



Kent Academic Repository

Stoeber, Joachim, Kempe, Tom and Keogh, Ellen J. (2008) *Facets of self-oriented and socially prescribed perfectionism and feelings of pride, shame, and guilt following success and failure*. *Personality and Individual Differences*, 44 (7). pp. 1506-1516.

Downloaded from

<https://kar.kent.ac.uk/4476/> The University of Kent's Academic Repository KAR

The version of record is available from

<https://doi.org/10.1016/j.paid.2008.01.007>

This document version

Publisher pdf

DOI for this version

Licence for this version

UNSPECIFIED

Additional information

Versions of research works

Versions of Record

If this version is the version of record, it is the same as the published version available on the publisher's web site. Cite as the published version.

Author Accepted Manuscripts

If this document is identified as the Author Accepted Manuscript it is the version after peer review but before type setting, copy editing or publisher branding. Cite as Surname, Initial. (Year) 'Title of article'. To be published in *Title of Journal*, Volume and issue numbers [peer-reviewed accepted version]. Available at: DOI or URL (Accessed: date).

Enquiries

If you have questions about this document contact ResearchSupport@kent.ac.uk. Please include the URL of the record in KAR. If you believe that your, or a third party's rights have been compromised through this document please see our [Take Down policy](https://www.kent.ac.uk/guides/kar-the-kent-academic-repository#policies) (available from <https://www.kent.ac.uk/guides/kar-the-kent-academic-repository#policies>).

Stoeber, J., Kempe, T., & Keogh, E. J. (2008). Facets of self-oriented and socially prescribed perfectionism and feelings of pride, shame, and guilt following success and failure. *Personality and Individual Differences, 44*(7), 1506-1516. DOI: 10.1016/j.paid.2008.01.007

Facets of Self-Oriented and Socially Prescribed Perfectionism and Feelings of
Pride, Shame, and Guilt Following Success and Failure

Joachim Stoeber, Tom Kempe, & Ellen J. Keogh

Department of Psychology

University of Kent

Author Note

We would like to thank Kathleen Otto and three anonymous reviewers for helpful comments and suggestions on an earlier version of this article. Correspondence concerning this article should be addressed to Joachim Stoeber, Department of Psychology, University of Kent, Canterbury, Kent CT2 7NP, United Kingdom; phone: +44-1227-824196; fax: +44-1227-827030; e-mail: J.Stoeber@kent.ac.uk.

Abstract

According to traditional views of perfectionism, perfectionists are prone to experience shame and guilt and unable to experience pride. However, these views ignore that perfectionism is multidimensional and multifaceted. Consequently, the present study adopted a multidimensional approach and investigated in a sample of $N = 67$ university students how four facets of perfectionism—perfectionistic striving, importance of being perfect, others' high standards, conditional acceptance—were related to pride, shame, and guilt following experimental manipulation of success and failure. Results showed that perfectionistic striving was associated with more pride following success, whereas all facets were associated with more shame and guilt following failure, particularly conditional acceptance. Furthermore, conditional acceptance was associated with less pride regardless of success or failure. Supporting views of perfectionism that differentiate between adaptive and maladaptive aspects, the findings show that individuals who strive for perfection experience more pride after success. Whereas all facets of perfectionism were related to more shame and guilt after failure, only individuals who think that others' approval is conditional upon being perfect seem to be unable to experience pride. The findings demonstrate that perfectionistic striving per se is not maladaptive, but conditional acceptance may be an important factor in maladaptive and clinical perfectionism.

Keywords: perfectionism; self-conscious affect; pride; shame; guilt; success; failure

Facets of Self-Oriented and Socially Prescribed Perfectionism and Feelings of Pride, Shame, and Guilt Following Success and Failure

Individuals with high levels of perfectionism are characterized by striving for flawlessness and setting excessively high standards for performance accompanied by tendencies for overly critical evaluations of their behavior (Flett & Hewitt, 2002; Frost, Marten, Lahart, & Rosenblate, 1990). Therefore, it has been argued that individuals with high levels of perfectionism—because they have excessively high standards and are overly self-critical—regard all their achievements as under-achievements and thus are prone to experience shame and guilt and unable to experience pride (e.g., Sorotzkin, 1985; see Tangney, 2002 for a comprehensive review).

