The Impact of the Authoritarian Parenting Style and Birth Order on Perfectionism from a Cultural Perspective

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Abstract

The global prevalence of perfectionism has steadily increased since the 1980's (Curran & Hill, 2019; Flett & Hewitt, 2020). Previous research has studied parenting styles, personality traits and birth order as potential risk factors for developing perfectionism. However, there is limited research that studies the interaction of these factors, in addition to cultural differences on the development of perfectionism. A total of 170 participants aged 18 to 59 (M = 21.47, SD = 5.28) responded to an online survey measuring maternal and paternal authoritarian parenting styles, the personality traits of neuroticism and conscientiousness, collectivism and individualism, birth order, feelings of depression and anxiety, and three perfectionistic traits, self-oriented (SOP), socially prescribed (SPP), and other-oriented (OOP) perfectionism. Results revealed that higher levels of collectivism, lower levels of maternal authoritarian parenting, and not being the oldest sibling predicted lower levels of socially prescribed perfectionism. In addition, higher levels of both collectivism and individualism predicted higher levels of self-oriented perfectionism. The results of this study show support for the role of cultural traits on the influence of SOP, SPP, and OOP. These results also create areas of exploration for culturally competent treatment methods.

Keywords: perfectionism, authoritarian parenting style, birth order, culture

The Impact of the Authoritarian Parenting Style and Sibling Birth Order on Perfectionism from a Cultural Perspective

Across four decades, a substantial body of evidence has investigated perfectionism, determining that it is a complex global phenomenon with multiple pathways for its onset (Flett & Hewitt, 2020; Frost et al., 1990; Hewitt & Flett, 1991; Macedo et al., 2017). Perfectionism has been defined as a multidimensional personality trait where an individual expresses a greater desire for achievement than what is expected of them. Perfectionists set unrealistic standards for themselves, consider themselves a failure if they do not fully meet these self-imposed standards (all or none thinking), generalize feelings of failure to other domains in their life, and engage in harsh critical self-talk (Burns, 1980; Chen et al., 2015; Hamachek, 1978; Hewitt & Flett, 1991; Hollender, 1965; Macedo et al., 2017; Pacht, 1984). While perfectionists tend to have higher achievement motivation, it is also associated with psychopathology (Limburg et al., 2017), particularly anorexia nervosa (Dahlenburg et al., 2019), depression (Etherson et al., 2022), personality disorders (Stoeber et al., 2015; Smith et al., 2017a) and suicide ideation (Dean & Range, 1996; Hewitt et al., 2006; Smith et al., 2017b).

Although perfectionism has been categorized as a personality trait, a meta-analysis conducted by Flett & Hewitt (2020) demonstrated that perfectionism was not entirely explained as a combination of the five-factor model of personality traits: neuroticism, openness, conscientiousness, agreeableness, and extraversion. For example, while perfectionists are more likely to experience greater levels of neuroticism and conscientiousness (Kim et al., 2015; Samuel et al., 2012), perfectionism cannot be explained by these traits alone. Identifying perfectionism simply as a personality trait limits the empirical understanding of perfectionism and its impact on an individual (Flett & Hewitt, 2020). Previous research on perfectionism has

resulted in two main avenues of conceptualizing perfectionism: perfectionistic attributes (Frost et al., 1990) and perfectionistic traits (Hewitt & Flett, 1991). Frost et al., (1990) introduced six attributes frequently associated with perfectionism: personal standards, organization, doubts about actions, concern over mistakes, parental expectations, and parental criticism. Research on perfectionism has also focused on the underlying mechanisms, such as cognitive perfectionism and personal striving perfectionism (Flett & Hewitt, 2020). However, Hewitt and Flett (1991) introduced three traits (or types) of perfectionism, and this conceptualization has been widely accepted by other researchers (see Habke & Flynn, 2002, and Hewitt & Flett, 2004, for reviews). These three traits are self-oriented perfectionism (SOP), socially prescribed perfectionism (SPP), and other-oriented perfectionism (OOP).

SOP is defined as constantly setting high, unachievable standards for oneself. SOPs believe their best is not enough and should always work towards improving themselves. This mindset leads to strenuous attempts to maintain or achieve their self-imposed standards, including harsh self-criticism as they work towards achieving these standards or if they fail. Furthermore, even if SOPs meet these very high standards they set for themselves, they will criticize themselves for not exceeding them. SOPs are more likely to believe that their worth is directly related to how perfect they are, which may contribute to the onset of depression (Flett et al., 2014), eating disorders (Patterson et al., 2021), apathy (Stoeber, 2015), and increased neuroticism (Klibert et al., 2005). It also leads to an increased risk of lower levels of overall satisfaction with life and academic confidence (Stoeber & Childs, 2011). In addition to these traits, SOPs are less likely to showcase aggressive humor and competitive behaviors because of fear of failure (Stoeber, 2015).

In contrast, socially prescribed perfectionists (SPP) believe that other people hold extremely high, unrealistic standards that the perfectionist needs to fulfill. They feel their only value to other people is when they are upholding these perceived standards, thus creating the impression of others constantly demanding perfectionism of them. Similar to SOPs, they engage in harsh self-criticism as they work towards these standards and if they fail to reach them. Moreover, SPPs feel both high levels of anxiety and guilt and/or shame in their failure. SPPs are also more likely to express self-deprecating humor and to ruminate over perceived social infractions (Macedo et al., 2017; Stoeber, 2015). Other outcomes associated with SPP are psychological dysfunction, depression, neuroticism, loss of self-control, and suicide ideation (Flett et al., 2014; Klibert et al., 2005; Patterson et al., 2021).

The need for perfectionism in SOP and SPP is internally-driven, such that the person themselves is placing these standards on themselves. For SOP, the perfectionist is overly critical of their actions because they think that they can do better. For SPP, the perfectionist is overly critical of themselves because they believe that others expect them to be better, even though it is the perfectionist themselves who are imposing these views (Birch et al., 2019; Flett & Hewitt, 1991; Stoeber, 2015; Walton et al., 2018). Unlike the other two traits, other-oriented perfectionists (OOP) are critical of others rather than themselves. They place unrealistically high standards on others and react harshly when others do not meet these standards. This type of perfectionism tends to involve a greater number of overt narcissistic traits, particularly a greater sense of entitlement; Machiavellianism, the increased ability to be manipulative towards others; and psychopathy, the decreased ability to be emotional and caring (Stoeber, 2015). Moreover, they tend to be socially dominant, engage in more aggressive humor and place their needs over others (greater individualistic tendencies; Stoeber, 2015).

