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Research Paper



Positive and Negative Perfectionism and Its Relationship with Stress among Students

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ABSTRACT

The paper throws light on the students where in most of the stress is being found. The purpose of the study was to examine relationship between Positive and Negative Perfectionism and Stress among Students. The sample collected consisted of 120 students (N-120) with an age range of 18-25 years. The sample was collected using purposive sampling technique. Two tools were administered on the sample for data collection and these were Positive and Negative Perfectionism (PANPS) and Perceived Stress Questionnaire (PSQ). The statistical analysis of the quantitative data was done using SPSS and/, Descriptive statistics and Pearson Product Moment Correlation were used, the findings reveal that there is no correlation between Positive Perfectionism and Stress amongst students and hence, hypothesis 1 has been completely rejected. In addition to this, there is no relationship found between Negative Perfectionism and Stress amongst students hence, rejecting hypothesis 2. It has also been found that there is a significant relationship between Positive Perfectionism and Negative Perfectionism but not with Stress amongst students and thus, hypothesis 3 was completely accepted. Lastly, when the two variables were analysed together, similar results were found as mentioned above. Hypothesis 2 can be altered and used for future research.

Keywords: Students, Positive Perfectionism, Negative Perfectionism, Stress

PERFECTIONISM

Perfectionism is a personality trait characterised by a person's obsession with flawlessness and perfection, as well as critical self-evaluations and concerns about other people's opinions. Perfectionism is frequently considered by psychologists in terms of two dimensions: striving and worry, resulting in a two-factor model (Stoeber, 2018; Antony & Swinson, 2009):

- Perfectionist aspirations are a collection of (very) high personal standards set by perfectionists:
 - Perfectionism centred on oneself (setting impossibly high standards for yourself)
 - Perfectionism with an outward focus (setting impossibly high expectations for others)
 - Perfectionism as a social construct (assuming others have expectations of you that are impossible to meet)

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Fears and worry about making mistakes are combined in perfectionist concerns. They direct perfectionists' attention to never-ending doubts about practically everything, from deeds taken, parental expectations, and criticism, to socially dictated demands.

Outside of the two-factor approach, there are crucial aspects of perfectionism to examine.

The following are two more examples: (Stoeber, 2018)

Perfectionist self-presentation is a form of adjustment and maladjustment that has an impact on the therapeutic process as well as interpersonal interactions.

Two aims are involved in such self-presentation:

- Giving the sense of perfection (promotion focused)
- Avoiding the appearance of being less-than-perfect (prevention focused)
- Perfectionist cognitions are automatic ideas that indicate a desire to achieve perfection. Automatic and involuntary thinking can stifle decision-making and cause actions to be delayed.

Positive Perctionism

Positive perfectionism is also known as healthy perfectionism or striving for perfection. It equates to pride, diligence, and a healthy pursuit of excellence.

Negative Perfectionism

Negative perfectionism is also known as unhealthy perfectionism or perfectionist anxiety. It is concerned as a fear of making mistakes, a fear of looking terrible, shame, and guilt.

Theories Of Perfectionism

We will begin with the summarization of attachment theory, person-centered theory, before delving into the influence of self-psychology on how we develop perfectionism, consider the following:

Attachment Theory

Attachment theory offers a practical and convincing explanation of how a person's early environment influences personality development, including self-regulation and performance. According to attachment theory, we seek support from caregivers when we feel threatened. Insecure attachment and a diminished capacity for emotional control and support seeking result from care or abuse.

Our coping and interpersonal behaviours are influenced by the models we form early in life.

Person-Centered Theory

Carl Rogers (1959) suggested that people have a natural drive to actualize their potential, and as part of this, they have an intuitive knowledge of what would aid or hinder their potential to fulfil themselves (Stoeber ,2018)

Initially, all experiences are unitary; then, over time and because of interaction with caregivers, children discriminate between what is me and not me (i.e. real self and ideal self). Children become aware that self-value and positive-regard often depend on other's acceptance and meeting their performance expectations

Self Psychology

According to Kohut and Wolf (1978), a child's self-esteem and growth are influenced by how their parents meet their needs. Children must, in particular, feel their caregivers' adulation and be seen as idealised, all-powerful figures.

Any interruptions to this process provide an opportunity for the youngster to self-soothe and enhance their sense of self (Kohut & Wolf, 1978; Stoeber, 2018)

The three theories outlined above, according to Kenneth Rice, Hanna Suh, and Don Davis (cited in Stoeber, 2018), provide the foundation for understanding the early origins, development, and maintenance of perfectionism.

"Helping youngsters acquire high but realistic standards, as well as corresponding believes of themselves as worthy and confident, and also perceptions of others as trustworthy and confident," explains a parent who creates a helpful and reliable environment. (Stoeber, 2018) The three hypotheses above, according to Kenneth Rice, Hanna Suh, and Don Davis (quoted in Stoeber, 2018), offer the foundation for understanding perfectionism's early beginnings, growth, and maintenance.

"Helping children acquire high but realistic standards and corresponding views of themselves as worthy and confident, as well as perceptions of others as trustworthy and confident," says a parent who provides a supportive and dependable atmosphere (Stoeber, 2018, p. 247). (Stoeber, 2018) Positive environments that lead to healthy, adaptive perfectionism include:

- Reliable and secure relationships with parents, as well as reasonable and unambiguous parental expectations
- Parents who promote their children's performance yet are unconcerned about how they perform.
- Parents who are supportive and encouraging of their children.

Maladaptive perfectionism, on the other hand, is the result of the reverse or lack of the above:

- In terms of their expectations, parents are inconsistent or confusing (to their children).
- Parents care little or nothing about their children's performance.
- The child may not recognise their parents' fundamental relational or intrinsic value.
- Parents who brag about their children's accomplishments while being careless about how they perform.
- Parents who are supportive and encouraging of their children.

Children with such parents may grow to value their achievement above and beyond their emotional needs" (Stoeber, 2018, p. 247).

While the youngster/youngest child tries to keep recognition or avoid criticism, striving for perfection and disregarding emotional needs might be a logical' consequence of unsupportive home circumstances.

Perfectionism may emerge as a way for youngsters to self-soothe when they are faced with either few and ambiguous expectations or much too many, overly specific ones (Stoeber, 2018).

STRESS

A sensation of emotional strain and pressure is referred to as stress. Stress is a sort of mental anguish. Small amounts of stress may be advantageous, since it can boost physical performance, motivation, and environmental response. Excessive stress, on the other hand, can raise the chance of strokes, heart attacks, ulcers, and mental diseases like depression, as well as worsening a pre-existing condition.

Stress can be external and related to the environment, but it can also be generated by internal beliefs that lead an individual to feel anxious or other negative emotions in response to a circumstance, such as pressure, discomfort, or other negative feelings, which they then label as stressful.

Hans Selye (1974) hypothesised four stress variations. On one axis, he distinguishes between good stress (eustress) and harmful stress (distress). On the other hand, there is overstress (hyperstress) and understress (hypostress). Selye supports balancing these: the ultimate goal is to have as much eustress as possible by precisely balancing hyperstress and hypostress. The word "eustress" is derived from the Greek root eu-, which means "good" (as in "euphoria"). When a person perceives a stressor as pleasant, it is called eustress. 7] The word "distress" comes from the Latin word "distressus/distress."