However, perfectionism has many faces (Benson, 2003), and research has shown that perfectionism is best conceived of as a multidimensional and multifaceted characteristic (e.g., Frost, Marten, Lahart, & Rosenblate, 1990; Hewitt & Flett, 1991; R. W. Hill et al., 2004). Regarding multidimensional measures of perfectionism, the most widely used measure is the Multidimensional Perfectionism Scale (MPS; Hewitt & Flett, 1991). Consequently, most studies investigating how perfectionism relates to pride, shame, and guilt have used the MPS. The MPS differentiates between three dimensions of perfectionism of which two are relevant in the present context: self-oriented perfectionism and socially prescribed perfectionism. Self-oriented perfectionism describes self-imposed perfectionistic standards as expressed in perfectionistic striving and the personal belief that it is important to be perfect, whereas socially prescribed perfectionism describes the notion that others exert pressure on oneself as expressed in the belief that others have high expectations and that others' approval is conditional on one's being perfect. A number of studies have investigated how self-oriented perfectionism and socially prescribed perfectionism relate to pride, shame, and guilt (Fee & Tangney, 2000; Hewitt & Flett,

1991; Klibert, Langhinrichsen-Rohling, & Saito, 2005; Lutwak & Ferrari, 1996; Tangney, 2002). Results, however, were inconclusive. Only socially prescribed perfectionism showed positive correlations with shame and guilt across studies, whereas self-oriented perfectionism showed positive correlations with shame and guilt in some studies, but not in others. Moreover, neither self-oriented perfectionism nor socially prescribed perfectionism showed any significant correlations with pride (see Stoeber, Harris, & Moon, 2007 for a comprehensive review).

A potential explanation for this inconclusive pattern of findings may be that the dimensions of self-oriented perfectionism and socially prescribed perfectionism are not homogenous, but comprise different facets that show different relations (Campbell & Di Paula, 2002; Trimpeter, Watson, & O'Leary, 2006; Van Yperen, 2006). According to Campbell and Di Paula (2002), self-oriented perfectionism and socially prescribed perfectionism each comprise two facets: Self-oriented perfectionism comprises the striving for perfection (perfectionistic striving) and the belief that being perfect is important (importance of being perfect), and socially prescribed perfectionism comprises the belief that others have high standards for oneself (others' high standards) and that acceptance by others is conditional on fulfilling these high standards (conditional acceptance). Moreover, Campbell and Di Paula found that these four facets showed differential relationships with affect, self-esteem, and personality. Regarding the two facets of self-oriented perfectionism, perfectionistic striving showed positive correlations with positive affect, self-esteem, extraversion, openness, and conscientiousness and negative correlations with negative affect, depression, and neuroticism whereas importance of being perfect showed a positive correlation with conscientiousness, but a negative correlation with self-esteem. Regarding the two facets of socially prescribed perfectionism, others' high standards showed a positive correlation with depression and a negative correlation with

agreeableness whereas conditional acceptance showed positive correlations with negative affect, neuroticism, and depression and negative correlations with positive affect, self-esteem, extraversion, agreeableness, openness, and conscientiousness.

Campbell and Di Paula's (2002) findings suggest that it may be important to differentiate these four facets also when investigating how self-oriented perfectionism and socially prescribed perfectionism are related to pride, shame, and guilt. In particular, this is relevant for the two facets of self-oriented perfectionism, because only perfectionistic striving displayed a pattern of correlations (viz. positive correlations with positive affect and self-esteem and negative correlations with negative affect and depression) that can be considered adaptive (Enns & Cox, 2002). Consequently, perfectionistic striving can be expected to predict feelings of pride after success. In contrast, the other three facets all displayed correlations that suggested that they are maladaptive—particularly conditional acceptance. Consequently, importance of being perfect, others' high standards, and conditional acceptance can all be expected to predict feelings of shame and guilt after failure. Moreover, clearly being the most maladaptive facet of the four (Campbell & Di Paula, 2002), conditional acceptance can be expected to be negatively related to feelings of pride both after success and after failure. The present study aimed to investigate these expectations.

Method

Participants

A sample of $N = 100$ undergraduate students (16 male, 84 female) was recruited from the psychology programs of a British university. Mean age of participants was 19.7 years ($SD = 2.2$; range = 18–38 years). In exchange, participants received extra course credit.