The Perfectionism Social Disconnection Model (PSDM) developed by Hewitt et al., (2006), is a potential explanation as to why people with either SOP or SPP are more likely to experience depression, suicidal ideation, and suicide completion. This model views SOP and SPP as risk factors for an increased chance of depression and suicidality because of the perfectionist's misguided perception that they will never accomplish the goals that they or others set for themselves, and thus never receive others' approval. This misguided perception then leads to the perfectionist feeling lonely, disconnected, and as if they do not matter. Evidence supports that social disconnection is particularly acute for SPP (Barnett & Johnson, 2016; Etherson et al., 2022).

Given the negative outcomes associated with perfectionism, it is of concern that Curran and Hill (2019) found a significant increase in all three perfectionist traits in Canada, the United Kingdom, and the United States (U.S.) over the past thirty years. Possible reasons include an increase in parental control and pressure to succeed in highly competitive environments (Curran & Hill, 2019). Given the severity of outcomes associated with perfectionism, the goal of this research is to further examine environmental factors that may contribute to the onset of perfectionism. This research examined the influence of birth order and parenting styles on SOP, SPP and OPP, and whether this differed by culture, specifically individualism and collectivism. While previous literature has examined the impact of parenting styles (Abd-El-Fattah & Fakhroo, 2012; Besharat et al., 2011; Ge et al., 2023; Smith et al., 2019; Yildiz et al., 2020), there is more limited research examining the role of birth order and culture. Given that birth order and culture vary based on an individual's demographic composition, containing factors such as family composition and/or geographic placement, these factors should be assessed on an individual basis. As in, it is untrue to claim that all children born into a specific demographic will

experience the same onset progression for perfectionism. Moreover, despite four decades of empirical research, perfectionism is still considered a productive line of research because of the nonlinear nature of factors that predict the onset of perfectionism, the lack of diverse populations in studies (see Flett & Hewitt, 2020 for an overview), and the limited research pertaining to how cultural interpretations impact an individual's onset and progression of perfectionism.

The following section presents research pertaining to the impact of the authoritarian parenting style, culture, and sibling birth order on the development of SOP, SPP, and OOP. This upcoming section will also address the importance of achieving cultural diversity in the participants that make up a sample, as opposed to country-of-origin based diversity. Although this study is assessing culture as a predictor variable, culture is being used to assess how ingrained societal norms can impact an individual's onset and progression of perfectionism. Given the multidimensional nature of perfectionism, this cultural impact cannot be generalized and will be used to explain each individual's onset trajectory. This study contains a cultural component by assessing the role of individualism and collectivism on perfectionism. To include samples from both individualistic and collectivistic cultures, participants were recruited from the U.S and Egypt. However, Triandis (1995) notes that cultural identities within countries are not uniform and can include multiple cultures and subcultures. For example, while the U.S. is considered an individualistic society, it has a diverse population with many groups originating from countries that are collectivistic in nature. Given this prior knowledge, the presence of both cultural constructs is expected to be reported in both the U.S. and Egypt. Additionally it is expected that the cultural impact will vary with each participant, given that every individual will have different interpretations and internalizations pertaining to their cultural norms.

Individualism and collectivism differ in certain fundamental ways, such as goal-orientation and motivation, that could explore potential cultural differences on the onset of perfectionism. Therefore, I will explore the roles of individualism (self-based goals) and collectivism (societal-based motivations) to determine if the emphasis on our goals is a protective or risk factor for the onset of perfectionism. Individualist societies typically are represented by an ideology that focuses on an individual's pursuit to achieve personal goals. This pursuit typically contains an individual's emphasis on self-motivation and self-interest and prioritizing personal norms rather than societal norms (Triandis, 1995). Prioritizing the self over the society forces members of an individualistic society to be in competition with their peers and to focus on goal-oriented actions. In collectivist societies, it is more common for people to focus on the group-effort of elevating their society, even if it involves self-sacrifice (Triandis, 1995). There is a strong belief in social hierarchies (belief in authority), following social conventions, and prioritizing the needs of their family over personal ones (Hofstede & Bond, 1988). Although pre-existing research typically assigns these cultural orientations to a participants' country of origin, this research will forgo this strategy and use a holistic method- where participants will declare themselves either as individualistic or collectivistic rather than being defined as one or the other based on their country of origin.

When group effort is favored over individual accomplishments, researchers discovered that people with collectivistic beliefs tend to take on the traits of an adaptive perfectionist: setting high standards for themselves but being content if they do not achieve their desired results (Abd-El-Fattah & Fakhroo, 2012). This is also supported by DiBartolo & Rendon, (2012), who found African Americans presented with lower levels of concern over evaluative, overly self-critical decisions than their White and Asian American peers, but also reported higher parental

standards. Despite these findings, there is limited research examining the effect of culture as a protective or risk factor for perfectionistic onset (Walton et al., 2018). Although they did not determine the opposite to be present for individualistic participants, there was speculation as to what may be a stronger predictor variable for individualism. There may be a specific aspect of perfectionism, such as neurotic behaviors concerning self-doubt and an obsessive concern over making mistakes (Walton et al., 2018). One explanation for this presentation is the increased level of competition present in individualistic societies, due to its' self-directed nature (Hofstede, 2001). Inherently, this competitive nature of prioritizing the self makes it more likely that the individualist's best efforts are not enough. Thus, this research aims to help mitigate this gap by explicitly testing the impact of an individual's cultural ideology on their onset of perfectionistic traits, as opposed to generalizing the participants' culture based on their country of origin.

A limitation in the research on perfectionism is that most of it is conducted in Western countries (DiBartolo & Rendon, 2010; Rudy & Grusec, 2006; Walton et al., 2018). This research will address this limitation by recruiting a sample from Egypt, and by examining cultural differences in the U.S. sample. Examining perfectionism from a cultural perspective has clinical implications for general treatment and for culture sensitivity. The typical clinical treatment model for perfectionism coincides with attributes of individualistic, Western culture. This lack of cultural sensitivity eliminates typical factors of Eastern cultures, which can be detrimental to treating a patient with an Eastern cultural background.