Distress

Distress, or hindrance-related stress, is a more widely accepted term for stress (Aamodt, 2013). Distress is a sort of stress that causes unpleasant or negative energy and happens when there is too much stress and nothing is done to minimise, diminish, or mitigate its consequences (Aamodt, 2013). Psychological discomfort, physical anguish, and emotional distress are the three types of distress that people experience. Insomnia, nightmares, dysphoria, difficulty concentrating, despondency, and fear of being alone are all signs of psychological distress.

Individuals who do not successful in their academic attempts are especially likely to be distressed (Misra & Castillo, 2004). Pain, weariness, headaches, blurry vision, muscle spasms, and gastrointestinal issues are all symptoms of physical distress (Leveto, 2018). Finally, lack of confidence, impatience, estrangement, and wrath are all symptoms of emotional discomfort (Leveto, 2018). Distress can be prolonged and debilitating when it comes to the aforementioned symptoms (Aamodt, 2013). Any physical or psychological force, activity, or event that generates a feeling of stress is referred to as a stressor. It's the stimuli that causes either positive or negative stress responses.

Due to the fact that students might have physical and psychosomatic responses to stressors when they are under excessive or negative stress, it is not uncommon for them to experience loss of appetite, headaches, digestive issues, or a continuous lack of energy (Misra & Castillo, 2004). Family concerns, environmental, interpersonal, and health factors can all contribute to stressful situations. Not being admitted into one's first choice of college, career indecision, a traumatic experience, losing a job, going through a breakup, or financial issues are just a few examples (Aamodt, 2013). Distress can result from not meeting or falling short of one's personal goals, both in college and in the workplace (Aamodt, 2013). A British study indicated that students who were under more financial stress and worked more hours had poorer mental health, confirming the psychological effects of stress (Eisenberg et al., 2007). Researchers examined the health profiles of students who experienced high levels of psychological discomfort to those who had low levels of distress in a 2015 study. Characteristics of health and happiness were examined using an online survey (Mulder & Cashin, 2015). 16.5 percent

of the 609 pupils said they were in a lot of mental pain. University students with high levels of distress reported being unable to work or study for 10 days and needing to reduce their workload for another twelve days due to academic pressures throughout the course of thirty days. Ninety-six percent of the pupils who were upset said they were depressed. Feeling weary, worried, and "everything being an effort" were the factors on the Kessler Psychological Distress Scale (K10) that contributed the most to distress. This study from regional Australia adds to the bad evidence.

pupils' reaction to distress (Mulder & Cashin, 2015).

Eustress

Eustress, or challenge-related stress, on the other hand, is defined as the positive energy derived from stressors, which can boost productivity and overall performance (Aamodt, 2013). Stress can result in eustress, which is a positive outcome. This phenomenon is referred to in job applications with requirements like "works well under pressure." Feelings connected with completing a difficult task, obtaining a promotion, or graduating are all possible outcomes of eustress. Furthermore, eustress refers to the anxiety that one may have prior to taking a test, because if one does not experience any anxiety, the desire to study for the exam is lost (Aamodt, 2013). Small degrees/Optimum level of stress, is required according to the hypothesis, can boost motivation and arousal, boosting productivity and performance. Individuals differ in terms of the ideal level of pressure for improved performance. Further increases in arousal after the ideal point result in worse performance (Aamodt, 2013). However, the findings demonstrated that students do not need a positive assessment of a stressor to be engaged in academic pursuits (Mesurado et al., 2016) Small degrees of stress, according to the hypothesis, can boost motivation and arousal, boosting productivity and performance. Individuals differ in terms of the ideal level of pressure for improved performance. Further increases in arousal after the ideal point result in worse performance (Aamodt, 2013). However, the findings demonstrated that students do not need a positive assessment of a stressor to be engaged in academic pursuits (Mesurado et al., 2016) The inverted-U theory, which depicts the optimal amount of arousal, best depicts the link between eustress and discomfort. The amount of stress is measured on the x-axis, while performance is measured on the y-axis. A symmetrical bell-shaped curve is used to graph the difference. The values scattered along the descending slopes represent calm or distress, whereas the central segment represents eustress. In essence, low levels of arousal and high levels of arousal both lead to poor performance. Moderate arousal is associated with the highest levels of performance (Aamodt, 2013). The appropriate amount of arousal will vary depending on each person's perception and response to stress, which is unique to their personality (Aamodt, 2013).

Acute Stress

Acute stress is a different sort of stress that corresponds to the release of adrenaline in the fight or flight response. When the sympathetic nervous system and the hypothalamus pituitary adrenal axis are stimulated, the experience of acute stress is short-lived, and metabolism returns to normal within around 90 minutes. A fight, a traffic jam, crowds, and other unexpected stimuli can all cause acute stress. When a stressful situation lasts for a long time, it is termed chronic, which means that if it is not managed, it can harm one's body and mind. School, illness, relationships, jobs, and the expense of living can all contribute to chronic stress.

Stress and Students

Academic stressors are associated with students' perceptions of the knowledge base required for courses and their incapacity to obtain it as quickly as is expected of them (Misra & Castillo, 2004). Academic stress can be overwhelming or insurmountable for kids who have a lot of coursework, extracurricular activities, and social obligations.

Frustrations, disputes, pressures, changes, and self-imposed academic stressors are the five categories identified by the Student-Life Stress Inventory (SSI) (Misra & Castillo, 2004). Physiological, emotional, behavioural, and cognitive are the four categories that describe responses to various stressors (Misra & Castillo, 2004). The two sets of categories were investigated in a sample of 392 international and American students from two Midwest institutions. According to the findings, both American and overseas students face similar academic challenges, such as scholarship requirements, 1314 demands from family, financial problems, classroom competition, and course-related stress, yet the results show that participants' stress perceptions and reactions differ greatly (Misra & Castillo, 2004). American students, for example, have higher levels of self-imposed stressors and stronger behavioural responses to stressors than overseas students, according to Gadzella's Student-Life Stress Inventory (Misra & Castillo, 2004). Male participants had more stress due to internal conflict, whereas female participants had more behavioural and physiological responses to academic pressures, according to the study. This backs up the literature's conclusions that women are more open about their stress than men. Workload, student debt, unfamiliar locations, outsider expectations, homesickness, social pressures, and underlying psychological difficulties are all factors that contribute to stress among the student population in the United States (Yoo, 2017). Other sources of stress for college students include the prospect of incurring debt in order to obtain a degree, as well as the widespread perception of examinations as high-risk pursuits. Academic stress can harm students' grades, hinder them from graduating, promote stimulant misuse, and encourage academic dishonesty. The ability of stress to disrupt the cognitive system, or functional short-term memory storage, is one of the most serious negative effects of stress (Yoo, 2017). Both high and low achievers experience academic stress. Stress is common among students who are unable to graduate or pass their courses. Stress is felt by high achievers as well, but it is channelled through the pursuit of higher grade point averages. Perfectionistic tendencies are a way of attaining social approval and exceeding expectations, often at the expense of the individual's mental and emotional well-being. Stress can be a problem at the college or university level.