Procedure

All participants were tested individually by either the second or third author. Upon arrival in the laboratory, participants first read an informed consent sheet which told them that the study investigated how personality characteristics relate to task performance. Afterwards, participants completed the measure of perfectionism (see *Measures*) before they were randomly allocated to one of two feedback conditions: success ($n = 50$) or failure ($n = 50$). In both conditions, participants were presented with five cartoons from Pritchett (2006). Each cartoon (e.g., two men sitting in a pub) was presented in two versions: the original and a modified copy that contained a specified number of differences from the original version (e.g., one dial of the pub's clock was missing). All participants received the same pairs of cartoon (original and copy) and were told that each pair contained five differences which they had to find and circle. In the success condition, the task was solvable: all five pairs of cartoons contained five differences. In the failure condition, the task was unsolvable: only the first four pairs of cartoons contained five differences, whereas the last pair contained only four differences. Participants were given a maximum of 15 minutes to find all of the differences. Time was measured by the experimenter with a stop watch. Participants in the success condition (solvable task) spent on average 8.32 minutes ($SD = 2.99$) on the task whereas participants in the failure condition (unsolvable task) spent on average 12.41 minutes ($SD = 3.12$), $t(98) = 6.70$, $p < .001$. Afterwards, participants completed the measure of state pride, shame, and guilt (see *Measures*).

Because the study involved deception, ethical approval was obtained from the department's ethics committee prior to conducting the study. Moreover, at the end of the study, participants were fully debriefed and explained that they had been randomly assigned to two conditions, success or failure, and that in the failure condition the task was

unsolvable (i.e., the pair contained only four differences, not five).

Manipulation Check

As a manipulation check, the number of errors that participants detected were analyzed to investigate whether participants had experienced success and failure as intended. Results showed that this was the case for 67 participants: of the 50 participants in the success condition, 34 detected all five errors in each pair of cartoons; and of the 50 participants in the failure condition, 33 detected five errors in Pairs 1–4 and four errors in Pair 5. Consequently, only the 67 participants (10 male, 57 female) who experienced success and failure as intended were retained for the analyses.

Measures

Perfectionism. To measure the four facets of perfectionism, we used the 21 items from the Multidimensional Perfectionism Scale (MPS; Hewitt & Flett, 1988, 1991; see Flett, Besser, & Hewitt, 2005, p. 1364 for information on reliability and validity) that Campbell and Di Paula (2002) and Van Yperen (2006) used to measure perfectionistic striving, importance of being perfect, others' high standards, and conditional acceptance (Van Yperen, personal communication, 16 October 2006; see Campbell & Di Paula, 2002 and Van Yperen, 2006 for details on how the four scales were constructed and further information on reliability and validity): Perfectionistic striving was measured with MPS Items 8, 14, 17, 36, and 40 (e.g., "I strive to be as perfect as I can be"); importance of being perfect with Items 15, 20, 23, 28, and 34 (e.g., "It is very important that I am perfect in everything I attempt"); others' high standards with Items 11, 13, 18, 35, 37, and 39 (e.g., "People expect nothing less than perfection from me"); and conditional acceptance with Items 5, 21, 30, 33, and 44 (e.g., "Others will like me even if I don't excel at everything," reverse-scored).¹ To all items, participants responded on a 7-point scale from "strongly disagree" (1) to "strongly agree" (7). With Cronbach's alphas of .78, .87, .76,

and .59, all measures displayed satisfactory reliability (internal consistency) except conditional acceptance which was marginally below the .60 criterion of acceptability recommended for research scales (Nunnally & Bernstein, 1994). Item analyses indicated that by removing Item 5 (“I find it difficult to meet others’ expectations of me”) a Cronbach’s alpha of .61 could have been achieved. Nevertheless, we decided to retain all five items to preserve comparability with the previous studies that used these measures (Campbell & Di Paula, 2002; Van Yperen, 2006).

Pride, Shame, and Guilt. To measure pride, shame, and guilt, the State Shame and Guilt Scale (Marschall, Saftner, & Tangney, 1994) was employed which comprises 15 items of which 5 each measure pride (e.g., “I feel proud”), shame (e.g., “I feel humiliated, disgraced”), and guilt (e.g., “I feel remorse, regret”). Instructions stressed that participants indicate how they feel “currently, that is, *right now*,” and participants responded on a 5-point scale from “not feeling this way at all” (1) to “feeling this way very strongly” (5). With Cronbach’s alphas of .93, .88, and .89, all measures displayed high reliability.

