

## EVALUATION OF PERFECTIONISM AND ITS RELATIONSHIP WITH HARDINESS AND MENTAL HEALTH IN STUDENTS OF JAHROM UNIVERSITY OF MEDICAL SCIENCES

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### ABSTRACT

Introduction: perfectionism has both positive and negative dimensions. Each dimension is associated with different aspects of human psychology. The present study aimed to investigate perfectionism and its relationship with hardiness and mental health in students of Jahrom University of Medical Sciences.

**Methods:** This was a descriptive cross-sectional study, which aimed to evaluate perfectionism (positive and negative) and its relationship with hardiness and mental health in students of Jahrom University of Medical Sciences in 2013. The statistical population consisted of 200 students. Data collection tools were three questionnaires or perfectionism, hardiness and mental health. The collected data was analyzed using descriptive statistical tests (frequency, mean and standard deviation), SPSS 11, Kolmogorov-Smirnov tests and non-parametric tests at  $p < 0.05$  significance level.

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**Findings:** the results showed a significant correlation between positive perfectionism and hardiness ( $r = 0.3$  and  $p = 0.02$ ). There was no significant difference between scores of perfectionism (positive and negative), mental health and hardiness based on field of study of the students.

**Conclusion:** it is recommended to implement useful programs in order to strengthen positive perfectionism among students.

**Keywords:** perfectionism, hardiness, mental health, medical students

## 1. INTRODUCTION

Perfectionism refers to an irrational belief that force people to think that everything should be perfect, whether themselves or their surrounding environment. They believe that they should perform their tasks perfectly and flawlessly; otherwise, they are losers. In such circumstances, the individual endeavor to be perfect instead of successful [1]. Learning is an effective factor in perfectionism that teaches the individuals to respect themselves if they were accepted by others. They believe that their only option in life is perfectionism, so that they can defend and support themselves and get rid of being criticized by others [1]. Desiring ambition and success is associated with excessive critical self-assessment and lack of self-confidence. Perfectionists believe that any mistake is equivalent to failure. These extreme measures usually cause failure, anxiety, anger, helplessness and hopelessness, which are associated with suicidal thoughts and depression. The above-mentioned attitudes are effective in mental health, which refers to complete physical, mental and social well-being and not merely absence of disease. A perfect individual has attained the highest forms of humanity in spirituality, morale, etc. but a healthy man moves towards the right direction in life and leads a healthy lifestyle. A perfect individual is healthy too but most healthy individuals that seek perfection may be far away from the right path of perfection (a perfect individual is healthy too but a healthy individual may not be perfect too because healthy people may not know how to be perfect and may have step into the wrong path towards perfection) [2]. Health is defined as growth and productivity, realization of talents in a flawless manner without erosive efforts. Healthy individuals attempt to explore their talents and abilities to be physically and mentally grown and productive (healthy individuals take advantage of their potential during growth in order to be productive in their lives) [2]. It should be noted that idealistic states are associated with hardiness (resiliency). Hardiness is defined as self-assessment based on individual capabilities in order to evaluate and interpret external circumstances and pressures to be able to deal with these problems in a positive and healthy manner. The results of a study showed a