There is substantial research to support that the authoritarian parenting style is a strong predictor of perfectionism, regardless of participant country of origin (Besharat et al., 2011; Walton et al., 2018; Yildiz et al., 2020). The authoritarian parenting style consists of exceedingly high levels of parental control with little to no levels of parental warmth (Baumrind, 1966). This

parenting style is linked to higher levels of SOP and SPP. Yildiz et al. (2020) conducted a meta-analysis on empirical studies examining parenting styles and perfectionism published within the past thirty years. The results revealed higher levels of striving for perfectionism in children raised in authoritarian households. In addition, the authoritarian parenting style was associated with increased self-doubt and concerns over making mistakes, traits that are part of SOP and SPP. The effect of the authoritarian parenting style on the onset of perfectionism has also been investigated from a cross-cultural perspective. Besharat et al., (2011) examined the effect of Iranian parenting styles on their children's perfectionistic traits. To test this, they included the Tehran Multidimensional Perfectionism Scale (Besharat, 2007) and the Parental Authority Questionnaire (Buri, 1991). The Tehran Multidimensional Perfectionism Scale (Besharat, 2007) measures SOP, SPP, and OOP, but revised for the Iranian population. The Parental Authority Questionnaire (PAQ; Buri, 1991) measures the participant's perception of their parents' parenting styles. The results revealed greater levels of all three perfectionistic traits with the authoritarian parenting style. Thus, parents with strict disciplinary measures and low emotional warmth increase the likelihood to have children who internalize these harsh expectations and do not know how to think from a non-perfectionist perspective (Besharat et al., 2011).

In further support of the authoritarian parenting style, Walton et al., (2018) examined the effect of parenting styles, personality traits, and the onset of perfectionism with a college student sample from the U.S, Qatar, Sudan, and Palestine. They tested this with the Frost Multidimensional Perfectionism Scale, which measures the six attributes of perfectionism (Frost et al. 1990); the Hewitt-Flett Multidimensional Perfectionism Scale, which measures the three types of perfectionism (Hewitt & Flett, 1990); PAQ (Buri, 1991); and the Big Five Inventory, which measures the Big Five personality traits (John et al., 1991). The authoritarian parenting

style was associated with children who were anxious and filled with self-doubt, not receptive to critical feedback, overly concerned with making mistakes, and feeling that they need to be perfect all the time. Overall, the authors found that for both the U.S and Middle East participants raised in authoritarian households had a greater risk of developing SPP. While Middle Eastern participants reported higher levels of parental expectations than American participants, they also reported more SOP than their American counterparts (Walton et al., 2018).

Abd-El-Fattah & Fakhroo (2012) measured the perceived impact of paternal psychological control, a trait of the authoritarian parenting style, on Egyptian adolescent perfectionism. In this study, psychological control refers to the manipulation, punishment, and level of compliance to their fathers' goals for the adolescent. Paternal psychological control often occurs through enforcing conditions of worth and withdrawing affection towards the adolescent when they do not comply with their father's wishes for the adolescent. The researchers measured paternal psychological control through three different domains: direct expectations (by confronting the adolescent on what they should be doing), controlling expectations (the father's emotional reactions associated with the adolescent's acceptance/refusal to uphold expectations), and effort approval (the adolescent's perceptions of warmth and approval, often conditioned by a condition of warmth). To conduct their research, they used the SOP and SPP subscales of the Hewitt-Flett Multidimensional Perfectionism Scale (Hewitt & Flett, 1990); the concern over mistakes subscale of the Frost Multidimensional Perfectionism Scale (Frost et al., 1990); the Parental Goal Questionnaire (Hutchinson & Yates, 2008) to measure the father's direct expectations, controlling expectations, and effort approval; and the Rosenberg Self-Esteem Scale (Rosenberg, 1989) to measure the participant's overall feelings of self-worth and self-acceptance. The researchers discovered that a father with lower levels of controlling expectations

indicated a higher chance of the adolescent having SOP. Larger levels of paternal controlling expectations indicated a greater chance of the adolescent developing SPP and lower levels of self-esteem. In adolescents, lower levels of psychological control are associated with higher levels of SOP because the adolescent is able to set their own goals for self-efficacy. Adolescents with greater levels of psychological control are associated with higher levels of SPP because they internalize the father's high expectations and the critical nature of the feedback and motivation, often ensuring the adolescent feels that their worth is tied to their accomplishments alone.

There is a smaller body of research that has investigated the role of family relationships on perfectionism. Forer (1977) reported that first born children have a higher desire to uphold social expectations and high need for achievement, which are traits commonly associated with perfectionism. Moreover, Forer (1977) reported that later born children prefer social interactions over achievement, leading them to be less susceptible for developing perfectionistic traits. Strube and Otra (1982) found that first born children were more likely to exhibit Type A behavior. Type A behavior (high achievement standards, competitive nature, status-consciousness, detailed organization, etc.) is frequently associated with perfectionism. More recently, Siegle and Schuler (2000) investigated whether birth order is a protective or risk factor for the onset of perfectionism later in life. To conduct this study, they had American middle school students enrolled in the gifted and talented program complete the Frost Multidimensional Perfectionism Scale (Frost et al., 1990) and report their birth order. The results supported that first born children expressed greater concern for upholding parental expectations compared to their younger siblings. The authors explained that the reason why first-born children tend to report a greater concern for maintaining their parents' expectations is due to inexperienced first-time parents being stricter with their first child than with their younger children. This is because first-

time parents do not know how flexible normal development can be, thus they uphold a stricter regimen with their first child. These strict standards were shown to lead to an increased likelihood of perfectionist tendencies developing in first-born children later in life. These results are consistent with other research (Leman, 1985; Parker, 1997; Smith, 1990; Travis & Kohli, 1995).

Current Research

The goal of this research is to further examine the effect of maternal and paternal authoritarian parenting style and birth order on the onset of perfectionistic traits and how this onset may differentiate based on culture, in particular, individualism and collectivism. To explain the differences for the maladaptive and adaptive outcomes of perfectionism, I measured two of the Big-Five personality traits (neuroticism and conscientiousness). For the purpose of this study, participants were asked about their mother and father's authoritarian parenting styles, their culture, their birth order, the three perfectionism traits, levels of their neuroticism and conscientiousness, and the prevalence of depression and anxiety within the past two weeks.

For birth order, the study examined sibling order according to the seven-year birth order hypothesis (Adler, 1964). This hypothesis states that children less than seven years apart will express birth order traits relevant to their chronological order, but if there is a seven or more year gap between two siblings in chronological order, the traits reset (Adler, 1964). This means that if three children are each born two years apart, they are more likely to express the birth order traits relevant to their chronological order. However, if a fourth sibling is born when the third child is ten, the fourth child is more likely to express the traits of a first-born child. Siblings born outside of the seven-year period will not be considered in the data analysis.

Hypotheses

Hypothesis 1: For both individualistic and collectivistic participants, I hypothesize that there will be a higher prevalence of SOP (Smith, 2017a) and SPP (Besharat et al., 2018; Ge et al, 2023; Walton et al, 2018) in authoritarian households. However, there will be a greater reports of adaptive SOP for those with higher collectivistic traits, as measured by higher reported levels of conscientiousness and lower reports of depression/anxiety (Walton et al., 2018). For individualistic participants, I expect greater levels of maladaptive SPP and subsequently, higher levels of neuroticism due to the increasing trend of individualism and striving for self-achievement (see Curran & Hill, 2019).

