A study was designed to investigate the relationship between coping resources and adaptive, maladaptive, and nonperfectionism in middle school students. An hypothesis was made that maladaptive perfectionists would have significantly fewer coping resources to deal with stress than adaptive perfectionists. One hundred and forty-five middle school students participated in the study. Analysis indicated adaptive perfectionists had significantly higher levels of academic confidence, family support, and peer acceptance than non-perfectionists, and significantly higher levels of social confidence than maladaptive perfectionists. Maladaptive perfectionists scored significantly higher than nonperfectionists on family support. The results support the contention that significant differences exist between adaptive perfectionists, maladaptive perfectionists, and nonperfectionists and their perceived coping resources for stress. Adaptive perfectionists have significantly higher social confidence than their counterparts. The results suggest that differences between adaptive and maladaptive perfectionists may lie in the selective process by which perfectionists attend to their experiences. (Contains 14 references.) (JDM)
Multidimensional Perfectionism and Coping Resources in Middle School Students

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Abstract
This study was designed to investigate the relationship between coping resources and adaptive, maladaptive, and nonperfectionism in middle school students. MANOVA and follow-up analyses indicated adaptive perfectionists had significantly higher levels of academic confidence, family support, and peer acceptance than non-perfectionists, and significantly higher levels of social confidence than maladaptive perfectionists. Maladaptive perfectionists scored significantly higher than nonperfectionists on family support.
Multidimensional Perfectionism and Coping Resources in Middle School Students

Perfectionism has received increased attention in the professional literature (e.g., Blatt, 1995; Vieth & Trull, 1999). Recent research has supported a distinction between adaptive and maladaptive perfectionism in adults (Rice, Ashby, & Slaney, 1997) and adolescents (LoCicero, Ashby, & Kern, in press).

In adults, research has indicated that adaptive perfectionism is associated with several signs of positive mental health. For instance, adaptive perfectionism has been associated with increased levels of self-esteem (Rice, et al., 1997), career decision-making self-efficacy (Ashby, Bieschke, & Slaney, 1997), social self-efficacy and general self-efficacy (LoCicero & Ashby, in press). Conversely, maladaptive perfectionism has been associated with increased levels of depression (Rice, et al.; Rice, 1998), and inferiority (Ashby & Kottman, 1996).

The results of empirical research investigating multidimensional perfectionism in adolescents have been consistent with the findings in adult samples. For instance, Accordino, Slaney, & Accordino (2000) found that adaptive perfectionism in adolescents was significantly associated with increased levels of self-esteem, and that maladaptive perfectionism was associated with increased levels of depression.

Researchers have recently suggested that stress is significantly related to the psychological outcomes of perfectionists (e.g., Hewitt, Flett, & Ediger, 1996). Chang (2000) found that perceived stress mediated the relationship between perfectionism and a variety of negative psychological outcomes. Matheny, Aycock, Curlette, and Junker (1993) maintained that stress occurs when perceived demands are greater than perceived
coping resources. Given that stress appears to mediate the relationship between perfectionism and negative psychological outcomes (e.g., Chang), and that maladaptive perfectionists exhibit significantly greater negative psychological outcomes than adaptive perfectionists, we hypothesized that maladaptive perfectionists would have significantly fewer coping resources to deal with stress than adaptive perfectionists.

Method

One hundred and forty-five middle school students participated in this study. This sample consisted of 61.9% female and 33.3% male, predominantly Caucasian (77.6%) subjects, with a mean age of 13 (minimum 11, maximum 15). Five students did not report their gender. All participants volunteered with their parents’ consent.

Participants in this study completed a demographic sheet, the Almost Perfect Scale-Revised (APS-R; Slaney et al. 1996), and the Coping Resources Inventory Scales for Educational Enhancement (CRISEE; McCarthy, Seraphine, Matheny, & Curlette, 2000). The APS-R is a 23-item inventory with three subscales measuring dimensions of perfectionism. The subscales include: Standards, Order and Discrepancy. Slaney et al. has provided reliability data and convergent and divergent validity for the APS-R. The CRISEE is a 99-item inventory designed to measure coping resources in youth. The six subscales of the CRISEE identify: Social Confidence, Behavior Control, Peer Acceptance, Academic Confidence, Family Support, and Responsibility. McCarthy et al. has provided support for the reliability and construct validity of the CRISEE.

