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Parental and adolescent perfectionism as predictors of adolescent optimism

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Abstract— This study aims to examine the predictive relationships between parental and adolescent perfectionism and adolescent optimism. The study group comprises 337 children attending the sixth, seventh, and eighth grades of primary school, and their parents. The children and their parents were distributed as follows: 180 girls (53.4%) and 157 boys (46.6%); 174 mothers (51.6%) and 163 fathers (48.4%). The research study group was determined by the convenience sampling method. In the study, MPS-Multidimensional Perfectionism Scale, Child and Adolescent Perfectionism Scale, and Optimism-Pessimism Scale in Adolescents were used as data collection tools. The findings of the study indicate that the regression model is statistically significant ($F(5,336) = 9.89; p = .00$). Upon examining the model, it was observed that parental self-oriented perfectionism did not significantly contribute to the model in predicting adolescent optimism ($t = .06; \beta = .003; p > .05$). The other-oriented and socially prescribed perfectionism of the parent and the self-oriented and socially prescribed perfectionism of the adolescent contribute significantly to the model. It can be stated that the four variables that contribute significantly to the model explain approximately 13% of the variance of adolescent optimism ($R^2 = .13$). When the relative effect of the predictor variables is examined, it is evident that self-oriented perfectionism of adolescents is the variable that makes the strongest contribution to the model.

Index Terms— Adolescents, Parent, Perfectionism, Optimism

I. INTRODUCTION

In general, perfectionism is defined as expecting a higher performance from oneself or others than necessary (Frost et al., 1990). Hewitt & Flett (1991) classify the three dimensions of perfectionism, including personal and social components, as self-oriented perfectionism, perfectionism towards others, and socially oriented perfectionism. These dimensions include high standards expected from oneself or others and high standards expected from others (Hewitt & Flett, 1991). It is thought that perfectionism is transmitted across generations (Flett et al., 2002). This is particularly the case given that familial criticism and expectations, which are social dimensions of perfectionism, increase during adolescence, which creates anxiety about making mistakes in adolescents, so the emergence of negative perfectionism may be easier (Hamarta, 2009). In this context, there may be a relation between parental perfectionism and adolescent optimism.

Seligman (1998), one of the pioneers of positive psychology, examines the concept of optimism as a way of explaining events by focusing on how individuals explain the difficulties they face. Optimism in adolescence can be defined as the ability to think that the problem is temporary in the encountered difficulties and to produce functional solutions to the problem. Due to the changes experienced in many areas in the life of the adolescent who is in a constant state of change, stress sources that make it difficult for him to adapt to his environment may arise. While overcoming these stress sources, the tendency to perceive positive events rather than negative events in life can protect the individual from some emotional and behavioral problems (Eryilmaz & Atak, 2011). On the other hand, it is stated that negative perfectionism in adolescence can be the source of emotional or behavioral problems such as depression, anxiety and anger (Erözkan, 2009). At this point, explaining the relationship between optimism and both parental and adolescent perfectionism can contribute to adolescent mental health studies. This study aims to examine the predictive relationships between parental and adolescent perfectionism and adolescent optimism.

II. METHODS

The predictor variables of this study, which employed the relational survey model, a quantitative research method, were parental perfectionism and adolescent perfectionism. The predicted variable was adolescent optimism.

Study group

The study group comprises 337 children attending the sixth, seventh, and eighth grades of primary school, and their parents. The children and their parents were distributed as follows: 180 girls (53.4%) and 157 boys (46.6%); 174 mothers (51.6%) and 163 fathers (48.4%). The research study group was determined by the convenience sampling method, which involved both parents and children volunteering to participate.

Data Collection Tools

In the study, the MPS-Multidimensional Perfectionism Scale, developed by Hewitt et al. (1991) and adapted into

Turkish by Oral (1999), was employed to ascertain the levels of perfectionism exhibited by parents in three distinct categories: self-oriented, other-oriented, and socially prescribed perfectionism. The Child and Adolescent Perfectionism Scale, developed by Flett et al. (2000) and adapted into Turkish by Uz-Baş (2010), was employed to ascertain the perfectionism levels of adolescents in self-oriented and socially prescribed perfectionism. Finally, the measurements for optimism, which is the dependent variable of the study, were obtained with the Optimism-Pessimism Scale in Adolescents, developed by Çalışkan & Uzunkol (2018).

Data Collection Process and Analysis

Within the scope of the research, firstly, ethical permission was obtained from the Gaziantep University Social and Human Sciences Ethics Committee (decision dated 18.02.2021 and numbered 04). Then, legal permission was obtained from the Directorate of National Education. While some of the data were collected face-to-face, some of them were obtained through Google Forms. The students and parents participating in the study were given general information about the process and it was emphasized that the principles of confidentiality and voluntariness would be taken as basis. Data were collected from 6th, 7th, and 8th-grade students and their parents in 9 different schools in the 2020-2021 academic year. Correlation and regression techniques were used to analyze the data.