Analytic Strategy

Because all our hypotheses were directional, we conducted directional tests where possible. Consequently, *p*-values throughout the manuscript are one-tailed.

Results

First, we inspected the correlations of the four facets of perfectionism (see Table 1). In line with previous findings (Campbell & Di Paula, 2002; Van Yperen, 2006), the facets displayed a differential pattern of intercorrelations demonstrating that it is important to differentiate facets within the dimensions of self-oriented and socially prescribed perfectionism: Whereas importance of being perfect, others’ high standards, and conditional acceptance all showed significant intercorrelations, perfectionistic striving showed significant correlations only with importance of being perfect and others’ high

standards, but not with conditional acceptance.

Next, we inspected if the experimental manipulation of success and failure was successful in influencing participants' affective experience. When *t*-tests were computed to investigate the effect of condition on the individual affects, results were as expected (see Table 2): Participants in the success condition experienced significantly more pride than participants in the failure condition, and participants in the failure condition experienced significantly more shame and guilt than participants in the success condition. Thus, the experimental manipulation of success and failure was successful.

Next, we inspected the correlations of the four facets with state pride, shame, and guilt following success and failure (see Table 3). As expected, perfectionistic striving displayed a significant positive correlation with feelings of pride after success, whereas all facets displayed significant positive correlations with feelings of shame and guilt after failure (except others' high standards which failed to show a significant positive correlation with guilt after failure). Moreover, conditional acceptance showed a significant negative correlation with pride after success, suggesting that individuals, who hold strong beliefs that they are accepted by others only when they are perfect, are unlikely to experience pride after completing a task—regardless of success or failure.

Finally, we conducted hierarchical regression analyses to investigate which of the perfectionism facets made a unique contribution to the prediction of pride, shame, and guilt and whether condition (success or failure) moderated these relationships. Following recommended guidelines for testing moderator effects in multiple regression summarized in Frazier, Tix, and Barron (2004), we used effect coding (success = -1, failure = +1) for coding the experimental condition, standardized the perfectionism facets before creating the product terms, and interpreted the unstandardized (*B*) regression coefficients (see Frazier et al., 2004, pp. 120-121 for details). Moreover, we examined the residuals for

outliers and excluded one participant with extremely high levels of shame and guilt following failure who showed $|\text{standardized residuals}| > 3$ in the regression analyses of shame and guilt.

The results of the regression analyses showed that, of the four perfectionism facets, only conditional acceptance made unique contributions to the prediction of pride, shame, and guilt (see Table 4). Moreover, the analyses showed that conditional acceptance predicted lower pride across conditions, indicating that individuals who are high in conditional acceptance feel less pride regardless of success or failure. In contrast, the effects of conditional acceptance on shame and guilt were moderated by condition as indicated by significant interaction effects of condition \times conditional acceptance on shame and guilt. To investigate these interaction effects, the regression analyses for shame and guilt were repeated, once with condition indicator-coded as success = 0 and failure = 1 and once with condition indicator-coded as failure = 0 and success = 1, thus testing whether the regression coefficient of conditional acceptance was different between the success and the failure condition (see Frazier et al., 2004, p. 125). Regarding shame, results showed that conditional acceptance predicted higher shame in the failure condition ($B = .47, p < .001$), but not in the success condition ($B = -.01, ns$). Regarding guilt, results showed that conditional acceptance predicted higher guilt in the failure condition ($B = .40, p < .01$), but not in the success condition ($B = -.03, ns$). In sum, only after failure did conditional acceptance predict higher levels of shame and guilt, but not after success.

Discussion

The present study investigated how the four facets of self-oriented and socially prescribed perfectionism described by Campbell and Di Paula (2002)—perfectionistic striving, importance of being perfect, others' high standards, and conditional acceptance—are differentially related to feelings of pride, shame, and guilt after success and failure.