The need to do well enough to keep academic scholarships, get admitted into selected graduate schools, or be provided a job after graduation has spawned 15. The sense of stress does not end in college; in fact, it frequently follows students into the workforce.

Relationship Between Perfectionism and Stress Among Students

Education is one of humanity's most basic requirements, as it is accountable for our civilization's growth. It's tough to put a monetary value on education. Education provides multiple intangibles in addition to basic information on diverse disciplines.

For example, it provides individuals with expertise and confidence that they may apply to a variety of situations in their lives. A solid education provides the foundation for personal, professional, and financial success. While studying is an important aspect of school, and most people believe that understanding culture, developing social skills, perfecting the use of language, and developing problem-solving skills and logical reasoning are all very important. Students are learning how to operate in society and be successful in life in addition to reading,

writing, and arithmetic. With today's rising complexity in education, it is widely regarded as a major source of stress and worry among students.

The educational system has evolved into a never-ending stream of papers, assignments, tests, midterms, and other forms of information that must be processed. The educational system has evolved into a never-ending stream of papers, assignments, tests, midterms, and other forms of information that must be processed. "Stress is defined as a biological response to any unpleasant internal or external stimuli in the form of physical, mental, or emotional stability that has the potential to disrupt a person's homeostasis." If a person is unable to withstand stress reactions, illnesses may result. Stress can be beneficial if it motivates people to learn, grow, and progress professionally and personally. As a result, it is an important element of our life. The amount of stress that a person can tolerate comfortably varies from person to person. Personal health, energy level or exhaustion, family status, and age all play a role. Stress tolerance typically declines with age, when a person is ill, and when they have sleep issues. When we consider the various sources of stress, we can see that they are numerous. Students may experience stress from a range of factors both inside and beyond the school campus, ranging from a heavy workload and difficulty managing their time to financial difficulties and familial complexities.

There is no solution to this question because each student's reaction to stress is as unique as they are.

Stress symptoms can be divided into three categories: physical, emotional, and mental. Headaches, stomach troubles, beating heart, sweaty palms, insomnia, and unease are some of the physical symptoms. These variables are likely to make it difficult to attend class.

Short temper, depression, restlessness, intimidation, and nervousness are all emotional signs. These are elements that make it difficult or impossible for a student to collaborate with others. Absentmindedness, loss of attention, poor judgement, incompetence, doubt, and negative self-talk are all mental signs of stress.

Several studies have found a concerning trend in college student health as a result of excessive stress. Academic, economical, time or health-related, and self-imposed pressures have all been characterised by researchers. Academic pressures in general include the student's recognition of the large knowledge base that is required and the belief that there is insufficient time to obtain it. Several studies have discovered a broad pattern of when students report experiencing academic stress, with these periods occurring at predictable intervals throughout the semester. Exam preparation and study, grade competitiveness, and a huge syllabus to cover in a short amount of time are the most stressful aspects of academic life.

For example, if a student is unable to attend regular lessons due to illness, it will be extremely difficult for them to study the syllabus that was finished while they were missing. This causes a great deal of mental strain. It's also conceivable that kids believe they're just stressed out when, in reality, their illness has advanced to major anxiety or depression issues.

It is critical for parents and teachers to recognise stress symptoms and take appropriate response. Otherwise, tension can build up and lead to melancholy and anxiety attacks. It's also probable that pupils who are depressed will be more directly activated by a stressful or traumatic event in the future (Coping with Anxiety and Stress in Everyday Life, 2008).

Students enrolled in higher education institutions confront numerous obstacles. Students that try to overcome these obstacles may change their habits. This might have a negative impact on their mental health that may cause them to be concerned. College students who experience the most of the anxiety Many students experience anxiety when they believe they will be unable to attain their academic or non-academic objectives; yet, worry can occasionally inspire students to think critically about how to achieve their objectives. Students cope with all of anxiety in a number of ways, while some may struggle. This is likely to cause a cascade of symptoms that affect their mental health. As a result, in order to preserve their mental health & remain at the institution, individuals must control their anxiety. Students' mental health has a significant impact on their academic success and persistence. Students feel less pressure when they can regulate their anxiousness. If the pupils' anxiety persists, they may abandon their academic endeavours.

Furthermore, anxiety may exacerbate their physical and psychological conditions and persist after graduation, affecting their ability to work in the future. As a result, it's critical to comprehend the reasons that induce worry among students in higher education institutions. The emotional health of students has a big influence on their academic success and persistence. When students can control their anxiety, they feel less stressed. If the students' nervousness lingers, they may give up their studies.

Anxiety may also increase their physical and psychological disorders and persist after graduation, impairing their capacity to work in the future. As a result, it's vital to understand the factors that cause students in higher education institutions to be concerned.

REVIEW OF LITERATURE

Spagnoli, Buono et al (2021) seeks to conduct a longitudinal research to investigate the association between perfectionism two-factor model (namely, worries and strivings) and burnout characteristics as evaluated by the BAT (Burnout Assessment Tool). The findings validated the predictive effect of perfectionistic worries on the burnout dimensions, although perfectionistic strivings were just not substantially associated, indicating that employers and doctors should manage perfectionism to prevent employee burnout.

Eley, Bansal et al. (2020) This study looked at the effect of perfectionism in moderating the relationship between personality trait profiles and degrees of psychological discomfort. Certain personality types are susceptible to psychological suffering, such as worry, stress, and depression. Perfectionism, as a mediator between personality and psychological discomfort, may be a target approach to assist raise students' self-acceptance and self- awareness of their perfectionistic inclinations and lessen their sensitivity to poor mental health.

Finley (2020) The goal of this descriptive, correlational study was to learn more about the prevalence of perfectionism in a nursing student population, including overall and by age group, as well as the link between perfectionism, perceived stress, as well as coping style. It concluded that Perfectionism and perceived stress were shown to have a strong link, as was the adoption of various problematic coping strategies such like denial, venting, self-blame, and behavioural disengagement. These findings highlight the importance of screening and intervention to prevent negative academic and professional outcomes.

Mahasneh, Alwan et al. (2019) conducted a research with the aim to assess the amount of multidimensional perfectionism and motivational orientation across a group of undergraduate students in Jordan, while also studying the link between multidimensional perfectionism and

motivational orientation. It was discovered that the degree of multidimensional perfectionism and motivational orientation was moderate, with no significant variations between the aspects of multidimensional perfectionism and motivational orientation related to gender. Furthermore, the results revealed a favourable and statistically significant association between the multidimensional perfectionism and motivational orientation subscales.

Hamblin (2018) conducted a research on 150 undergraduate students Self – report measures – Perceived Stress Scale, Depression, Anxiety and Stress Scale and the Multidimensional Perfectionism Scale were being filled by the students. It concluded that there was a substantial positive association between the three constructs of interest, according to the findings (stress, anxiety, and perfectionism). Finding indicates the primary analysis supported the predictions by demonstrating that perfectionism mediates the association between stress and anxiety in college students.

Stoeber (2018) conducted a research to examine, the critical issues that, he found problematic and might present obstacles in progressing further to understand perfectionism: - concentrating on perfectionistic worries (but disregarding perfectionistic strivings), utilising cluster analysis to study variations in multidimensional perfectionism, measuring perfectionism with instruments that do not evaluate perfectionism.