significant and positive correlation between negative perfectionism and physiological responses including systolic and diastolic blood pressure, respiration rate and heart rate. The results also showed a significant and negative correlation between hardiness and physiological responses. There was also a negative and insignificant correlation between positive perfectionism and physiological responses. Negative perfectionism enhances physiological responses by imposing anxiety, uneasiness, distress and negative emotions. Hardiness affects physiological responses by enhancing self-confidence, assurance and tranquility [3]. The results of a study showed a negative relationship between negative perfectionism and psychological well-being. There was also a positive relationship between negative perfectionism and psychological distress. Others showed that positive perfectionism positively affects mental health through strengthening positive psychological states (e.g. self-esteem and self-confidence) and individual characteristics (e.g. pragmatism, acceptance of personal restrictions and personal achievement as aligned with satisfaction in life). Negative perfectionism negatively affects mental health through weakening self-esteem and self-confidence and such personal characteristics as unrealistic expectations, lack of acceptance of personal restrictions, inflexibility and personal achievements as not aligned with satisfaction in life [4]. Besharat showed that positive perfectionism is positively correlated with mature defense mechanisms and negatively correlated with immature and neurotic defense mechanisms. Conversely, negative perfectionism is negatively correlated with mature defense mechanisms and positively correlated with neurotic and immature defense mechanisms. Positive perfectionism motivates the individual to use mature defense mechanism through strengthening individual capabilities, namely pragmatism, acceptance of personal restrictions, reduced failure and enhanced positive thinking and mental health indicators (5). In another study, the relationship between perfectionism and Type D personality was examined in elderly. The results of the former study showed positive perfectionism and Type D personality are significantly correlated with general health. Multiple regression analysis showed that 49% of general health is explained by positive perfectionism and Type D personality (6). The relationship between perfectionism and success in sports was examined in another study. The results of the former study showed that positive perfectionism is positively correlated with success in sports and negative perfectionism is negatively correlated with success in sports. However, only positive perfectionism can significantly predict success in sports. Positive perfectionism enhances success in sports through strengthening such personal characteristics as pragmatism, acceptance of personal restrictions, flexibility, personal achievements as aligned with satisfaction in life, self-esteem, self-confidence and positive perceptions of

external supports and social assessments (7). Given that perfectionism has positive and negative dimensions and each dimension is associated with different aspects of human psychology, the present study aimed to investigate the relationship of positive and negative perfectionism with resilience (hardiness) and mental health of students. It is important to study idealism, perfection and relative dimensions among students since they respect cultural and social values and desire academic and social attainment. Therefore, it is imperative to assess both dimensions of perfectionism and its relationship with hardiness (effort, control, commitment and responsibility for personal problems) to fulfill wishes and desires. On the other hand, idealistic thoughts can alter mental health, either enhance or threaten mental health. This multidimensional study aimed to investigate the relationship of perfectionism with mental health and hardiness. Mental health and hardiness are two important aspect of students' lives.

## 2. MATERIALS AND METHODS

This was an analytical and cross-sectional study, which aimed to assess perfectionism (positive and negative) and its relationship with hardiness and mental health among college students. Data collection tools consisted of three questionnaires of perfectionism, hardiness and general health (mental health). The questionnaires were distributed among 200 students in School of Nursing and Paramedicine in Jahrom University of Medical Sciences by the author according to statistical consulting theory. Eligible individual were selected using stratified random sampling method. The participants consisted of 114 students of nursing, 46 students of operating room nursing, 53 students of anesthesiology and 38 students of medical emergency. Terry-Short et al. developed Positive and Negative Perfectionism Scale in 1995. The scale measures perfectionism from functional and behavioral perspective. This scale was developed to detect positive and negative perfectionism. The scale consists of 40 items. A five-point Likert scale (completely agree to strongly disagree) was used to score the items. The range of scores varied from 20 to 100. Internal consistency of the positive perfectionism scale was 90% and internal consistency of the negative perfectionism scale was 87% (8). General Health Questionnaire (GHQ) was developed by Goldberg in 1972. Henderson (1990) believed that GHQ is the best known psychiatric and psychological screening tool that largely contributes to research and development. The questionnaire consists of 28 items. A four-point Likert scale (not at all – more than usual) was used to score the items. Range of scores varied from 0 to 84 (9). Hardiness Inventory was prepared and validated by Kiamarsi (1998). Ahwaz Psychological Hardiness Inventory is a self-report paper-and-pencil scale with 27 items. The

items were scored using a five-point scale (never, rarely, sometimes and often). The inventory was distributed among the participants after explaining the research objectives and offering adequate information to the students who were willing to participate in the study. The students filled out the inventory and the author collected the filled out inventories. The collected data was analyzed using descriptive statistics (e.g. frequency, mean and standard deviation) with SPSS (10). Kolmogorov test results showed that distribution of scores of stress and depression is not normal. Thereby, non-parametric tests were used.

### 3. FINDINGS

In this study, 182 students of Jahrom University of Medical Sciences were assessed in 2012. Moreover, 128 students were males (70.3%) and 54 students were females (29.7%). Furthermore, 81 participants were nursing students (44.5%), 33 participants were students of operating room nurses (18.1%), 37 participants were students of anesthesiology (20.3%) and 31 participants were students of medical emergency (17%).