III. RESULTS

The analyses were conducted to determine the relationships between perfectionism in parents and adolescents and the optimism of adolescents. To this end, the correlation coefficient was calculated and shown table 1.

Table 1. Mean, standard deviation and correlations (n= 337; *p< .01)

| | 1 | 2 | 3 | 4 | 5 | 6 |
|-------------------|------|------|-------|------|------|---|
| Parent | | | | | | |
| 1. SOP | - | | | | | |
| 2. OOP | .20* | - | | | | |
| 3. SPP | .36* | .27* | - | | | |
| Adolescent | | | | | | |
| 4. SOP | .11 | .04 | .03 | - | | |
| 5. SPP | -.01 | .06 | .17* | .41* | - | |
| 6. Opt. | -.01 | .07 | -.19* | .22* | -.10 | - |

| | | | | | | |
|-----------|------|------|------|------|------|------|
| M | 4.58 | 4.04 | 3.62 | 3.61 | 3.43 | 4.05 |
| Sd | .80 | .91 | .85 | .63 | .79 | .76 |

SOP: Self-oriented perfectionism; OOP: Other-oriented perfectionism; SPP: Socially prescribed perfectionism; Opt: Optimism

Table 1 indicates a significant correlation between adolescent optimism and the self-oriented perfectionism of adolescents and socially prescribed perfectionism of parents. Following the correlation analysis, regression analysis was performed for the prediction of adolescent optimism and the results are presented in Table 2.

Table 2
Regression analysis to predict adolescent optimism

| Effect | B | SE | β | 95% CI | | P |
|--------|------|-----|------|--------|-------|------|
| | | | | lower | upper | |
| Consta | 3,60 | .35 | - | 2,92 | 4,27 | .000 |
| SOP-P. | .003 | .05 | .003 | -.10 | .11 | .952 |
| OOP-P. | .11 | .05 | .13 | .02 | .19 | .018 |
| SPP-P. | -.18 | .05 | -.20 | -.28 | -.08 | .001 |
| SOP-A. | .35 | .07 | .29 | .22 | .49 | .000 |
| SPP-A. | -.18 | .06 | -.19 | -.29 | -.07 | .001 |

R= .36 R2= .13 F(5,336)= 9.89p= .00

SOP-P: Self-oriented perfectionism of parent; OOP-P: Other-oriented perfectionism of parent; SPP-P: Socially prescribed perfectionism of parent; SOP-A: Self-oriented perfectionism of adolescent; SPP-A: Socially prescribed perfectionism of adolescent

The findings in Table 2 indicate that the model is statistically significant (F(5,336)= 9.89; p=.00). Upon examination of the model, it was observed that parental SOP did not contribute significantly to the model in predicting adolescent optimism (t= .06; β= .003; p> .05). The other-oriented and socially prescribed perfectionism of the parent and the self-oriented and socially prescribed perfectionism of the adolescent contribute significantly to the model. It can be stated that the four variables that contribute significantly to the model explain approximately 13% of the variance of adolescent optimism (R2= .13). When the relative effect of the predictor variables is examined, it is evident that self-oriented perfectionism of adolescents is the variable that makes the strongest contribution to the model.

IV. CONCLUSION

Upon analysis of the research results, it was found that parental expectations and standards for themselves do not have a predictive effect on adolescent optimism. Conversely, it was established that the social orientation of perfectionism exhibited by both parents and adolescents was a significant predictor of adolescent optimism. In socially orientated perfectionism, an individual believes that significant others set high standards for them and that they should strive to meet these standards (Hewitt & Flett, 1991). Should he or she fail to meet these unattainable standards, the risk of negative criticism and rejection is a significant concern (Frost et al., 1993). Given that the need for approval from others is particularly pronounced during adolescence, it is understandable that the socially oriented perfectionism of parents and the unrealistically high standards set by the adolescent can affect the optimism level of the adolescent. The most significant contribution to the explanation of the optimism level was provided by the adolescent's self-oriented perfectionism. In self-oriented perfectionism, the individual sets unattainable standards for themselves and strives to achieve them. The individual in question generalises the slightest mistake, which they define as a failure in their efforts, to all areas of their life. The individual in question adheres to the "all or nothing" mindset, engaging in excessive self-evaluation. Consequently, regardless of the quality of the completed task, the perfectionist views it as a failure (Hewitt & Flett, 1991). An adolescent who sets excessively strict standards and rules for themselves is likely to be prone to catastrophic thoughts even in the case of minor mistakes, which in turn will result in a more pessimistic mindset.

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