Hypothesis 2: For birth order, I hypothesize that regardless of gender, eldest/first-born children will report higher levels of perfectionism than their younger siblings due to the increased amount of expectations and responsibilities imposed on them by their parents (Siegle & Schuler, 2000). Thus, I am also expecting to report lower levels of perfectionism in younger siblings, regardless of gender.

Hypothesis 3: I hypothesize greater levels of OOP perfectionism in participants with higher levels of individualistic traits. Since self-reliance, dominance, and accomplishments are prioritized in an Individualistic mindset, it may be that this allows individualists to expect others to be the same (Stoeber, 2015).

There is limited research examining the effects of the family composition as a protective or risk factor for the onset of perfectionism, and there is also a lack of research on how cultural traits impact perfectionism. The implications of this research have substantial benefits for clinical interventions and to better understand how cultures contribute to the interactional effects of parenting style, birth order, and personality on perfectionism, and expanding the literature. As the prevalence of perfectionism has been steadily increasing along with an increase in mental

health distress in young people, more clinicians are treating clients with maladaptive perfectionism (Flett & Hewitt, 2020). Given how detrimental maladaptive perfectionism can be to an individual, it is imperative for clinicians to create a treatment plan centered around the client that accurately reflects their lifestyle and what factors led to their onset of perfectionism.

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Methods

Participants

Participants were recruited from Stockton University (SU) and the American University in Cairo (AUC). AUC is accredited by the United States Middle States Commission on Higher Education, therefore all students speak fluent English.

A total of 213 participants were recruited for this study, 186 participants from SU, and 27 participants from AUC. The sample size is similar to that of research in this field (see Abd-El-Fattah & Fakhroo, 2012; Ashby et al., 2003; Hewitt et al., 2006). Forty-three participants were excluded: 32 did not complete the survey and 11 failed to pass at least one of the three attention checks placed throughout the study. This left a total of 170 (161 from SU, 9 from AUC) participants that participated in this study (M_{age} = 21.47*, range*= 18 – 59). Eighty-two percent of the participants identified as female, 15.3% identified as male, 2.4% identified as non-binary. Twenty-three percent of participants identified as Hispanic/Latino/Latina. 58.2% of the participants identified their race as White, 12.8% identified as Black or African American, 8.1% identified as other, 4.7% identified as East Asian/East Asian American, 4.7% identified as biracial, 4.7% identified as Egyptian, 2.9% identified as South Asian/South Asian American, 2.9% identified as multiracial, and 0.6% identified as First Nations, Indigenous, or Alaskan Native. See Table 1 for all demographic statistics.

SU participant data was collected through Stockton's SONA system and participants earned two research credits upon completion as compensation for their participation in this study. AUC participant data was collected through word of mouth and an advertisement on the Department of Psychology's website. AUC participants received the equivalent of $10 USD on an e-gift card upon study completion, which was funded through Stockton University's Research Experience for Undergraduates scholarship.

Materials

Participants from both Universities completed this online survey in English.

Predictor Variables

Parenting Styles. Participants completed the Parental Authority Questionnaire (Buri, 1991) to assess their perception of their parents' parenting style. The Parental Authority Questionnaire is a 30-item questionnaire measuring authoritarian, permissive and authoritative parenting styles. However, for this study, participants only answered 10 items of the questionnaire that were relevant to authoritarian parenting on a 5-point Likert scale ranging from 1 (*Strongly Disagree*) to 5 (*Strongly Agree*). To accommodate for single-parent households, I added an additional point on the Likert scale, 6 *(My (mother/father) did not play an active role in my childhood)*. This questionnaire has been used in previous studies to test for children's perception of the parents' parenting styles (see Besharat et al., 2011; Walton et al., 2018). The Parental Authority Questionnaire has gender specific variations (PAQ-F; PAQ-M) to assess if the parents' parenting styles were authoritarian: ("As I was growing up, my (mother/father) often told me exactly what (she/he) wanted me to do and how (she/he) expected me to do it."; "As I was growing up my (mother/father) let me know what behavior (she/he) expected of me, and if I

didn't meet those expectations, (she/he) punished me."). Higher scores indicated authoritarian parenting while lower scores indicated non-authoritarian parenting.

Individualism and Collectivism. Participants completed the individualism and collectivism scale (INDCOL, Triandis & Gelfand, 1998). The individualism and collectivism scale is a 16-item questionnaire answered on a 9-item Likert scale ranging from 1 *(Never or definitely no)* to 9 *(Always or definitely yes)*. Participants rated their agreement on these two dimensions by responding to questions that reflect collectivism ("It is my duty to take care of my family, even when I have to sacrifice what I want."; "If a coworker gets a prize, I would feel proud.") and individualism ("Competition is the law of nature."; "I'd rather depend on myself than others."). Scores were created for each cultural trait, with higher scores indicating higher levels of this trait being present.

Personality Traits. To determine neuroticism and conscientiousness, participants completed a modified version of the Big Five Personality Inventory-Short Item (BFI-15, Lang et al., 2011). This is a 6-item questionnaire answered on a 7-point Likert scale ranging from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*). Participants rated how much they agree with a prompted statement ("I see myself as someone who …"), pertaining to neuroticism ("Worries a lot."; "Gets nervous easily.") and conscientiousness ("Does a thorough job"; "Does things efficiently."). Higher scores indicated a greater presence of that personality trait. These scores were then compared to determine if there is an effect of parenting styles and birth order with personality traits on the different types of perfectionism.

Birth Order. The role of birth order was determined through an open-ended question where participants were asked to report the birth order of themselves and their siblings. They

were asked to report their siblings' birth order for the purposes of abiding by Adler's seven-year birth order hypothesis.

Depression and Anxiety. Depression and anxiety were measured with the Patient Health Questionnaire (PHQ-4, Kroenke et al., 2011), a 4-item questionnaire answered on a 4-point Likert scale ranging from 1 (*Not at all*) to 4 (*Nearly every day*). Participants answered questions relating to the prevalence of depressive and anxious symptoms within the past two weeks ("Feeling nervous, anxious, or on edge."; "Feeling down, depressed, or hopeless."). The participant's average score determined where they fall within the range of depression and anxiety severity, with higher scores indicating more severe symptoms of depression and anxiety.

