



The Relationship and Influencing Mechanism Between Perfectionism and Mental Disorder

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Abstract. Since 1989, perfectionists and mental disorders have increased simultaneously. With the development of the internet, they have easy access to more dimensions of information, which leads to more aspects of themselves that people can criticize and criticize by others in a rigorous evaluation. The present review organizes that each type of perfectionism that appears in the Multidimensional Perfectionism Scale is specifically associated with a mental disorder, and how other factors that integrate with perfectionism traits can negatively promote mental disorders. For instance, self-oriented and socially prescribed perfectionism promote depression and eating disorder by either focusing on or criticizing only flawed parts of oneself. Also, the other-oriented perfectionism is particularly related to narcissistic personality disorder because of the similarity such that both traits lead to focus more on themselves. For the limitation, previous research has frequently mentioned the study population's choice. Most research examines experiments on a sample with the following characteristics: Western, educated, industrialized, rich, and democratic (W.E.I.R.D.), which did not illustrate the cultural generality and human universals. A comprehensive and diverse sample is needed for future research to avoid one-sidedness.

Keywords: Perfectionism · Multidimensional Perfectionism Scale · mental disorder

1 Introduction

As the internet becomes more assessable over time, the information people can obtain are much larger than before. At the same time, all the traits that people pursue are visualized, such as delicate features, enviable body shape, and luxurious lifestyle. As a result, perfectionism has become a popular topic. Since Hewitt and Flett [1] proposed the Multidimensional Perfectionism Scale (MPS), which includes three-component, self-oriented, other-oriented, and socially prescribed perfectionism, a large number of research demonstrates the effect each element has on people. In a meta-analysis with 164 samples of 41,641 college students on American and Canada, Curran and Hill [2] found varying degrees of increase in each type of perfectionism. Also, Curran and Hill explain a change in culture that a more competitive, advocate meritocracy, and anxious-orient parenting results in high standard society, and therefore college students find it harder to survive than the previous generation without raising their requirements for themselves.

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The increase in perfectionists may improve the development of society, but it can raise the incidence of mental illness.

As the number of perfectionists increases, the causing mental disorder also synchronized increase. The data of World Health Organization in 2017 shows that a large number of people who suffer from severe mental disorders have increased widely. Recent research shows that many patients have a high perfectionism level [3]. In particular, perfectionism is associated with depression, eating disorders, and narcissistic personality disorder, which is the main focus of the current review. Hewitt et al. [4] addressed the relationship between perfectionism and depression and the relevance model and treatment. They also state that perfectionists are vulnerable to depression, which validates Hewitt and Flett's [5] points of view. As people become accustomed to social media, Curran and Hill [2] stressed that an increasing number of people tend to gain approval by perfecting themselves. These young people may feel dissatisfied compared to others online regarding body shape. Stice [6] warns that it is a sign of an eating disorder, which can be relatively common and underlie the current environment. Although narcissistic personality disorders are less developed than contemporary mental disorders (e.g., depression and anxiety), the research shows that it is only related to other-oriented perfectionism among the three-component [7]. In order to ensure an understanding of each type of perfectionism, the current paper will examine narcissistic personality disorder. Most of the previous studies did mention the relationship between perfectionism and mental disorder. However, they did not systematically discuss what might cause perfectionists to diagnose as having a mental illness in terms of MPS, which will be briefly mentioned in the current paper.

The current paper is interested in the relationship between each type of perfectionism and mental disorder, specifically what cause people to diagnose these mental disorders and what role perfectionism play during pathological development. The research first introduces the types of perfectionism, followed by the problem that perfectionism brings. Next, the paper will briefly discuss the influencing mechanism corresponding to the introduction part.

2 Category

In the following section, this paper will briefly illustrate the definition of each type of perfectionism, followed by the relationship between the related mental disorder and the corresponding perfectionism.

2.1 What is Self-oriented Perfectionism (SOP)?

2.1.1 What is Self-oriented Perfectionism (SOP)?

The term self-oriented perfectionism (SOP) was discussed by Hewitt and Flett [1] as one of the components of perfectionism. They defined it as the requirement of oneself to pursue perfection overwhelmingly with high standards. The definition addresses the level of standard people set up for themselves. Lately, Smith et al. [8] point out that SOP is the obsession to accomplish or achieve tasks perfectly. By contrast, Smith focuses on how people repeatedly pursue perfection through intuitive thinking. Besides, SOP

stresses that people have a rooted motivation from themselves, which drives them to meet the unrealistic self, which is perfect and has no defects [1].

2.1.2 Self-oriented Perfectionism and Depression

According to the definition mentioned above, SOP can cause people narrow people's perspectives to focus only on their shortcomings, which may lead to depression among people. In a study, Hewitt and Flett [1] conducted an experiment based on more than 30 patients with mental disorder (e.g., unipolar depression, anxiety) and found a high correlation between depressed patients and SOP compared to the control group. The experiments suggest a strong connection between Depression and SOP. Specifically, based on research from the University of British Columbia, Hewitt et al. [9] found a unique relationship between SOP and chronic unipolar symptoms. Furthermore, over-rumination could lead to Depression caused by self-oriented perfectionism [10]. As people desire to be perfect, they tend to overthink their flaws, which Felt et al. Indicates that rumination could be a bridge to link the SOP and Depression. They argue that the rumination is a mediator that paves the way for Depression.

