the results of this study suggest that the effects of perfectionism may not extend to some life domains heretofore presumed as being influenced by the construct—at least from the standpoint of life satisfaction.

Nevertheless, why self-satisfaction significantly differed for the perfectionist group versus the nonperfectionist group presents some cause for speculation. As one hypothesis, not all life domains have equal weight when individuals are asked to report their satisfaction (see Diener, 1994). For example, Gilman et al. (2000) reported that self-satisfaction had one of the highest path coefficients that predicted overall life satisfaction among a group of older (high school) adolescents. If such findings can be extended to middle school adolescents, it may be that the presence of perfectionist tendencies most influences self-satisfaction while contributing less influence on other life domains. Although further empirical studies are certainly needed to validate
the present findings, one important area for further research is to investigate why holding high standards, even in the presence of discomfort when these standards are not met, only appears to influence self-satisfaction while other life satisfaction domains remain unaffected.

The results of the present study are not to minimize previous research that has illustrated some of the negative outcomes of perfectionism, particularly among adults and college students (e.g., Arthur & Hayward, 1997; Hill et al., 1997; Pacht, 1984). The conditions that have been reported, such as depression (Haines, Norris, & Kashy, 1996), anxiety (Flett et al., 1989), and eating disorders (Ruderman, 1986), have been extensively investigated and replicated and are of great concern to clinicians and researchers working with perfectionist individuals. However, a growing trend in psychology assumes that a comprehensive understanding of any psychological construct cannot be formulated from examining only the negative dimension (see Frisch, 1999). Rather, it is as important to understand factors that contribute to psychological well-being in addition to those that contribute to psychopathology (Cowen, 2000). Such assertions have been noted in the perfectionism literature as well (Chang, 2000). The present findings are in agreement with the comments of others (e.g., Accordino et al., 2000; Parker, 2000) who suggest that perfectionism is not always inherently destructive. Indeed, adolescents in this study identified as maladaptive perfectionists reported scores that were consistently (although not significantly) higher than those of nonperfectionists. These findings underscore the need to understand why maladaptive perfectionists, in spite of internal discord related to their inability to meet their high standards, still reported higher levels of positive mental health than did children who established lower self-standards. Such research will not only aid researchers and clinicians in their strategies for how to decrease the distress reported by maladaptive perfectionists but also determine how the establishment of high standards is functionally related to higher life quality. In this way, strategies to help nonperfectionists increase their life satisfaction can be designed and implemented as well.

**Limitations**

Several limitations must be noted. First and as previously noted, the precise definition of perfectionism continues to be debated and is often defined by the instrument used (Parker, 1997). Although this study assessed perfectionism as measured by the APS-R, it is by no means the only multidimensional instrument available. Although a recent conjoint factor analytic study comparing the APS-R with extant multidimensional perfectionism scales (Slaney et al., 2002) revealed highly similar factor loading across similar
constructs, it is important to examine positive mental health variables using other models and measures of perfectionism. Second, the selected satisfaction domains investigated in this study were based on previous theoretical beliefs and empirical findings (see Gilman & Huebner, 2000). It is important to assess how other satisfaction domains (e.g., safety, health, and so forth) might mediate the influence of perfectionism. Third, the results reported herein are based on self-report measures obtained in one environmental context. Using other informants (parents, friends) and employing longitudinal strategies may yield important information concerning fluctuations in satisfaction reports among perfectionists across time. Finally, the findings are based on a sample of students from one school district in the Southeast. Additional samples from various geographical locations are needed to support the generalizability of the findings.

REFERENCES


Address correspondence to Rich Gilman, Ph.D., Department of Educational and Counseling Psychology, College of Education, 245 Dickey Hall, University of Kentucky, Lexington, KY 40506; phone 859-257-9367; e-mail: gilman@uky.edu.