Perfectionism and Suicide Ideation
An Assessment of the Specific Vulnerability Hypothesis and Stress Generation Model

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INTRODUCTION
• Perfectionistic traits have been directly linked to psychological distress and can act as vulnerability factors in various forms of psychopathology including suicidality (for a review, see Flett & Hewitt, 2002).
• Socially prescribed perfectionism (SPP; i.e., the perception that others have unrealistic standards and ideals for one's behaviour) has been most consistently linked with measures of suicide. Self-oriented perfectionism (SOP), i.e., an intrapersonal trait dimension that involves the requirement for one's own perfection has only been inconsistently associated with suicidality.
• According to the Specific Vulnerability Hypothesis, stressful events (e.g., achievement and interpersonal) that are congruent with the particular perfectionism dimension will likely lead to elevated suicidal ideation (Hewitt & Flett, 1993). For instance, SOP is hypothesized to interact with achievement-related stressors to predict suicidality.
• Hewitt and Flett (2002) proposed the Stress Generation Model in which perfectionism creates stress and failures due to their unrealistic expectations, resulting in increased suicidality.
• The general purpose of the study was to examine whether perfectionistic traits create and interact with life stress in influencing suicide ideation over time.

METHODS
Participants and Procedure
• 487 participants (175 males, 312 females) recruited from the Metro Vancouver community via newspaper ads, followed 6 months later (n=449 at Time 2).
• Participant mean age =58.6 yrs (SD=11.7, Range: 35-90 yrs). 86.5% European Canadians, 8.3% Asian Canadians, 1.2% First Nations, 0.2% Hispanic Canadians, and 3.0% others.

Selected Measures
Time 1: Multidimensional Perfectionism Scale (MPS; Hewitt & Flett, 1991)
• Self-oriented perfectionism (SOP) e.g., “When I am working on something, I cannot relax until it is perfect”
• Socially prescribed perfectionism (SPP) e.g., “The people around me expect me to succeed at everything I do”

Time 2: Life Events Inventory (LEI; Cochrane & Robertson, 1973)
• Two independent raters categorized stressors into achievement versus interpersonal domains (100% inter-rater agreement)
• Examples of achievement stressor include unemployment and homelessness. Examples of interpersonal stressor include sexual difficulties and breakup of a family.
• Scale of Suicide Ideation (SSI; Beck, Steer, & Ranieri, 1988)
• A measure of overall risk for suicidal behaviour including suicidal attempts, frequency and attitude toward ideation, and specific plans.

RESULTS
Table 1. Zero-order correlations among measures of perfectionism, stress, and suicide ideation (n=449).

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<th>Self-oriented Perfectionism</th>
<th>Socially Prescribed Perfectionism</th>
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<tbody>
<tr>
<td>Achievement Stressors</td>
<td>.11*</td>
<td>.23**</td>
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<tr>
<td>Interpersonal Stressors</td>
<td>.12*</td>
<td>.24**</td>
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<tr>
<td>Suicide Ideation</td>
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DISCUSSION
Main Findings:
• Self-oriented perfectionism (SOP) and socially prescribed perfectionism (SPP) are significantly correlated with levels of suicide ideation six months later.
• Consistent with the Specific Vulnerability Hypothesis, a significant Perfectionism x Stress interaction was found for self-oriented perfectionism and achievement stressors in predicting suicide ideation, six months later.
• In keeping with the Stress Generation Model, mediational analyses indicated that stress (i.e., achievement and interpersonal stressors) fully mediated the link between self-oriented perfectionism and suicide ideation, and stress partially mediated the link between socially prescribed perfectionism and suicide ideation six months later.
• Together, these findings suggest that perfectionism traits act as vulnerability factors that enhance and generate stresses in influencing suicide ideation over time among community adults.

Clinical Implications:
• Understanding how perfectionism generates and interacts with acute or chronic life stress can be very helpful in identifying and treating those who display suicidal ideation or engage in suicide behaviour.
• When treating perfectionistic persons, a clinician should assess their appraisals of the ongoing stressors and events and inquire about suicidal thoughts because some perfectionists may actively conceal or hide such thoughts.

Future Directions:
• Replication of the study using measures of stress other than self reports, e.g., daily, physiological measures, and etc.
• Testing the perfectionism-suicide models among other ethnic groups.

SELECTED REFERENCE

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