Smith, Saklofske et al. (2017) conducted a research that Neuroticism has a high degree of overlap with various perfectionist aspects, including depression, anxiety, stress, and life satisfaction. Beyond neuroticism and culture, the findings indicated the explanatory capacity of concern about mistakes and concerns about acts in the prediction of melancholy, anxiety, and stress. As the first study to investigate the incremental validity of perfectionism traits among students from typically individualistic and collectivistic cultures, our findings both extend and clarify our knowledge of perfectionism's predictive potential in significant ways.

Erozkan (2016) conducted a study to examine the relationship between anxiety sensitivity and dimensions of perfectionism on a sample of 398 students. It was concluded that six characteristics of perfectionism were shown to have a substantial influence on anxiety sensitivity. The theoretical ramifications of the perfectionism-anxiety sensitivity relationship were examined.

Andrews, Deuling et al. (2014) Using a prospective strategy, we investigated the nomological network of positive and negative perfectionism, taking into account relationships with optimism, pessimism, neuroticism, conscientiousness, and health and psychological well-being factors. Even after correcting for the effect of time one factors, both positive and negative perfectionism were found to offer considerable incremental validity to the prediction of criteria measures. The implications of these findings for future perfectionism research are highlighted.

Handley, Egan et al (2014) conducted a research with the aim to find the relationship between perfectionism, pathological worry and GAD. A sample of 36 adults were taken. These findings support the idea that certain aspects of perfectionism are linked to pathological concern and GAD.

Craiovan (2013) conducted a study with the aim to understand the correlation between perfectionism, perceived stress, burnout and psychopathological symptoms in medical personnel. The results presented were on two levels of analysis, based on the profession of the

participants: doctors versus nurses. Overall, our study found that the associations between perfectionism tendencies, perceived stress, burnout, and psychopathological symptoms in medical employees were both positive and statistically significant. Furthermore, the stress perceived by nurses was strongly related to somatization and hostility symptoms, whereas stress perceived by doctors was only weakly related to sensitivity and depression symptoms.

Saboonchi and Ludh (2013) conducted a research on a sample of 184 Swedish adults who were selected randomly. To find the relationship between perfectionism, somatic health and positive affect. Socially prescribed Perfectionism as well as self-oriented Perfectionism had weak positive correlations with self-reported somatic complaints, showing symptoms of tension, fatigue. These symptoms were found to be stronger in females than in males, whereas other-oriented perfectionism appeared to be a predictor of whether or not the participants were receiving medical treatment. Finally, the findings refuted the concept that self-oriented perfectionism is beneficial, adaptive aspect of perfectionism rather it was discovered to be negatively linked with positive affect.

Schruder, Sharpe et al. (2013) The goal of this paper was to provide an overview of evidence regarding how perfectionism has been defined, the role of biology and environmental factors in perfectionistic tendencies, the impact of perfectionism in the academic setting, and whether interventions designed to alter perfectionistic tendencies are beneficial. It was shown that biological elements are associated to perfectionistic inclinations; however, contextual factors including parenting style/family features are also essential. Perfectionistic inclinations are visible throughout childhood and are thought to be rather stable over time.

Schwenke (2012) conducted a study to understand the relationship between perfectionism, stress, coping resources and burnout. A sample of sign language interpreters were taken. The findings supported the idea that stress plays a role in the relationship between maladaptive perfectionism and burnout in a sign language interpreting population. Coping resources were not shown to be a moderator or moderated mediator between perfectionism variables and burnout, or between perfectionism variables and perceived stress.

Hasel & Besharat (2011) conducted a research. The purpose of this study was to look into the association between two personality traits, perfectionism and hardiness, and physiological reactions in a stressful setting. Negative perfectionism was found to be positively connected with physiological reactions such as systolic blood pressure, diastolic blood pressure, skin conductance, respiration rate, and heart rate. The physiological reactions of systolic blood pressure, diastolic blood pressure, and respiratory rate were all inversely linked with hardiness.

Souza, Egan et al (2011) conducted a research with a aim to analyze a relationship between perfectionism, stress and burnout. A sample of 87 Australian clinical psychologists were taken. Perfectionism was found to be both directly and indirectly related to various kinds of burnout in clinical psychologists, via stress. The findings' implications for future research profitability of intervention for clinical psychologists with high levels of perfectionism are discussed.

Trotter, Heppner et al. (2011) conducted a research to The current study looked at the connections between adaptive and maladaptive perfectionism, situation-specific collectivism coping, and both psychological and achievement functioning. Avoidance and detachment coping associated maladaptive perfectionism, which in turn predicted decreased psychological

functioning, which was consistent with the Taiwanese cultural environment. Furthermore, route models showed that standards predicted acceptance, reframing, and striving, all of which predicted greater psychological functioning.

Çapan(2010)The purpose of this study is to see if the perfectionist personality characteristic predicts academic procrastination and life happiness in university students. The research concluded that the self-oriented perfectionist personality characteristic substantially forecast academic procrastination and life happiness.

Ulu and Tezer (2010) gave a study on 607 Turkish university students to analyze the role of anxiety and avoidance dimensions of attachment. Adaptive perfectionism was strongly predicted by conscientiousness, openness, and extraversion, according to the findings of two different multiple regression models. Attachment neuroticism, anxiety, and avoidance all substantially predicted maladaptive perfectionism and Big Five personality traits in adaptive and maladptive dimensions.

Stairs (2009) The primary goal of the current collection of research was to aid in the clarification of the precise unidimensional characteristics underpinning what is known as "perfectionism." This resulted in the Measure of Constructs Underlying Perfectionism, a 9-scale, 61-item scale (M- CUP). The nine scales were internally consistent and stable across time, and they were related in theoretically important ways with relevant measures of personality and psychosocial functioning.

Hewitt et al (2008) conducted a study on a sample of 90 clinical patients through an interview in which they were assessed in terms of their perfectionistic self-presentations and trait perfectionism and their affective, cognitive and physiological reactions. Analyses of physiological data revealed that perfectionistic self-presentation was associated with higher levels of heart rate when discussing past mistakes, and that the need to avoid disclosing imperfections predicted higher levels of and a greater change in heart rate when discussing past mistakes, as expected.

Lee (2007) conducted a research using longitudinal design, which aimed on investigating the validity of a diasthesis-stress model while linking perfectionism to specific psychopathological symptoms in a large sample of undergraduate students. Two different frameworks for conceptualising perfectionism were tested:(1) a multidimensional framework proposed by Hewitt and Flett(1991), which asserts that intrapersonal and interpersonal factors influence perfectionistic tendencies and behaviours, and(2) an adaptive-maladaptive perfectionism typology (Frost et al.,1993) that asserts the existence of both a positive and a negative form of perfectionism. The findings of this study imply that a diathesis-stress model might be used to analyse perfectionism and its relationship to psychopathology.

Stoeber and Otto (2006) conducted a research in which he worked on two forms of perfectionism for the two basic approaches dimensional approach (perfectionistic strivings and perfectionistic concerns) and group base approach (healthy perfectionists and unhealthy perfectionists). Furthermore, we examine the evidence showing (a) perfectionistic strivings are related with good traits, and (b) healthy perfectionists have greater levels of positive characteristics than unhealthy perfectionists and non-perfectionists.