Results

In this sample, as in previous studies (e.g., Ashby & Kottman, 1996; LoCicero & Ashby, & Kern, in press), the researchers identified perfectionists as participants whose
scores on the Standards subscales of the APSR fell above the 67th percentile (in the top third of the sample). The researchers used a median split on the Discrepancy subscale of the APSR to distinguish between maladaptive perfectionists and adaptive perfectionists. Maladaptive perfectionists were identified as those participants with high Standards scores (above the 67th percentile) and high Discrepancy scores (above the median split for the entire sample). Adaptive perfectionists were identified as those participants with high Standards scores (above the 67th percentile) and low Discrepancy scores (below the median for the entire sample). Through this categorization process, the researchers identified 35 adaptive perfectionists (24.1% of the sample), 22 maladaptive perfectionists (15.2%), and 88 nonperfectionists (60.7%).

Data were analyzed using a one-way multivariate analysis of variance (MANOVA). The between subjects factor was perfectionism (adaptive perfectionists, maladaptive perfectionists, and nonperfectionists). The dependent variables were the Academic Confidence, Social Confidence, Family Support, Peer Acceptance, Behavior Control, and Responsibility subscales of the CRISEE.

The one-way multivariate test for perfectionism was significant, Pillai-Bartlett trace $(12, 276) = 2.951, p < .001$. Three subsequent univariate analyses of variance (ANOVA) revealed significant differences between perfectionism type and CRISEE subscale scores. Specifically, Adaptive perfectionists scored significantly higher than Nonperfectionists on the Academic Confidence $(F = 6.38; p = .01)$, Family Support $(F = 20.04; p < .001)$, and Peer Acceptance $(F = 15.10; p < .001)$ subscales of the CRISEE. The second one-way ANOVA revealed that Adaptive perfectionists scored significantly higher than Maladaptive perfectionists on the Social Confidence $(F = 6.09; p = .01)$.
subscale of the CRISEE. Third, Maladaptive perfectionists scored significantly higher than nonperfectionists on the Family Support (F = 10.39; p = .002) subscale of the CRISEE. The means and standard deviations for the dependent variables for each group appear in Table 1.

Discussion

The purpose of this study was to investigate the relationship between perfectionism and coping resources for stress in middle school students. The results support the contention that significant differences exist between adaptive perfectionists, maladaptive perfectionists and nonperfectionists and their perceived coping resources for stress with the exception of Behavior Control and Responsibility. While there was only one significant difference between adaptive and maladaptive perfectionists (Social Confidence), Academic Confidence and Peer Acceptance appear to warrant further investigation in exploring the nature of differences between these two types of perfectionists. Nonetheless, the finding that Adaptive perfectionists have significantly higher Social Confidence than their counterparts is consistent with previous studies conducted with adult samples. For instance LoCicero and Ashby (in press) found adaptive perfectionists to have significantly higher self-reported social self-efficacy than maladaptive perfectionists. Differences between adaptive and maladaptive perfectionists may lie in the selective process by which perfectionists attend to their experiences. It might be that adaptive perfectionists focus on the more positive aspects of their performance than their counterparts and, therefore perceive themselves as more successful.
Table 1

CRISEE Means and Standard Deviations by Perfectionism Group with Results of Univariate F tests and $r^2$ as a Measure of Effect Size.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Adaptive(^a)</th>
<th>Maladaptive(^b)</th>
<th>Nonperfect(^c)</th>
<th>F</th>
<th>p</th>
<th>$r^2$</th>
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<td></td>
<td>(N = 35)</td>
<td>(N = 22)</td>
<td>(N = 88)</td>
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<tr>
<td>Academic Confidence</td>
<td>11.36(^a)</td>
<td>9.75 (\text{b})</td>
<td>8.78(^a)</td>
<td>10.29</td>
<td>.000</td>
<td>.13</td>
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<tr>
<td>Social Confidence</td>
<td>9.96(^b)</td>
<td>6.77(^b)</td>
<td>7.38</td>
<td>8.02</td>
<td>.001</td>
<td>.10</td>
</tr>
<tr>
<td>Family Support</td>
<td>11.75(^c)</td>
<td>11.27(^d)</td>
<td>9.42(^ed)</td>
<td>8.45</td>
<td>.000</td>
<td>.11</td>
</tr>
<tr>
<td>Peer Acceptance</td>
<td>9.77(^e)</td>
<td>8.38 (\text{e})</td>
<td>7.96(^e)</td>
<td>5.25</td>
<td>.006</td>
<td>.07</td>
</tr>
<tr>
<td>Behavior Control</td>
<td>11.56</td>
<td>10.09 (\text{e})</td>
<td>9.87 (\text{e})</td>
<td>4.55</td>
<td>.112</td>
<td>.03</td>
</tr>
<tr>
<td>Responsibility</td>
<td>8.76</td>
<td>8.12 (\text{f})</td>
<td>7.52 (\text{f})</td>
<td>5.12</td>
<td>.007</td>
<td>.07</td>
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Note. N = 145. Superscripts denote significantly different perfectionism types.
References


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August 2001

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