The findings show that the relationship of perfectionism with pride, shame, and guilt is dependent on what facet of perfectionism is regarded. Whereas perfectionistic striving was related to higher levels of pride after success, all perfectionism facets were related to higher levels of shame after failure and all perfectionism facets (except others' high standards) were related to higher levels of guilt after failure. Moreover, conditional acceptance was associated with less pride regardless of success or failure. Thus, only conditional acceptance showed a pattern supporting the view that perfectionists are unable to experience pride (e.g., Sorotzkin, 1985).

The present findings corroborate previous findings demonstrating that self-oriented perfectionism and socially prescribed perfectionism comprise facets that show differential relationships with affect (Campbell & Di Paula, 2002). In particular, the finding that only the striving facet of self-oriented perfectionism was associated with higher levels of pride after success corroborates previous findings that the striving dimension of perfectionism is associated with positive affect (Stoeber & Otto, 2006) and that some forms of perfectionism are related to higher levels of pride (Fedewa, Burns, & Gomez, 2005; Stoeber et al., 2007). Moreover, the present findings show that—while perfectionism may be associated with a tendency to experience shame and guilt—this tendency may be restricted to situations of perceived failure and may be particularly related to the conditional acceptance facet of socially prescribed perfectionism, that is the belief that acceptance from others is conditional upon oneself being perfect.

The findings that conditional acceptance was associated with higher levels of shame and guilt after failure and with lower levels of pride both after success and after failure is in line with recent studies demonstrating that conditional acceptance plays a central role in the relationship between perfectionism and maladjustment (Flett, Besser, Davis, & Hewitt, 2003; A. P. Hill, Hall, Appleton, & Kozub, in press; Scott, 2007).

Furthermore, it concurs with recent theoretical developments regarding maladaptive forms of perfectionism. For example, Lundh's perfectionism-acceptance theory (Lundh, 2004; Lundh, Saboonchi, & Wångby, in press) argues that striving for perfection as such is not maladaptive, but striving for perfection becomes maladaptive when it is turned into a demand for perfection, understood as the inability to accept being less than perfect. Moreover, Shafran's theory of clinical perfectionism (Riley & Shafran, 2005; Shafran, Cooper, & Fairburn, 2002, 2003) holds that an absence of positive emotional reactions to success is an important maintenance mechanism for clinical perfectionism. As conditional acceptance was associated with absence of positive reactions to success in the present study, the conditional acceptance component of socially prescribed perfectionism deserves close attention from researchers aiming to understand the maladaptive nature of some forms of perfectionism and to devise ways to help individuals suffering from clinical perfectionism (Riley, Lee, Cooper, Fairburn, & Shafran, 2007).

The present study has some limitations, however. First, the findings may be limited by the method used to induce success and failure (i.e., presenting participants with a solvable or insolvable task). Whereas manipulation of task difficulty is a recommended and powerful method to induce success and failure (Nummenmaa & Niemi, 2004), the task used in the present study suffered from a high percentage of participants who had unexpected difficulties with the task and thus did not experience success and failure as intended. Whereas those participants who did experience success and failure as intended showed marked differences regarding pride, shame, and guilt (see Table 2), future studies will need to replicate the findings with other methods to induce success and failure such as false feedback on Bogus tests of intelligence or social skills (e.g., Stoeber et al., 2007). Moreover, the findings may be limited to the dimensions and facets of perfectionism investigated in the present study, that is self-oriented and socially prescribed perfectionism

and their facets. Whereas self-oriented and socially prescribed perfectionism as measured with the Multidimensional Perfectionism Scale (Hewitt & Flett, 1991) are the two dimensions that the majority of studies on perfectionism have focused on and thus are of major importance, future studies should include other multidimensional measures of perfectionism to investigate the relationships of other dimensions and facets of perfectionism with pride, shame, and guilt after success and failure. Moreover, future studies should include a greater percentage of male participants so that possible gender differences can be investigated. Second, the relationships that the present study found between perfectionism and pride, shame, and guilt were only of small to medium size, with only the negative correlation between conditional acceptance and pride after failure approaching a large size effect (Cohen, 1992). Consequently, the relationship between perfectionism and self-conscious emotions may be less pronounced than would be expected from theory (e.g., Tangney, 2002; Sorotzkin, 1985).