Dunkley, Blankstein et al. (2006) conducted a research on 475 university students, they investigated perfectionism's maladaptive and somewhat more adaptable characteristics as

indicated in metrics from three distinct theoretical frameworks. It concluded that Self-Critical Perfectionism was distinguished from neuroticism in terms of its relations with negative interpersonal traits and current depressive symptoms.

Gilman and Ashby (2003) In this exploratory study, 132 middle school students were administered the Almost Perfect Scale–Revised and the Multidimensional Students' Life Satisfaction Scale. Both perfectionist subtypes showed much higher global satisfaction than non-perfectionists, although adaptive perfectionists reported better self-satisfaction ratings than both maladaptive and nonperfectionists.

Sherry and Hewitt et al (2003) conducted a research in which perfectionism dimension was compared with A.T. Beck's model of dysfunctional attitudes which consists of (DA) dependent attitudes, perfectionistic attitudes (PA) to foresee depression in 70 psychiatric patients and 280 university students. By acknowledging the diverse contributions of the self-related and socially based components of perfectionism, Hewitt and Flett's definition of perfectionism as three discrete personality traits allows for accurate results.

Whittaker (2002) conducted a research The goal of this study was to evaluate if certain cognitive characteristics (that is, attributional style) and/or perfectionism dimensions were predictive of rise in negative affect in persons with high and low perfectionism when subjected to a stressful task paradigm. The findings did not support the first hypothesis, which evaluated the diathesis-stress model of perfectionism, implying that perfectionism did not interact with stress to predispose one to heightened anxiety or depression. However, the findings were consistent with the other assumptions and supported the theoretical difference between more adaptable and maladaptive kinds of perfectionism. Maladaptive perfectionism was associated with increases in negative emotion, dysfunctional attributional styles, as well as poor performance judgments.

Suddarth and Slaney (2001) They conducted a research on 196 undergraduate students. The researchers looked at whether characteristics derived from the three current perfectionism measures may predict three variables that evaluate emotional functioning: locus of control, anxiety, and psychopathology. The most variance was accounted for by the maladaptive component.

Pareker (1997) conducted a research on a nationally representative sample of 820 academically gifted sixth graders at Johns Hopkins University's Center for Talented Youth. According to the findings, the cluster groups included a non-perfectionistic type (32.8 percent), a healthy perfectionistic type (41.7 percent), and a dysfunctional perfectionistic type. Parental perceptions of the children were congruent with the kids' self-perceptions. Perfectionism was connected with conscientiousness first and agreeableness and neurotic later.

Frost, Lahart et al. (1991) conducted a study to examine two assumptions- research 1 Both daughters' and their parents' perfectionism was assessed. Perfectionism was examined in both daughters and their parents in research 2, as well as associated parental traits and degrees of psychopathology in daughters. Both studies found that perfectionism in mothers, but not in dads, was related to perfectionism in daughters. Furthermore, daughters' judgments of their dads' harshness, but not fathers' self-reported harshness, were linked to perfectionism in daughters. Daughters' judgments of their mothers' harshness, as well as mothers' self-reported harshness, were linked to perfectionism in daughters.

Rationale of the Study

A lot of studies have research how Negative Perfectionism leads to Stress among students and have also included topics like Anxiety, Burnout, Hardiness, Depression, Neuroticism. Perfectionism is a personality trait characterised by a person's obsession with flawlessness and perfection, as well as critical self-evaluations and concerns about other people's opinions. Stress is a sensation of emotional strain and pressure is referred to as stress. Stress is a sort of mental anguish. Small degrees of stress may be beneficial since they can improve athletic fitness, motivation, and environmental responsiveness. High level of stress, on the other side, can increase the risk for strokes, heart attacks, sores, even mental illnesses such as depression, as well as exacerbate an already-existing problem. Stress can be external and related to the environment, but it can also be generated by internal beliefs that lead an individual to feel anxious or other negative. They describe stress as a result of their emotions in reaction to the situation, like pressure, discomfort, or even other undesirable sentiments.

It is of two types Eustress (positive stress) and Distress (negative stress). Perfectionism is frequently considered by psychologists in terms of two dimensions: striving and worry, resulting in a two-factor model. Perfectionism is of two types Positive Perfectionism and Negative Perfectionism. Positive Perfectionism is found to be adaptive as individuals with such tendency are able to deals with the stress or stressful situations efficiently as they are able to cope up. Stress for such an individual is eustress which increases their ability to perform and achieve high standard of goals. Negative Perfectionism is found to be maladaptive where individuals are distressed and are unable to cope up with stressful situations, end up giving up the task or fail. The most evident research gap that was found in the researches mentioned above covered was most of them Negative Perfectionism with psychopathology. None of them covered the Positive and Negative Perfectionism and its relationship with stress among Students. Hamid Afshar, Hamidreza Roohfza (2009) conducted a research on Positive and Negative Perfectionism and their relationship with anxiety and depression in Iranian School. It concluded that negative perfectionism can lead to anxiety and depression, while Positive Perfectionism is a protective factor. None of the studies investigated the relationship between Positive Perfectionism and Negative Perfective with Stress among students. I took this topic for my research because Studies were conducted on Perfectionism and Depression, Anxiety or on Perfectionism and burnout but the relationship between Positive and Negative Perfectionism and its relationship with Stress was not seen. I wanted to study how Perfectionistic behaviour leads to stress among students. As students are burdened with work and has deadline, and when they are unable to do perfectly and efficiently stress occurs. Its not same with every student as some students have the tendency of Positive Perfectionism which help them to work efficiently and some have the tendency of Negative Perfectionism which leads to distress, either end up giving up the task or leaving it incomplete.

METHODOLOGY

Aim: To study Negative and Positive Perfectionism and its relationship with stress among students.

Objectives

- To study the relationship between Positive Perfectionism and Stress among students.
- To study the relationship between Negative Perfectionism and Stress among students.

To study the relationship between Positive Perfectionism and Negative Perfectionism and stress.

Hypothesis

- H1- There will be significant relationship between Positive Perfectionism and Stress among students.
- H2- There will be a significant relationship between Negative Perfectionism and Stress among students.
- H3- There will be a significant relationship between Positive Perfectionism and Negative Perfectionism among students.

Research Design

The present study used Correlational Research Design. Quantitative data was collected for the research.

Variables

Positive and Negative Perfectionism Scale (PANPS) Perceived Stress Questionnaire (Psq)

Sample and It's The Selection

The sample size taken for the [present study was N=120 and it consisted of students with age range 18-25 years who are college students. (Regular mode or Distance learning course). The sampling technique used was Purposive Sampling.