Outcome Variables

Perfectionistic Traits. The participant's type of perfectionism was measured by the Hewitt and Flett Multidimensional Perfectionism Scale (HF-MPS, Hewitt & Flett, 1990), which is a 45-item questionnaire, answered on a 7-Likert scale ranging from 1 (*Disagree*) to 7 (*Agree*). This scale was used to determine if the participant is a self-oriented, socially prescribed, or other-oriented perfectionist. Participants answered questions regarding each of the three traits: Self-Oriented Perfectionism ("I must work to my full potential at all times"), Socially Prescribed Perfectionism ("Success means that I must work even harder to please others"), and Other-Oriented Perfectionism ("Everything that others do must be of top-notch quality"). A higher score indicated a higher prevalence of the type of perfectionism present in an individual's daily life.

Additional demographic questions were included that asked about socioeconomic status, household size, and parental level of education. See Appendix A for a complete list of questions.

Procedure

This study was an online questionnaire presented to participants on Qualtrics that took approximately 30 minutes to complete. After providing informed consent, participants completed the survey. There were two distributions for this survey, one for SU participants and one for AUC participants. The presentation of the questionnaires was PAQ-M and PAQ-F, INDCOL, BFI-15, HF-MPS, and then PHQ-4. The order of appearance for the PAQ-M and PAQ-F, INDCOL, and BFI-15 was randomized through Qualtrics' randomization tool. Finally, they entered their self-report data pertaining to their demographics. Upon completion of this survey, participants were thanked for their time and appropriately compensated.

Results

Scoring

The Parental Authority Questionnaire (PAQ) was divided into the Mother and Father subscales. Participant scores were summed, with the lowest possible score being 10 and the highest score being 50, to evaluate the presence or absence of an authoritarian parent. A separate score was created for the mother's and father's version of the scales. Since this study also accounted for single parent households, Likert point 6, *"My mother/father did not play an active role in my childhood"* was analyzed separately than the rest of the data set. Any responses for this Likert point were re-coded and summed up separately. The individualism and collectivism Scale (INDCOL) is composed of four subscales, two for individualism and two for collectivism. For the purpose of this study, the two subscales for each cultural construct were summed to create two scores: one for total collectivism and one for total individualism. Scores could range between 8 and 72 for each section with higher scores indicating more beliefs aligning with one culture. The Big Five Inventory (BFI) included three questions each for Neuroticism and Conscientiousness. One question of the three were reverse coded, then scores were summed for

each of the three questions for the two personality traits. Scores could range from 3 and 21, with higher scores reflecting higher levels of that personality trait. The Hewitt and Flett Multidimensional Perfectionism Scale (HF-MPS) was composed of three subscales, one for each type of perfectionistic trait (SOP, SPP, and OOP). Separate scores were created for each perfectionistic trait by summing up scores of the corresponding questions, which could range from 15 to 105. Higher scores reflected higher levels of that trait. Lastly, scores were summed for the four questions on the Patient Health Questionnaire (PHQ-4). A combined summary variable for levels of depression was created, with scores ranging between 0 and 12. Scores between 0 and 2 represent normal levels of anxiety and depression, scores between 3 and 5 indicate mild levels of anxiety and depression, scores between 6 and 9 indicate moderate levels of anxiety and depression, and scores between 9 and 12 indicate severe levels of anxiety and depression.

See Table 2 for the mean scores of the following variables: parental authoritarianism, personality traits, participant birth order, cultural traits, SOP, SPP, OPP, and depression and anxiety.

A Pearson's correlation was conducted on the following variables: parental authoritarianism, personality traits, participant birth order, cultural traits, SOP, SPP, OOP, and depression and anxiety. See Table 3 for the correlational coefficients.

Self-Oriented Perfectionism

Using the enter model, a multiple regression was used to test if Maternal Authoritarianism, Paternal Authoritarianism, Sibling birth order, Individualism, Collectivism, Neuroticism, Conscientiousness and Depression significantly predicted SOP. Results revealed the combination of predictors significantly predicted changes in SOP scores, $R^2 = .442$, $F(8,142)$

= 13.283, $p < .001$. When examining the factors individually, it was found that Collectivism, Individualism, Conscientiousness, and Neuroticism were significant positive predictors of having SOP. Maternal and Paternal Authoritarianism, Sibling birth order, and Depression were not predictors of SPP, $p \geq .06$. Although not a significant predictor, there was a significant positive correlation between Maternal Authoritarianism and SOP, and for Birth order, with the oldest child associated with higher rates of SOP. See Table 4 for the coefficients for this model and see Table 5 for the correlation coefficients.

Socially Prescribed Perfectionism

Using the enter model, a multiple regression was used to test if Maternal Authoritarianism, Paternal Authoritarianism, Sibling birth order, Individualism, Collectivism, Neuroticism, Conscientiousness and Depression significantly predicted SPP. Results revealed the combination of predictors significantly predicted changes in SPP scores, $R^2 = .311$, $F(8,142) = 7.547$, $p < .001$. When examining the factors individually, it was found that greater levels of Maternal Authoritarianism, Individualism, Depression, and Sibling birth order (being a younger sibling) were positive predictors of SPP while higher levels of Collectivism was a negative predictor of SPP. Although not a significant predictor, there was a significant positive correlation between Paternal Authoritarianism and SPP, and Neuroticism and SPP. See Table 6 for the coefficients for this model and see Table 7 for the correlation coefficients.

Other-Oriented Perfectionism

To examine whether cultural constructs are related to Other-Oriented Perfectionism, a Pearson's correlation was conducted to measure Collectivism and Individualism's role in Other-Oriented Perfectionism. The results revealed that the more individualistic participants were, there was a greater likelihood of OOP ($r = .303$, $p < .001$).

Lastly, a significant positive relationship was discovered between Collectivism and Conscientiousness ($r = .244$, $p = .002$), such that higher levels of conscientiousness were more often associated with people who uphold greater collectivistic beliefs. . However, there was no relationship between conscientiousness and depression. In addition, there was no relationship between Individualism and Neuroticism, $p = .239$.

Discussion

The goal of this research study was to examine whether parental authoritarianism, culture, personality traits, sibling birth order, and depression and anxiety prevalence can act as either as risk or protective factors for the onset of perfectionistic traits in adulthood. Expanding on over forty years of pre-existing research on perfectionism, this study investigated the multidimensional nature of perfectionism, the lack of culturally diverse participant data, and the limited data relating to the role of sibling order in the onset of perfectionism. These results can inform culturally competent treatment plans for clients with collectivistic traits. Given the lack of participant cultural diversity in previous literature, it is imperative for clinicians to have information regarding how perfectionism manifests in clients of individualistic and collectivistic cultures to provide clients with culturally competent appropriate options.