Finally, the present findings cannot explain *why* perfectionistic striving was associated with higher levels of pride after success, whereas conditional acceptance was associated with higher levels of shame and guilt after failure and lower levels of pride after success and failure. According to attributional theories of emotion (e.g., Weiner, 1986), feelings of pride, shame, and guilt are a result of different attributional processes of success and failure. Studies on perfectionism and attribution of success and failure (Speirs Neumeister, 2004; Stoeber & Becker, in press) show that self-oriented striving for perfection is associated with self-serving attributions (e.g., attributing success internally and failure externally) whereas socially prescribed perfectionism is associated with self-depreciating attributions (e.g., attributing failure internally and success externally) which may explain why perfectionistic striving predicted feelings of pride after success whereas conditional acceptance predicted shame and guilt after failure. Moreover, Shafran's theory

of clinical perfectionism (Shafran et al., 2002) suggests that individuals who suffer from clinical perfectionism, when experiencing success, immediately reappraise the task as insufficiently demanding—and thus deprive themselves of experiencing any pride after success. Consequently, future studies investigating how perfectionism relates to pride, shame, and guilt after success and failure should take attributions of success and failure and appraisals of task difficulty into account.

Nonetheless, the present findings have important implications for the understanding of perfectionism because they provide further evidence that perfectionism is not necessarily associated with a general proneness to shame and guilt and an inability to experience pride (cf. Fedewa et al., 2005; Stoeber et al., 2007). Only individuals who believe that others' approval is conditional on being perfect seem unable to experience pride as they experienced less pride after both success and failure compared to individuals who do not hold such beliefs. Because previous research has found conditional acceptance to show a pattern of correlations suggesting that it is highly maladaptive (Campbell & Di Paula, 2002), researchers interested in maladaptive aspects of perfectionism may want to pay special attention to the conditional acceptance facet of socially prescribed perfectionism.

References

- Benson, E. (2003). The many faces of perfectionism. *Monitor on Psychology, 34*(10), 18.
- Campbell, J. D., & Di Paula, A. (2002). Perfectionistic self-beliefs: Their relation to personality and goal pursuit. In G. L. Flett & P. L. Hewitt (Eds.), *Perfectionism: Theory, research, and treatment* (pp. 181-198). Washington, DC: American Psychological Association.
- Cohen, J. (1992). A power primer. *Psychological Bulletin, 112*, 155-159.
- Enns, M. W., & Cox, B. J. (2002). The nature and assessment of perfectionism: A critical analysis. In G. L. Flett & P. L. Hewitt (Eds.), *Perfectionism: Theory, research, and treatment* (pp. 33-62). Washington, DC: American Psychological Association.
- Fedewa, B. A., Burns, L. R., & Gomez, A. A. (2005). Positive and negative perfectionism and the shame/guilt distinction: Adaptive and maladaptive characteristics. *Personality and Individual Differences, 38*, 1609-1619.
- Fee, R. L., & Tangney, J. P. (2000). Procrastination: A means of avoiding shame or guilt? *Journal of Social Behavior and Personality, 15*, 167-184.
- Flett, G. L., Besser, A., Davis, R. A., & Hewitt, P. L. (2003). Dimensions of perfectionism, unconditional self-acceptance, and depression. *Journal of Rational-Emotive & Cognitive-Behavior Therapy, 21*, 119-128.
- Flett, G. L., Besser, A., & Hewitt, P. L. (2005). Perfectionism, ego defense styles, and depression: A comparison of self-reports versus informant ratings. *Journal of Personality, 73*, 1355-1396.
- Flett, G. L., & Hewitt, P. L. (2002). Perfectionism and maladjustment: An overview of theoretical, definitional, and treatment issues. In P. L. Hewitt & G. L. Flett (Eds.), *Perfectionism: Theory, research, and treatment* (pp. 5-31). Washington, DC: American Psychological Association.