**Table 1.** Mean scores of research variables in students of Jahrom University of Medical Sciences

Positive perfectionism	51.9 ± 10.6
Negative perfectionism	54.9 ± 10.3
General mental health	47.02 ± 14
Dimension of somatic symptoms	44.9 ± 20.1
Dimension of social dysfunction	47.8 ± 19.1
Dimension of depression	48.6 ± 19.8
Dimension of anxiety	46.9 ± 17.4

**Table 2.** Assessment of the relationship of perfectionism with hardiness and mental health in two groups of male and female students of Jahrom University of Medical Sciences

Variable	Mean	Standard deviation	p-value

Positive perfectionism	Females	45.2	7.8	P = 0.001
	Males	54.2	10.6	
Negative perfectionism	Females	63.1	15.02	P = 0.03
	Males	53	8.2	
Health	Females	49.9	14.7	P = 0.06
	Males	45.8	13.6	
Hardiness	Females	32.1	12.4	P = 0.001
	Males	41.5	12.9	

The results showed that the difference between scores of negative perfectionism is significantly lower in men than women. Other results showed that the difference between scores of health was not statistically significant in men and women. The difference between scores of hardiness was significantly lower in women than men.

**Table 3.** Comparison of mean scores of students in Jahrom University of Medical Sciences in different domains of health

Variable		Mean	Standard deviation	p-value
Somatic symptoms	Females	52.6	20.02	P < 0.001
	Males	41.7	19.3	
Social dysfunction	Females	47.8	16.9	P = 0.09
	Males	47.8	19.9	
Depression	Females	51.2	18.3	P = 0.02
	Males	47.5	20.4	
Anxiety	Females	48.6	15.1	P = 0.05
	Males	46.4	18.2	

The difference in mean scores of health in dimension of somatic symptoms was significantly lower in men than women. The difference in mean scores of health in dimensions of social dysfunction, depression and anxiety was not significant in men and women.

Other findings showed a positive and significant correlation between positive perfectionism and hardiness ( $r = 0.3$ ,  $p = 0.02$ ). There was a significant and positive correlation between social dysfunction and depression ( $r = 0.5$ ,  $p < 0.001$ ). There was a positive and significant

relationship between social dysfunction and total score of health ( $r = 0.7$ ,  $p < 0.001$ ). There was a positive and significant relationship between social dysfunction and somatic symptoms ( $r = 0.2$ ,  $p = 0.001$ ).

#### 4. DISCUSSION

The present study aimed to investigate the relationship of perfectionism with hardiness and mental health among students in Jahrom University of Medical Sciences. The results showed a significant correlation between positive perfectionism and hardiness. The findings of this study are consistent with the results of the study conducted by Muhammad Ali Basharat [3, 5], Mohammad Habib Nejad, Shiva Geranmayi Pour [4]. They found a positive and significant relationship between these two variables. The individuals with positive perfectionism endeavor to achieve their aspirations, which requires hardiness. Positive perfectionism motivates the individual to use mature defense mechanisms by strengthening individual capabilities (e.g. pragmatism, acceptance of personal restrictions, reduced failure, optimism and mental health indicators) [5]. Others showed that positive perfectionism positively affects mental health by strengthening positive psychological aspects (e.g. self-esteem and self-confidence) and personal characteristics (e.g. pragmatism, acceptance of personal restrictions, personal attainment as aligned with satisfaction in life) (4). Savari et al. also showed that psychological hardiness is negatively correlated with mental health and perfectionism is positively correlated with mental health. Multivariate regression analysis showed significant multiple correlation of psychological hardiness and perfectionism with mental health. Only psychological hardiness could significantly predict and explain mental health. These results are consistent with the results of the present study (11).

There was a negative relationship between psychological hardiness and mental health of students. Therefore, the greater the hardiness, the greater the mental health and vice versa (12). It should be noted that hardiness is not only effective in physical health but also motivation, learning, learning outcomes and training programs (13).

#### 5. CONCLUSION

In general, the findings showed the relationship of two personality traits of hardiness and mental health with perfectionism. Therefore, it is suggested to introduce positive (psychological hardiness) and negative (perfectionism) personality traits to the students, their families and their parents and teach them how to strengthen and weaken these traits. Positive personality traits enhance mental health and negative personal traits worsen mental disorders.

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