For the first hypothesis, I expected parental authoritarianism would predict higher levels of SOP and SPP. There was partial support, with only maternal authoritarianism predicting higher levels of SPP. This was expected since people with SPP believe that others expect them to be perfect, basing this on the high expectations from their parents. These high expectations often occur in conjunction with the admonishments that they are not doing enough to meet these expectations, and less warmth and support when they do meet them (Abd-El-Fattah & Fakhroo, 2012; Besharat et al., 2011; Walton et al., 2018; Yildiz et al., 2020). However, parental

authoritarianism did not predict SOP nor did paternal authoritarianism predict SPP. The lack of findings for parental authoritarian predicting SOP is likely due to SOPs having self-driven unattainable expectations, and not prioritizing what others expect of them (Flett et al., 2014; Habke & Flett, 2002; Hewitt & Flett, 1991). This discrepancy for the lack of parental authoritarian influence on SPP can be partially explained by the levels of parental involvement (as in, mothers were more active in assessing their child's success, whether it be in academics or extracurricular activities), where the child internalizes as it is necessary for them to obtain high, unachievable goals. Inherently, if mothers were more active in assessing their child's success, then they had more control over their child, which could inhibit their degree of self-efficacy and increase their likelihood of SPP onset (Abd-El-Fattah & Fakhroo, 2012; Besharat et al., 2011; Walton et al., 2018). There is support for this with higher levels of neuroticism and depression as predictors for higher levels of SPP.

These results support that there are better predictors for SOP than authoritarian parenting. Interestingly, collectivism, individualism, neuroticism and conscientiousness predicted SOP. Collectivism and individualism often produce opposing perspectives on lifetime goals, one sacrificing self for family and one prioritizing self over others. Moreover, conscientiousness and neuroticism produce opposing traits, with one being committed to goals, meeting deadlines and taking on challenges, and the other easily overwhelmed, anxious and experiencing feelings of self-doubt. It may be that SOP with the traits of setting high expectations for oneself is about being motivated to succeed, and at least in this sample of mostly college students, with more adaptive outcomes. In addition, I expected collectivism to be potentially explained by greater scores of conscientiousness and for individualism to be predicted by greater scores of neuroticism. Partial support for this hypothesis was produced, with greater

scores on conscientiousness predicting higher levels of collectivism as a result of prioritizing societal success over individual success (Hofstede & Bond, 1988; Triandis, 1995). However, individualism was not related to neuroticism. Therefore, at least specific to this study, individualism was not related to higher levels of unhappiness, anxiety, and emotional instability.

For the second hypothesis, I predicted the oldest sibling would report greater scores for SOP and SPP than their younger siblings. There was partial support for this, with the oldest sibling being more likely to have SPP but not SOP. Oldest born children presenting with more traits of SPP can likely be attributed to first-time, inexperienced parents having more time to implement the standards they set with one child, but as more children are born the attention shifts from the older children to the younger children. Given that older children are often expected to be more independent and partake in caring for their younger siblings, which is related to higher levels of conscientiousness as well (Leman, 1985; Parker, 1997; Siegle & Schuler, 2002; Smith, 1990; Travis & Kohli, 1995). In return, the oldest child then imposes these higher standards on themselves and expects that others believe they need to meet these high levels of expectations by determining that their best effort is never enough. Perhaps, being the eldest child did not predict SOP because SOP is self-imposed by one's own self expectations, as opposed to SPP where one's self-imposed standards are based on other's expectations for them.

In my third hypothesis, participants with high levels of individualism will also have would also predict higher levels of OOP, which the results supported. Since individualism is focused on self-success and in OOP perfectionists impose their standards of accomplishment on others, it is presumed that this heightened drive for holding others to one's standards for self-achievement will most often be seen in individualist OOPs (Hewitt & Flett, 1991; Stoeber, 2015).

As a consequence of raising a child with maladaptive perfectionistic traits, parents run the risk of being unaware of their children's maladaptive behavior or experiencing negative psychopathology themselves. For example, if their child has maladaptive SOP or SPP, parents may be unaware of their child's maladaptive behaviors because their child is performing well academically. It is also plausible for parents to experience psychological distress and feel helpless from watching their child's adverse reactions to being unable to achieve the high goals they set for themselves. A child with maladaptive SOP, SPP, or OOP is likely to experience negative psychopathology and distress stemming from the high, achievable standards they have either imposed on themselves or imposed on others.

There were cultural differences in SPP that should be further explored. Being higher in collectivistic traits predicted lower levels of SPP and higher levels of individualism predicted higher levels of SPP. It is plausible that this variation is the result of cultural beliefs. In collectivism, individuals treat the success of their society with utmost importance, while in individualism, the focus is on self-accomplishment, creating constant competition and always trying to be better than everyone else. By creating constant competition, individualists heighten their onset likelihood of SPP by internalizing these high, unachievable standards and create an overwhelming desire that they need to uphold these standards to maintain their societal status. However, in collectivism, it is more common for someone to set high standards for themselves, but to feel accomplishment for their achievements. Feeling accomplished can inhibit the onset of SPP, as collectivists do not expose themselves to a maladaptive desire to outperform others and feel efficient in their performance.

Implications

Empirically, this study furthers previous research by expanding on lesser-studied predictive and outcome factors that can either serve as risk or protective factors for the onset of different perfectionistic traits. Particularly, there is limited research describing how participant birth order and culture relate to the three perfectionistic traits (SOP, SPP, and OOP). While more research needs to be conducted to further explain what exactly about these factors relate to the three perfectionistic traits, this data presented in this study provides insight as to what avenues future research should consider exploring.

Clinically, the data presented in this study can provide insight for clinicians treating patients presenting with maladaptive perfectionistic traits. Despite perfectionism being referred to as a multidimensional personality trait, this data can aid clinicians by giving them an avenue to start exploring with their clients. Clinicians may need to further explore the role of their client's birth order and how it relates to their perfectionism. Moreover, the impact of collectivism and individualism has not been explored as much in clinical work and clinicians should consider how culturally-based variables can be attributed to the onset of perfectionism when treating their client. The results of this study are meant to nor qualified to act as a treatment option for perfectionism, but rather to be used in conjunction with pre-existing, empirically based treatment options to aid clinical and client success.