- Frazier, P. A., Tix, A. P., & Barron, K. E. (2004). Testing moderator and mediator effects in counseling psychology research. *Journal of Counseling Psychology, 51*, 115-134.
- Frost, R. O., Marten, P., Lahart, C., & Rosenblate, R. (1990). The dimensions of perfectionism. *Cognitive Therapy and Research, 14*, 449-468.
- Hewitt, P. L., & Flett, G. L. (1988). *MPS*. Unpublished manuscript, York University, Ontario, Canada.
- Hewitt, P. L., & Flett, G. L. (1991). Perfectionism in the self and social contexts: Conceptualization, assessment, and association with psychopathology. *Journal of Personality and Social Psychology, 60*, 456-470.
- Hill, A. P., Hall, H. K., Appleton, P. R., & Kozub, S. A. (in press). Perfectionism and burnout in junior elite soccer players: The mediating influence of unconditional self-acceptance. *Psychology of Sport and Exercise*.
- Hill, R. W., Huelsmann, T. J., Furr, R. M., Kibler, J., Vicente, B. B., & Kennedy, C. (2004). A new measure of perfectionism: The Perfectionism Inventory. *Journal of Personality Assessment, 82*, 80-91.
- Klibert, J. J., Langhinrichsen-Rohling, J., & Saito, M. (2005). Adaptive and maladaptive aspects of self-oriented versus socially prescribed perfectionism. *Journal of College Student Development, 46*, 141-156.
- Lundh, L.-G. (2004). Perfectionism and acceptance. *Journal of Rational Emotive and Cognitive Behavior Therapy, 22*, 255-269.
- Lundh, L.-G., Saboonchi, F., & Wångby, M. (in press). The role of personal standards in clinically significant perfectionism. A person-oriented approach to the study of patterns of perfectionism. *Cognitive Therapy and Research*.
- Lutwak, N., & Ferrari, J. R. (1996). Moral affect and cognitive processes: Differentiating shame from guilt among men and women. *Personality and Individual Differences, 21*,

891-896.

Marschall, D. E., Saftner, J., & Tangney, J. P. (1994). *The State Shame and Guilt Scale*.

George Mason University, Fairfax, VA.

Nummenmaa, L., & Niemi, P. (2004). Inducing affective states with success-failure manipulations: A meta-analysis. *Emotion, 4*, 207-214.

Nunnally, J. C., & Bernstein, I. (1994). *Psychometric theory* (3rd ed.). New York: McGraw-Hill.

Pritchett, M. (2006). *The best of Matt 2006*. London: Orion.

Riley, C., Lee, M., Cooper, Z., Fairburn, C. G., & Shafran, R. (2007). A randomised controlled trial of cognitive-behaviour therapy for clinical perfectionism: A preliminary study. *Behaviour Research and Therapy, 45*, 2221-2231.

Riley, C., & Shafran, R. (2005). Clinical perfectionism: A preliminary qualitative analysis. *Behavioural and Cognitive Psychotherapy, 33*, 369-374.

Scott, J. (2007). The effect of perfectionism and unconditional self-acceptance on depression. *Journal of Rational-Emotive & Cognitive-Behavior Therapy, 25*, 35-64.

Speirs Neumeister, K. L. (2004). Interpreting successes and failures: The influence of perfectionism on perspective. *Journal for the Education of the Gifted, 27*, 311-335.

Shafran, R., Cooper, Z., & Fairburn, C. G. (2002). Clinical perfectionism: A cognitive-behavioural analysis. *Behaviour Research and Therapy, 40*, 773-791.

Shafran, R., Cooper, Z., & Fairburn, C. G. (2003). "Clinical perfectionism" is not "multidimensional perfectionism": A reply to Hewitt, Flett, Besser, Sherry & McGee. *Behaviour Research and Therapy, 41*, 1217-1220.

Sorotzkin, B. (1985). The quest for perfection: Avoiding guilt or avoiding shame? *Psychotherapy, 22*, 564-571.

Stoeber, J., & Becker, C. (in press). Perfectionism, achievement motives, and attribution of

- success and failure in female soccer players. *International Journal of Psychology*.
- Stoeber, J., Harris, R. A., & Moon, P. S. (2007). Perfectionism and the experience of pride, shame, and guilt: Comparing healthy perfectionists, unhealthy perfectionists, and nonperfectionists. *Personality and Individual Differences, 43*, 131-141.
- Stoeber, J., & Otto, K. (2006). Positive conceptions of perfectionism: Approaches, evidence, challenges. *Personality and Social Psychology Review, 10*, 295-319.
- Tangney, J. P. (2002). Perfectionism and the self-conscious emotions: Shame, guilt, embarrassment, and pride. In P. L. Hewitt & G. L. Flett (Eds.), *Perfectionism: Theory, research, and treatment* (pp. 199-215). Washington, DC: American Psychological Association.
- Trumpeter, N., Watson, P. J., & O'Leary, B. J. (2006). Factors within multidimensional perfectionism scales: Complexity of relationships with self-esteem, narcissism, self-control, and self-criticism. *Personality and Individual Differences, 41*, 849-860.
- Van Yperen, N. W. (2006). A novel approach to assessing achievement goals in the context of the 2 × 2 framework: Identifying distinct profiles of individuals with different dominant achievement goals. *Personality and Social Psychology Bulletin, 32*, 1432-1445.
- Weiner, B. (1986). *An attributional theory of motivation and emotion*. New York: Springer.