2.1.3 Self-oriented Perfectionism and Eating Disorder

Self-oriented perfectionism is related to several symptom of eating disorder. Sherry et al. [11] use the Eating Disorder Inventory Perfectionism sub-scale and clarify that SOP is an independent variable related to the eating disorder. Additionally, SOP is the sole reason people maintain a morbid relationship with food and develop bulimia nervosa. Bardone-Conne [12] conducted a study based on 406 females and found a high correlation between SOP and bulimia nervosa. The results suggest that people who expect perfection also tightly control how they consume food in an extremely unhealthy way. Other symptoms also proved to be uniquely affected by SOP, such as dieting [12] and dietary restraint [13].

2.2 “Other-oriented” Perfectionism (OOP)

2.2.1 What is Other-oriented Perfectionism (OOP)?

Compared to SOP, other-oriented perfectionism (OOP) is the attitude toward others, which can be a reflection of oneself [1]. In this context, the pressure to be perfect has expended from oneself to people around him. Hewitt and Flett [5] describe this pressure as an unrealistic expectation, and the affected people tend to be family and close friends. In addition to the basic definition, Striker et al. [14] finds that people with other-oriented perfectionism lack empathy and social skills in everyday life. This finding indicates that OOP has a characteristic of disagreeableness from an objective point of view.

2.2.2 Other-oriented Perfectionism and Narcissistic

Not all types of perfectionism are closely related to Depression. Other-oriented perfectionism was only related to chronic bipolar symptoms within the classification of Depression [9], but OOP was uniquely correlated to narcissistic personality disorder

[15]. Narcissism is commonly characterized by having an arrogant ego and thinking only of himself most of the time. Not only themselves, Sherry et al. [7] further suggest that narcissists arrogantly think that they can dictate to others and demand perfection from them. Therefore, in a study with a sample of 983 undergraduates, Sherry et al. [7] investigated the hypothesis that other-oriented perfectionism is tightly related to narcissism by preventing distraction from self-oriented and socially prescribed perfectionism. The research results support the argument that narcissism is only related to OOP. The findings imply an overlap feature among these two characteristics, which is a latent need to control others. Also, this feature only appears on OOP. In another study, McCown and Carlson [16] find that OOP has more effect on cocaine-abusing narcissists than on mood disorders. The result demonstrates that the expectation of perfection from others has a higher priority psychologically than emotion among Narcissistic Personality Disordered clients.

2.3 Socially Prescribed Perfectionism (SPP)

2.3.1 What is Socially Prescribed Perfectionism (SPP)?

People could require themselves to meet a high standard, and, sometimes, these expectations can also come from society. Hewitt and Flett [1] describes that socially prescribed perfectionism (SPP) is how people are aware of others' need for perfectionism toward them. In 1993, Hewitt and Flett [5] further elaborated that the need for perfectionism from them and achieving it may bring more pressure and a sense of depression.

2.3.2 Socially Prescribed Perfectionism and Depression

A considerable body of evidence demonstrates the importance of socially prescribed perfectionism in relating to Depression. According to the early work done by Hewitt and Flett [5], they experimented with a sample of 51 patients with unipolar depression. They found that socially prescribed perfectionism and depression disorder are highly correlated, caused explicitly by the interpersonal stress and achievement stress they hold. The finding shows how a problem could become complex when other people are involved and harmful to an individual psychologically. Not only the clinical populations, O'Connor et al. [17] found that SSP also correlated with Depression in people without mental health issues. SPP is also highly related to hurting oneself [17]. In the face of the outside world's need for perfection, people may use self-harm to relieve pressure or express dissatisfaction with themselves.

2.3.3 Socially Prescribed Perfectionism and Eating Disorder

A large number of researches suggest that socially prescribed perfectionism is related to a variety of eating disorders. Bardone-Cone [12] investigated the effect of different types of perfectionism on eating disorders in a young woman, and they found a unique variance of bulimic symptoms affected by SPP after controlling the level of other mental illnesses (e.g., depression and anxiety). In another study, SPP was also scientifically proved to be correlated with the increase in binge eating the next day [18]. The consistency alone two studies show that SPP could cause people to lose control of how much they eat,

which may help with reducing anxiety. Besides, Dawson and Thornberry [19] also find a correlation between SPP and anorexic symptoms described by low body weight and a severe fear of attaining weight. However, SPP only accounts for a tiny percent (less than 1%) of these symptoms [13]. Dawson and Thornberry find the opposite effect that the first two study does, which Lampard proved that the relationship is relatively weak.

3 Influencing Mechanism

The following section elaborates on the pathological factors that explain the confounding variable regarding each type of perfectionism to a related mental disorder.