Description of Tools

Positive and Negative Perfectionism Scale (PANPS)

The Positive and Negative Perfectionism Scale (PANPS) was developed from a variety of measures in a sample of clinical patients with eating disorders and depression, athletes, and controls, including eating disorder scales and other perfectionism scales (Terry-Short et al., 1995). One issue is that Terry-Short and colleagues did not provide a full assessment on the PANPS's reliability and validity when it was established. They did, however, present the findings of a factor analysis, which they said clearly split the complete PANPS scale into two factors: positive and negative perfectionism. Terry-Short et al. assessed the validity of the PANPS using the Setting Conditions for Anorexia Nervosa Scale (SCANS; Slade & Dewey, 1986), which includes a perfectionism subscale, but did not report on the correlation between the PANPS and the SCANS. Instead, Terry-Short and colleagues claimed that PANPS scores identified 86 percent of the diagnosed eating disordered group who were diagnosed through clinical interview, demonstrating the scale's construct validity. They also discovered that a score of 69 or above on the Negative Perfectionism subscale was the cut-off point for people at risk of developing an eating disorder. Despite these claims, the scale's internal consistency and construct validity with other measures of perfectionism were not investigated. The PANPS had a factor structure and internal consistency of 59. In two subsequent investigations, the topic was revisited. Using the PANPS (Terry-Short et al., 1995)

The PANPS is a 40-item self-assessment tool that assesses both positive and negative perfectionism. It was created with the help of 281 people, including those with eating problems, depression, athletes, and healthy people. Eating disorder scales (EDI; Garner et al., 1983; SCANS; Slade & Dewey, 1986), the BPS (Burns, 1980), the MPS-H (Hewitt & Flett, 1991a), and the Neurotic Perfectionism Questionnaire were used to create the PANPS items (NPQ; Mitzman, Slade, & Dewey, 1994). The scale has a constant factor solution, which consists of two factors: Perfectionism, both positive and negative (Haase et al., 1999, 2002;

Terry-Short et al., 1995). Internal consistency of the PANPS has also been shown to be good, ranging from 83 to 88 (Haase et al., 1999, 2002).

On a five-point scale, from strongly disagree to strongly agree, respondents respond to the questionnaire. The positive perfectionism subscale has 20 items, while the negative perfectionism subscale has 20. The negative and positive perfectionism subscales can have values ranging from 20 to 100, and the total perfectionism score can be anywhere from 40 and 200. The higher the score, the more perfectionism there is. The following is an example of a positive perfectionism item: "I like the challenge of setting very high standards for myself" and an example of a negative perfectionism item is; "When I achieve my goals I feel dissatisfied"

Reliability of Positive and Negative Perfectionism Scale (PANPS)

The test–retest reliability of the Positive and Negative Perfectionism Scale (PANPS) was reported to be 0.77 and 0.82 for positive and negative perfectionism, respectively. The connections of the positive and negative subscales with positive and negative states offered evidence of the scales' validity.

Validity Of Positive and Negative Perfectionism Scale (PANPS)

Positive and Negative Perfectionism Scale (PANPS) reported construct validity.

Perceived Stress Questionnaire (PSQ)

The PSQ, which consists of 30 items, was created as a tool for analysing the stressful life events and conditions that likely to cause or worsen illness symptoms. Because stress has a substantial impact on the quality and regularity of the sleep cycle, the PSQ might be a useful tool for determining the underlying reasons of sleep disorders. The scale is intended for use in therapeutic settings, but it has also been used in research projects. The PSQ has been validated using a population of 31.8 13.9 year old in-patients, out-patients, students, and health care employees For completing the PSO, respondents are given one among two pairs of scoring guidelines: the general questionnaire, which asks about stressful feelings and events from the past year or two, and the current questionnaire, which asks about stress from the preceding month. Scale is a self-report, pen-and-paper test that takes between 10 and 15 minutes to complete. Respondents indicate on a scale from 1 ("almost never") to 4 ("usually") how frequently they experience certain stress-related feelings. Higher scores indicate greater levels of stress. By counting each item, a total score is obtained (questions 1, 7, 10, 13, 17, 21, 25, and 29 are positive and are scored according to the directions accompanying the scale). A PSQ index can be found by subtracting 30 from the raw score and dividing the result by 90, yielding a score between 0 and 1.

Reliability of Perceived Stress Questionnaire (PSQ)

The Perceived Stress Questionnaire reported test-retest reliability to be 0.82

Validity of Perceived Stress Questionnaire (PSQ)

The Perceived Stress Questionnaire (PSQ) reported internal consistency ranging from 90 to .92

Procedure

The aim of the study was to find out the relationship between positive and negative relationship with stress among students. Participants taken for the study were chosen

randomly students from different Universities. Because of the continuing pandemic, data collection was done entirely online. A google form had been made and was circulated among the students in the age group of 18-25 years. 120 participants agreed to complete the questions. The participants were assured beforehand, that the information they will be submitting would be kept confidential and it will only be used for the purpose of the study.

Two questionnaires were provided with a consent form and in the consent form the purpose of the study was also mentioned. The consent form also included a part in which the subject was told that it is their decision to take part in the research and that is entirely voluntary and that they can withdraw or refuse to fill the questionnaire at any time if they don't feel comfortable. The initials of the participant was also collected to keep a proof that the subject participated voluntarily. After the consent was filled, demographic information of the subject was collected which included his/her Name, Age, Gender, Education, Education Level, Instituition, Family Type, Area in which they live. The subject was told to read the instructions carefully and answer each and every question by selecting the the option that best suits him/her. They were told not to leave any question unanswered and that no response is right or wrong. Responses were collected from the participants and scoring was done accordingly using SPSS. The subjects were also told that their questions regarding their scores and interpretations would also catered later once the interpretation was done. Lastly, they were thanked for their patience and active participation. They were also appreciated for taking out their valuable time.

Statistical Analysis

The data was analyzed using SPSS Version 21. Description statistics and inferential statistics methods were applied for the analysis of the data collected. Correlational method was used to examine the relationship between Positive and Negative Perfectionism with Stress.

RESULT

This chapter provides the analysis on the data collected for the study in three sections. Section 1 covers demographic profile of the participants. Section 2 covers the descriptive statistics of the data and Section 3 incorporates the influential statistics.

During the inceptive phase of data analyses, comparability of data was checked on the basis of statistical criterion required. After the data was found compatible, parametric statistics was applied. Results are divided into two sections; first section describes the Descriptive statistics of all the variables used in the study and second section covers the inferential statistics. Descriptive statistics deals with the kind of analysis that can be used to pin point the characteristics of the sample. It describes and represents the sample of a population collected. Inferential statistics gives the probability of the occurrence of the result that you have found in the sample in the actual population. It helps us draw conclusions and make predictions based on the sample data. The Inferential Statistics section reports the results of analysis of relationship between Positive and Negative Perfectionism measured by Positive and Negative Perfectionism Scale (PANPS) and Stress measured by Perceived Stress Questionnaire (PSQ).

Section 1: DEMOGRAPHIC DETAILS

This section includes the demographic profile of the participants. It would help to understand the characteristics of them and some factors that influence the data collected in the research.