Footnotes

¹Item numbers correspond to item numbers from Hewitt and Flett (1988).

Table 1
Perfectionism Facets: Descriptive Statistics and Correlations

Perfectionism	<i>M</i>	<i>SD</i>	Correlation		
			1	2	3
Self-oriented perfectionism					
1. Perfectionistic striving	5.21	0.98			
2. Importance of being perfect	3.99	1.34	.71***		
Socially prescribed perfectionism					
3. Others' high standards	3.78	1.04	.23*	.41***	
4. Conditional acceptance	2.79	0.73	-.11	.26*	.36**

Note. $N = 67$. Scores are mean scores with a possible range of 1–7 (“strongly disagree”–“strongly agree”).

* $p < .05$, ** $p < .01$, *** $p < .001$.

Table 2
*Manipulation Check: State Pride, Shame, and Guilt Following
 Success or Failure*

Affect	Success		Failure		<i>t</i> (65)
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	
Pride	3.67	0.76	2.59	0.92	-5.28***
Shame	1.07	0.15	1.61	0.82	3.80***
Guilt	1.26	0.50	1.76	0.90	2.84***

Note. *N* = 67 (success: *n* = 34; failure: *n* = 33). Scores are mean scores with a possible range of 1–5 (“not feeling this way at all”–“feeling this way very strongly”).

****p* < .001.

Table 3

Correlations of Perfectionism Facets with State Pride, Shame, and Guilt Following Success or Failure

Condition and affect	Pride		Shame		Guilt	
	Success	Failure	Success	Failure	Success	Failure
Self-oriented perfectionism						
Perfectionistic striving	.29*	-.13	-.06	.33*	-.12	.35*
Importance of being perfect	.05	-.29	-.10	.40*	-.21	.46**
Socially prescribed perfectionism						
Others' high standards	-.26	-.30*	.11	.30*	.01	.23
Conditional acceptance	-.48**	-.35*	-.01	.39*	-.03	.36*

Note. $N = 67$ (success: $n = 34$; failure: $n = 33$).

* $p < .05$, ** $p < .01$.

Table 4

Summary of Hierarchical Regression Analyses Predicting Pride, Shame, and Guilt from Experimental Condition, Perfectionism Facets, and the Interaction of Experimental Condition and Perfectionism Facets

Steps and variables	Pride		Shame ^a		Guilt ^a	
	<i>B</i>	ΔR^2	<i>B</i>	ΔR^2	<i>B</i>	ΔR^2
Step 1		.300***		.171***		.097*
Condition	-.54***		.24***		.22**	
Step 2		.136***		.172**		.117
Condition	-.52***		.26***		.23**	
Perfectionistic striving	.08		.14		.12	
Importance of being perfect	-.03		-.05		-.04	
Others' high standards	-.15		.07		.05	
Conditional acceptance	-.27*		.21**		.22*	
Step 3		.023		.151**		.138*
Condition	-.51***		.26***		.23**	
Perfectionistic striving	.11		.17		.13	
Importance of being perfect	-.07		-.14		-.09	
Others' high standards	-.15		.07		.07	
Conditional acceptance	-.25*		.23**		.19*	
Condition × perfectionistic striving	-.15		.16		.09	
Condition × importance of being perfect	.00		-.10		.08	
Condition × others' high standards	.00		.04		-.02	
Condition × conditional acceptance	.03		.24**		.21*	

(Table 4, continued)

Note. $N = 67$ (success: $n = 34$; failure: $n = 33$). Condition = experimental condition effect-coded with success = -1 and failure = $+1$.

^a $N = 66$ (success: $n = 34$; failure: $n = 32$).

* $p < .05$, ** $p < .01$, *** $p < .001$.