3.1 Depression

3.1.1 The Difference Between SOP and SPP

As mentioned above, the roots of SOP and SPP are not the same, which affect by several different mindsets. People with SOP are strict with themselves and can easily make negative comments about themselves because of an incident. Hewitt and Flett [1] addressed that strict requirement of people with SOP on tasks may easily perceive the feeling of failure, which affect many aspects on personal levels, such as self-worth, self-esteem, and understanding of failure experiences. These people link the dissatisfied event to several characteristics, which magnifies the severity of small failures [1]. Therefore, their self-evaluations are constantly immersed in a negative state. Hewitt and Flett [1] point out that punitive self-evaluations play an essential role in linking the SOP and depression. By contrast, socially prescribed perfectionist accepts the requirement for perfection from others and therefore expects a positive evaluation from others. With this expectation, they become sensitive to criticism [5]. And obsessive about others' approval [5, 9, 20]. O'Connor [17] suggests that adolescence who are SPP and not well developed in dealing with failure are more likely to be depressed and think of suicide. O'Connor implies that the proper way of interpreting failure is one of the obstacles for the perfectionist, whether the failure is on one's standards or others' need for perfection.

3.1.2 The Shared Feature Between SOP and SPP

Overthinking is one of the most significant common features that SOP and SPP share. Flett et al. (2016) stressed that rumination could negatively affect people with SOP and SPP. Also, they constantly worry about what might happen in the future, which may stick in the thought. Besides, Flett et al. [10] assume that perfectionists' most of the thinking is automatic, which did not through the rational construct. The assumption is reasonable because the solution for unrealistic goals and the others' judgment is uncertain to a perfectionist. The fear of the unknown leads to intense disconfirm. As a result, they cannot rationalize the consequences, and therefore the automatic reaction becomes a way to face the problems in perfectionist's daily life.

3.2 Eating Disorder

3.2.1 The Interconnection Between Self-oriented Perfectionism and Bulimia Nervosa

Self-oriented perfectionism (SOP) affects how people with bulimia nervosa think of themselves. Bardone-Cone [12] finds that avoiding negatively critical themselves motivates teenagers with SOP to restrict how much they eat and what they eat. The facts imply that self-critical is harmful to them physically, which is relative to the negative effect of SOP. Stice [6] suggests that the negative effect of SOP is the intermediary between negative evaluations and bulimia nervosa. Also, the criticism toward oneself relates to the unwilling standards they set for themselves [13]. Potentially, they cannot achieve their unrealistic goal, and therefore they criticize themselves instead of giving up. Based on Lampard's findings, self-oriented perfectionists with bulimia nervosa may frequently experience cognition dissonance. In other words, they perceive that eating a large amount of food contradicts the high standards regarding weight, which results in self-criticism and feeling shame.

3.2.2 In Which Way Does Socially Prescribed Perfectionism Affect Binge Eating?

Several factors could support socially prescribed perfectionism to develop binge eating. Sherry and Hall [21] explain a number of meaningful reasons for two factors from the Perfectionism Model of Binge Eating (PMOBE). They state that socially prescribed perfectionists with binge eating cannot fulfill others' expectations because of unlimited consume food, followed by the negative evaluation from others. Over time, the dilemma leads to a disconnect from the surrounding people and produces a sense of loneliness. Sherry and Hall [21] suggest that people in such situations may result in mental disorders, such as eating disorders. In this case, food can serve as a comfort for not meeting the standards of others and for feelings of isolation, and the more intense the discomfort, the more food is eaten.

3.3 Narcissistic Personality Disorder

Other-oriented perfectionists focus more on who they are rather than what they may gain [22], which shares a similar feature with a narcissist. The remarkable similarity is also demonstrated in behaviours. Stoberber [22] also suggests that aggressive humor can be a socially accepted tool to disapproval others. The behaviour shows that they are arrogant and implying others to change according to their expectations. However, their criticism is not a concern for others, but Stoberber argues that a lack of interest in others illustrates a low prosocial motivation. In general, narcissists with perfectionist traits need to work harder to beautify themselves to maintain their self-esteem, such as showing their achievements. Ronningstam [23] suggests that narcissists' value depends on external achievements. Therefore, it may be reasonable to expect a perfect version of others since narcissists have rigorous standards for themselves. McCown and Carlson [16] further explains that narcissists with perfectionism pursue perfection because they are motivated by being appreciated as a perfect version.

4 Conclusion

The present article discusses three types of perfectionism in the Multidimensional Perfectionism Scale. The paper summarized the previous research on the correlation between each type of perfectionism with a mental disorder, and from a more analytical perspective that describes how other factors that integrate with perfectionism traits can negatively promote mental disorders. Overall, the article underscores the importance of how different each type of perfectionism is and the intrinsic motivation leading to mental illness. For the limitation, previous research has frequently mentioned the study population's choice. Most research examines experiments on a sample with the following features: Western, educated, industrialized, rich, and democratic (W.E.I.R.D.), which does not illustrate the cultural generality and human universals. A comprehensive and diverse sample is needed for future research to avoid one-sidedness. Besides, the research method is limited to self-report, which may cause the inaccurate result. Future research may combine the self-report with another research method, such as a questionnaire or interview.

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