Section 2: DESCRIPTIVE STATISTICS

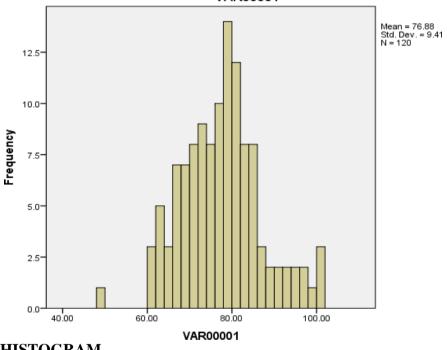
The sample (n=120) was generated randomly from the population of students, who completed semi-structured interview. A significant relationship does not exist between Positive and Negative Perfectionism and Stress. Table 4.1 shows the descriptive statistical analysis of the variables Perceived stress, Positive Perfectionism and Negative Perfectionism. (Figure 4.11) The mean and standard deviation obtained for Variable Perceived Stress is 63.20 and 11.87 respectively. (figure 4.12) The variable Positive Perfectionism exhibits mean 76.88 and standard deviation 9.40. figure 4.13) Negative Perfectionism manifests mean 76.88 and Standard Deviation 9.40.

Table 4.1 Descriptive Statistics for variables Positive Perfectionism, Negative Perfectionism and Perceived Stress

	N	Minimum	Maximum	Mean	SD
Positive Perfectionism	120	49.0	100.00	76.88	9.4
Negative Perfectionism	120	34.0	93.00	63.20	11.8
Perceived Stress	120	.20	.90	.4117	.12

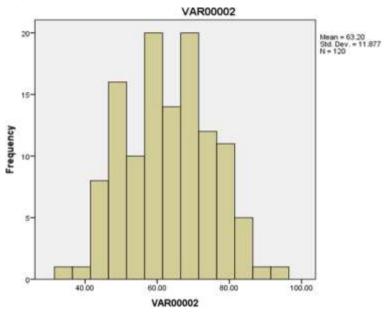
HISTOGRAM

Figure 1: Histogram showing Mean, Standard Deviation and Sample of Positive Perfectionism among Students VAR00001



HISTOGRAM

Figure 2: Histogram showing Mean, Standard Deviation, and Sample for Negative Perfectionism among Student



HISTOGRAM

Figure 3: Histogram showing Mean, Standard Deviation, and Sample for Perceived Stress among Students.

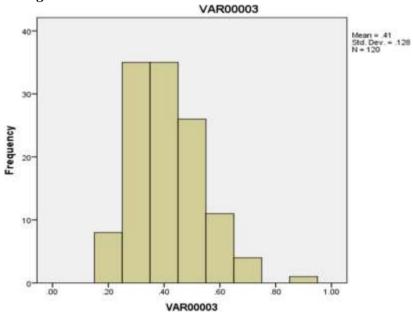


Table 4.2 Correlation between Positive Perfectionism and Perceived Stress

		Perceived Stress	Positive Perfectionism
Perceived Stress	Pearson Correlation	1	-0.43
	Sig. (2-tailed)		.638
	N	120	120
Positive	Pearson Correlation	-043	1
Perfectionism	Sig. (2-tailed)	.638	
	N	120	120

Table 4.3 Correlation between Negative Perfectionism and Perceived Stress

		Perceived	Stress Negative Perfectionism
Perceived Stress	Pearson Correlation	1	.116
	Sig. (2-tailed)		.208
	N	120	120
Negative Perfectionism	Pearson Correlation	.116	
	Sig. (2-tailed)	.208	
	N	120	120

Table 4.4 Correlation between Positive and Negative Perfectionism and stress

		Perceived Stress	Positive Perfectionism	Negative Perfectionism
Perceived Stress	Pearson	1	043	.116
	Correlation			
	Sig. (2-tailed)		.638	.208
	N	120	120	120
Positive	Pearson	043	1	.435**
Perfectionism				
	Correlation			
	Sig. (2-tailed)	.638		.000
	N	120	120	120
Negative	Pearson	.116	.435**	1
Perfectionism	Correlation			
	Sig. (2-tailed)	.208	.000	
	N	120	120	120

^{**} Correlation is significant at the 0.01 level (2-tailed)

Inferential Statistics

Variables exhibit normal distribution, linearity, and homoscedasticity therefore parametric analyses were performed. Bivariate statistical analysis using Pearson's r correlation was used to measure the relationship between Positive and Negative Perfectionism with stress. There exists no significant relationship between Positive Perfectionism with stress as manifested in Table 4.2, Proving H1 to be rejected. Also, there is no significant relationism between Negative Perfectionism and Stress among students as shown in Table 4.3., proving opposite of what was being hypothesised (H2). Though there exists a correlation at 0.01 level between Positive and Negative Perfectionism with Stress, due to construct validity of Positive and Negative Perfectionism Scale (PANPS). Hence, H3 is accepted.

DISCUSSION AND ANALYSIS

The present study was conducted with the aim to explore the Positive and Negative Perfectionism and its relationship with Stress among students. The study also sought to understand how participants' experiences of Stress might inform case conceptualization based on Stoeber's theory of Perfectionism. Additional considerations were given to the students pursuing a course. Perfectionism is a personality trait characterised by a person's obsession with flawlessness and perfection, as well as critical self-evaluations and concerns about other people's opinions. Perfectionism is frequently considered by psychologists in terms of two dimensions: striving and worry, resulting in a two-factor model (Stoeber, 2018; Antony & Swinson, 2009):

Positive perfectionism refers to cognitions and behaviours that direct individuals to achieve high-level goals through positive reinforcement and a willingness to succeed, whereas negative perfectionism represents individuals who strive for unrealistically high-performance standards. It also includes negative reinforcement.

Stress is a sort of mental anguish. Small degrees of stress may be beneficial since they can improve athletic performance, motivation, even environmental responsiveness. High Level of stress, and from the other hand, might increase the risk for strokes, heart attacks, sores, and mental illnesses such as depression, and also aggravate an already-existing problem.

In this study of students age 18-25 years, statistically existing significant relationship between Positive Perfectionism and Stress among students as per the hypothesis (figure1). These findings provide more clarity that it is not necessary that perfectionism is always correlated with stress. The mean of Positive variable is 76.88 (Table 4.2) this suggests that there might be individuals with Positive Perfectionism, who are resilient and are able to cope with the stressful environment effectively and efficiently without being hindered by the circumstances. It means that these individuals are able to be cope without being anxious and stressful. Positive perfectionism may operate as a buffer against psychological discomfort since it is associated with lower levels of anxiety than negative perfectionists and non- perfectionists. Positive perfectionists, in our perspective, see potentially anxiety-provoking events with substantially less self-criticism and focus on future improvements. Positive perfectionism and enhanced subjective well-being may be related to improved coping techniques, increased optimism, less depressive symptoms, less psychological suffering, higher self-esteem, feelings of pride, and/or higher academic accomplishment. Perfectionists are a lot like, high-achievers, they tend to set high goals and work hard towards them. They accept nothing less than perfection. "Almost perfect" is seen a s failure. More study is needed to understand the mediators of positive perfectionism and subjective well-being. There will be a significant relationship between Negative Perfectionism and Stress among students, the hypothesis proved to opposite according to what was assumed (figure 2). The mean of negative perfectionism came out to be 63.2 (Table 4.3) As there always exists a relationship between negative perfectionism and stress. This might have occurred due to a small sample size taken for the study which was 120. Generally Negative Perfectionism has a relationship with stress as such individuals are very much prone to stress, they don't not settle for anything less and always want to be perfect in whatever work they indulge. Individuals with negative perfectionism are characterized by an excessive focus on control. Others may become too fastidious and fixated with perfection, which can result in attempts to control events or people. This results in stress and take a toll on interpersonal relationships. The ones with negative perfectionism have stress and sometimes this high stress leads to distress and ultimately linked to anxiety. Anxiety is also found in above researches to be present in individuals with negative perfectionism.