Limitations

The goal of the research was to examine how perfectionism is influenced by cultural triats. While there are many ethnicities reflected in the U.S., including those from or raised in collectivistic households, it is hard to separate the influence of living in the U.S. with its focus on attaining individual rather than community goals. Moreover, since data was only collected from undergraduate students enrolled at an accredited university, this data is only generalizable to the

population of college students. To increase worldwide generalizability, future research should consider conducting this research with a more culturally-diverse sample, specifically including participants from non-WEIRD (Western, Educated, Industrial, Rich, and Democratic) cultures (Heinrich, 2020). Future research should also consider re-evaluating recruitment strategies, such as creating culturally-appropriate incentives. For example, one possible reason for the low recruitment numbers from AUC was due to us offering them the Egyptian pound equivalent of a $10USD e-gift card. However, considering that AUC is expensive to attend, students are from the highest economic bracket and the dollar amount may not have been an incentive. To create culturally-appropriate incentives, researchers looking to study these cultures should evaluate what are popular media platforms and trendy items for that culture (such as what stores are selling the most fashionable items and/or see the largest amount of intended participant-aged customers) and incorporate these trends into their incentives. For convenience, participants from AUC were tested in English, which may have primed the participants to respond similarly to how people from English-speaking countries would respond, particularly regarding the cultural survey. To limit this, future researchers should examine the effect language has on responses. Another limitation of this study is only recording which of the three perfectionistic traits, proposed by Hewitt and Flett (1991), are associated with birth order, more favorable cultural constructs as protective or risk factors for the onset of perfectionism. Follow-up research will be conducted to assess how the six attributes of perfectionism proposed by Frost et al. (1990) (personal standards, organization, doubts about actions, concern over mistakes, parental expectations, and parental criticism) interact with the presentation of the three perfectionistic traits, participants' perception of their parents' parenting styles, their birth order, and their preferred cultural construct. Particularly, the lack of significance for the authoritarian parenting

style may be determined once all six attributes of perfectionism, but particularly after assessing the results for concerns over mistakes, doubts about actions, parental expectations, and parental criticism, considering that the authoritarian parenting style is characterized by low levels of parental warmth and high levels of parental control. There, we would expect higher reports of concern over mistakes, doubts about actions and lower reports for parental expectations and criticism to predict higher levels of SOP. For SPP, it is expected that higher scores for concern over mistakes, doubts about actions, parental expectations, and parental criticism will predict higher levels of SPP.

Future Research

It is also imperative for future research to gather empirical data from non-WEIRD cultures to accurately determine the role of culture and how much weight it has for the onset of perfectionism. Future research should also consider bringing in more factors from a broader developmental perspective. For example, Ge et al., (2023) analyzed a cross-gender effect, where the father's presence was more influential on daughters and the mother's presence was more influential on sons. While this study only focused on the child, it may be worthwhile for future research to study the perfectionism in both the parent and the child, and the relationship between the two. For example, considering that SPP is characterized by an individual believing that others expect them to achieve high, unattainable standards, it may be worth investigating if there is a correlation between a parent with OOP and a child with SPP. This is an important avenue to explore as a potential explanation for research on perfectionism because of its multidimensional nature and there is limited research on the role of family dynamics in the onset of perfectionism, especially from a non-Western perspective.

Conclusions

The results of this study indicated that the presence of the authoritarian parenting style in at least one parent, culture, birth order, neuroticism, and conscientiousness are all predictors for the onset of SOP, SPP, or OOP. Given the results of this study, having stronger individualistic or collectivistic ideology, higher levels of neuroticism, and higher levels of conscientiousness were all determined to be the greatest onset predictor variables for SOP. For SPP maternal authoritarianism, being the eldest sibling, and having stronger individualistic beliefs were all determined to be stronger predictors of the onset of this perfectionistic trait. This study also demonstrated that there is a decreased likelihood of developing SPP when an individual has stronger collectivistic beliefs. Greater cultural influence of individualistic beliefs was also associated with a greater likelihood of developing Other-Oriented Perfectionism. The results of this study expand preexisting knowledge relating to understanding how different factors present during the formative years of one's childhood increase the likelihood of developing perfectionistic traits while also providing clinical insight, a stepping stone to creating an appropriate treatment method for clients. Researchers will also be able to use the findings of this study to create avenues of future research by picking up where this study left off. Follow up research will be conducted by the researchers to analyze how the six perfectionistic traits also influence the development of perfectionism by re-analyzing all of the available data in a hierarchical regression model.

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Table 1

Means Descriptive Statistics for Participant Household Size, Socioeconomic Status, and Parent Highest Level of Education

Measure	M (%)
Participant Birth Order	
First-Born/Eldest Child	44.10%
Second-Born/Middle/Youngest	55.90%
Household Size	
Single Parent/Parental Figure	25.90%
Dual Parent/Parental Figures	65.90%
3 Parent/Parental Figures	3.50%
Greater than 3 Parent/Parental Figures	4.70%
Inactive/Absent Father	15.29%
Socioeconomic Status	
Stockton University	
Less than $25,000 a year	9.30%
$26,000 - $35,000	7.50%
$36,000 - $45,000	12.40%
$46,000 - $55,000	5.60%
$56,000 - $65,000	13.00%
$66,000 - $75,000	5.00%
$76,000 - $85,000	6.80%
$86,000 - $95,000	9.30%
$96,000 - $105,000	11.20%

More than $105,000 a year	19.90%
American University in Cairo	
In debt	11.10%
Able to meet routine expenses	0%
Able to meet routine expenses and emergencies	44.40%
Able to save/invest money	44.40%
SU Maternal Highest Level of Education	
Some High School	11.0%
High school diploma/GED	42.2%
Associate's Degree/Intermediate	13.0%
Bachelor's Degree/University Degree	22.7%
Postgraduate Degree	11.0%
AUC Maternal Highest Level of Education	
Some High School	0%
High school diploma/GED	11.1%
Associate's Degree	0%
Bachelor's Degree/University Degree	66.7%
Postgraduate Degree	22.2%
SU Paternal Highest Level of Education	
Some High School	15.3%
High school diploma/GED equivalent	47.4%
Associate's Degree	10.9%

Bachelor's Degree/University Degree	18.2%
Postgraduate Degree	8.0%
AUC Paternal Highest Level of Education	
Some High School	0%
High school diploma/GED equivalent	11.1%
Associate's Degree	0%
Bachelor's Degree/University Degree	55.6%
Postgraduate Degree	33.3%

Table 2

Means Descriptive Statistics for Parental Authoritarianism, Personality Traits, Participant Birth Order, Cultural Constructs, Anxiety and Depression, and Perfectionistic Traits (*N* = 170)