Paul Dave Whittaker (2002) conducted a research on Perfectionism's relationship to Anxiety, Depression and Attributional Style with a Stressful Task Paradigm The goals of this study were to evaluate if certain cognitive characteristics (namely, attributional style) and/or perfectionism characteristics were predictors of increases in negative affect in persons with high and low perfectionism when exposed to a stressful task paradigm.

According to the findings of the current investigation, (1) perfectionism would have a moderating effect on one's level of anxiety and depression in stressful scenarios, (2) individuals with high levels of perfectionism have attributional styles similar to those found in depressed people, (3) specific "maladaptive" dimensions of perfectionism are more

predictive of increases in anxiety and depression than more "positive" dimensions, and (4) the maladaptive dimensions are more predictive of rise in negative performance perceptions than that of the positive dimensions. The findings did not support the first hypothesis, which looked at the diathesis-stress model of perfectionism, implying that perfectionism did not interact with stress to predispose one to heightened anxiety or depression. However, the findings confirmed the other predictions and the theoretical difference between more adaptive and maladaptive kinds of perfectionism. Increases in negative emotion, dysfunctional attributional styles, as well as poor performance judgments were all associated with maladaptive perfectionism.

- The above study supports that Positive Perfectionism does not lead to stress and Negative Perfectionism leads to Maladaptive behaviors, depression and anxiety.
- The anxiety induced by such a level of perfectionism has been connected to consequences like poor self, eating problems, sleep disturbances, and psychological suffering.

Kung and Chan (2013) performed research to investigate the role for Positive and Negative Perfectionism for predicting occupational eustress & distress.

Although perfectionism is frequently associated with increased occupational stress, little research has been conducted to investigate the differences between adaptive (positive perfectionism [PP]) and maladaptive (negative perfectionism [NP]) perfectionism in predicting psychological responses to stressors. Using the Holistic Model of Stress, this study investigated the role of perfectionism in explaining good (eustress) and negative (distress) stress reactions as measured by vigour and strain. Participants included 156 employees (73 academic and 83 administrative) from a tertiary institution who completed self-report questionnaires including the Positive and Negative Perfectionism Scale, Personal Strain Ouestionnaire Shirom-Melamed Vigor Measure as well as Marlowe-Crowne Social Desirability Scale (including occupational, psychological, relational, and physical strain). (Correlations and hierarchical multiple regressions were used to determine how PP and NP predicted vigour and strain. After correcting for social desirability, higher PP predicted more vigour and lower vocational and physical strain, whereas higher NP predicted less vigour and greater vocational, psychological, interpersonal, and physical strain. As a result, PP and NP clearly have distinct perspectives on how to respond to pressures. Promoting PP may help to reduce stress perceptions related to one's work and body. Interventions to cope with increasing NP may enhance overall well-being.

The above study concluded that the individuals with Positive Perfectionism have eustress which is positive stress, therefore helps working the individual efficiently and supports the opposite result of hypothesis. The same study also mentions about the relation between Negative Perfectionism and distress, which is not proved in the present study. It can be due to participants fatigue or due to there least interest in filling the questionnaire. It can also be due a small sample size selected for the study.

There will be a significant relationship between Positive Perfectionism and Negative Perfectionism. The relationship existed between the two as they both are a part of Positive and Negative Perfectionism Scale (PANPS). As being a part of one scale there exists construct validity. As shown in (Table 4.4). The correlation is significant at 0.01 level (2- tailed). The amount to which an instrument, such as a survey, measures what it is designed to measure is referred to as validity: validity is an assessment of its correctness.

Construct validity is the reasonableness of inferences drawn on the basis of observations or measurements (typically test scores), especially whether a test can properly be deemed to reflect the intended construct. Constructs are purposeful abstractions produced by researchers in order to grasp the latent variable that is connected with results on a specific test (although it is not directly observable). Construct validity is critical to the perceived overall validity of the exam. Confirmatory factor analysis - a method for identifying the validity of a construct. By establishing a theoretical model, we indicate how the items in the questionnaire are associated using CFA. Our theoretical model might be based on past exploratory factor analysis (EFA), previous research, or our own a priori theory. We compute the statistical probability that the data collected from the questionnaire items match with our model, so verifying our hypothesis.

SUMMARY AND CONCLUSION

It was concluded that there is a relationship between Positive and Negative Perfectionism. A relationship does not exist between Positive Perfectionism and Stress because positive perfectionism is a protector. However, therapies that promote the beneficial parts of perfectionism while minimising its negative components may be able to reduce stress.

Burns characterised perfectionism as "...those whose standards are high beyond reach or reason, those who strain obsessively and unrelentingly toward unreachable objectives and who assess their own value exclusively in terms of output and performance." For these folks, striving for greatness is counterproductive." Horney offers a simpler explanation as "the tyranny of the shoulds," which causes a person to be overly judgmental of one's own actions. Because of its underlying psychopathology, perfectionism is frequently associated with negative sentiments of failure, delaying, and humiliation. Perfectionism, on the other hand, seems to have some adaptive or good qualities since it encourages strive for excellence. The term "normal perfectionism" refers to this form of perfectionism. People with high performance rules and expectations who do not engage in negative self-appraisal are referred to as "normal" perfectionists, while those with high standards who engage in negative self-appraisal, including such self-doubt and worrying regarding making mistakes, are referred to as "neurotic" perfectionists. Negative perfectionists have unreasonable standards and ambitions, and as a result, their efforts frequently fail, leading to stress, melancholy, and feelings of inadequacy.

Stress is a sort of mental anguish. Small degrees of stress may be beneficial since they can improve athletic performance, motivation, & environmental responsiveness. Chronic stress, and from the other hand, might increase the risk for strokes, heart attacks, sores, even mental illnesses such as depression, as well as aggravate an already-existing problem.

Many studies have shown Negative Perfectionists reported higher level of stress which came out to be opposite to hypothesis due to small sample size. The objective of the present study was to examine Positive and Negative Perfectionism and its relationship with stress.

Limitations

- There was a limited time to completed the research.
- If more variables were gathered than more appropriate and extensive analysis have been provided than the present one.
- The data was collected online through a google form due to which the reliability and validity becomes a bit less reliable and valid.

- The relationship between Negative Perfectionism and Stress came out to be opposite of what was being assumed.
- A larger sample will help in boosting results of the research.
- For better results, a large sample can be taken for future research.
- For better results, conduction of interviews can be done along with the questionnaire.

Future Implications

There exists a relationship between Negative Perfectionism and Stress among students, which was not found due to a small sample size (N-120). With the conduction of questionnaire, interview can be conducted for a more valid and reliable study. Correlation was not found between Positive Perfectionism and stress, also not between Negative Perfectionism and stress. So, these can be kept in mind and worked upon, in future for understanding how perfectionism tendencies leads to stress in students.

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Conflict of Interest

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