Measure	M (Total Score Maximum)
Presence of Authoritarian Parenting Style	
Mother	32.52 (50)
Father	33.80 (50)
Personality Traits	
Neuroticism	4.89 (21)
Conscientiousness	5.12 (21)
Cultural Constructs	
Individualist	47.62 (72)
Collectivist	52.31 (72)
Perfectionism Traits	
Self-Oriented Perfectionism	73.30 (105)
Socially Prescribed Perfectionism	59.30 (105)
Other-Oriented Perfectionism	58.79 (105)
Anxiety Presence	3.35 (6)
Depression Presence	2.10 (6)
Total Anxiety and Depression Presence	5.46 (12)
Normal	9.83 (12)
Mild	8.43(12)
Moderate	6.87(12)
Severe	6.13(12)

*Parentheses indicate the total score possible for each descriptive statistic

Table 3

Correlations for Parental Authoritarianism, Personality Traits, Participant Birth Order, Cultural Traits, Perfectionistic Traits, and Anxiety and Depression

Variable	1	2	3	4	5	6	7	8	9	10	11
1 Maternal Authoritarianism	-	.643**	.154*	.103	.113	.184*	.170	.028	.311**	.098	-.026
2 Paternal Authoritarianism		-	-.015	.161	.055	.109	.108	.034	.291**	-.036	-.106
3 Neuroticism			-	-.195*	-.071	.120	.253**	.006	.225**	.459**	-.033
4 Conscientiousness				-	.235**	.210**	.429**	.083	-.029	-.171*	-.143
5 Collectivism					-	.117	.291*	.070	-.132	-.121	-.018
6 Individualism						-	.426**	.303**	.214**	.083	-.120
7 Self-Oriented Perfectionism							-	.213**	.295**	.148	-.222**
8 Other-Oriented Perfectionism								-	.107	.198**	-.074
9 Socially Prescribed Perfectionism									-	.312**	-.147
10 Total Anxiety and Depression										-	.054
11 Sibling Order											-

Note. * indicates significance at the $p < .05$ level; ** indicates significance at the $p < .001$ level

Table 4

Coefficients for Multiple Regression Predicting Self Oriented Perfectionism

	Unstandardized Coefficients		Standardized Coefficients		
Model	B	Std. Error	*β*	*t*	Sig.
Authoritarian Mother	.153	.145	.092	1.054	.294
Authoritarian Father	-.066	.144	-.039	-.458	.648
Sibling Order	-3.391	2.018	-.111	-1.681	.095
Total Collectivism	.356	.105	.228	3.378	.001
Total Individualism	.528	.129	.275	4.084	.000
Total Anxiety and Depression	.567	.298	.140	1.898	.060
Total Neuroticism	2.814	.900	.239	3.127	.002
Total Conscientiousness	5.054	.995	.362	5.078	.000

Table 5

Correlations for Self Oriented Perfectionism

	Pearson's R	Significance
Authoritarian Mother	.220	.004*
Authoritarian Father	.128	.064
Sibling Order	-.205	.007*
Total collectivism	.318	.000*
Total individualism	.411	.000*
Total Anxiety and Depression	.162	.027*
Total Neuroticism	.223	.004*
Total Conscientiousness	.395	.000*

Note. * indicates significance at the $p < .05$ level

Table 6

Coefficients for Multiple Regression Predicting Socially Prescribed Perfectionism

	Unstandardized Coefficients		Standardized Coefficients		
Model	B	Std. Error	*β*	*t*	Sig.
Authoritarian Mother	.335	.144	.225	2.333	.021
Authoritarian Father	.198	.142	.133	1.393	.166
Sibling Order	-3.942	1.995	-.145	-1.976	.050
Total Collectivism	-.216	.104	-.155	-2.075	.040
Total Individualism	.254	.128	.148	1.986	.049
Total Anxiety and Depression	.914	.295	.254	3.097	.002
Total Neuroticism	1.042	.890	.100	1.172	.243
Total Conscientiousness	-.171	.984	-.014	-.173	.863

Table 7

Correlations for Socially Prescribed Perfectionism

	Pearson's R	Significance
Authoritarian Mother	.347	.000*
Authoritarian Father	.290	.000*
Sibling Order	-.186	.013*
Total Collectivism	-.146	.041*
Total Individualism	.210	.006*
Total Anxiety and Depression	.330	.000*
Total Neuroticism	.285	.000*
Total Conscientiousness	-.039	.322

Note. * indicates significance at the $p < .05$ level

Appendix A

Parental Authority Questionnaire- Pertaining to Mothers (Buri, 1991)

This scale will appear twice, once to measure the impact of the participant's mother and once to measure the impact of the participant's father during the participant's childhood. For the purpose of this study, participants will only be asked about questions pertaining to the Authoritarian parenting style subscale.

1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

Instructions: For each of the following statements, circle the number on the 5-point scale (1 = Strongly Disagree, 5 = Strongly Agree) that best describes how the statement applies to you and your parents. Try to read and think about each statement as it applies to you and your parents during your years of growing up at home. There are no right or wrong answers, so don't spend a lot of time on any one item. We are looking for your overall impression regarding each statement. Be sure not to omit any items.

1) Even if their children didn't agree with her, my mother felt that it was for our own good if we were forced to confirm what she thought was right.
2) Whenever my mother told me to do something as I was growing up, she expected me to do it immediately without asking any questions.
3) As I was growing up my mother did not allow me to question any decision she had made.
4) My mother had always felt that more force should be used by parents in order to get their children to behave the way they are supposed to.
5) My mother felt that wise parents should teach their children early just who is the boss in the family.
6) As I was growing up my mother would get very upset if I tried to disagree with her.

7) As I was growing up my mother let me know what behavior she expected of me, and if I didn't meet those expectations, she punished me.
8) My mother had always felt that most problems in society would be solved if we could get parents to strictly and forcibly deal with their children, when they don't do what they are supposed to do as they are growing up.
9) As I was growing up my mother often told me exactly what she wanted me to do and how she expected me to do it.
10) As I was growing up I knew what my mother expected of me in the family and she insisted that I conform to those expectations simply out of respect for her authority.

Individualism and Collectivism Scale (Triandis & Gelfand, 1998)

1 = Never or definitely no, 9 = Always or definitely yes

Instructions: Please read each statement carefully and respond appropriately. Remember to answer all questions.

1) I'd rather depend on myself than others.
2) It is important that I do my job better than others.
3) If a coworker gets a prize, I would feel proud.
4) Parents and children must stay together as much as possible.
5) I rely on myself most of the time; I rarely rely on others.
6) Winning is everything.
7) The well-being of my coworkers is important to me.
8) It is my duty to take care of my family, even when I have to sacrifice what I want.
9) I often do "my own thing".

10) Competition is the law of nature.

11) To me, pleasure is spending time with others.

12) Family members should stick together, no matter what sacrifices are required.

13) My personal identity, independent of others, is very important to me.

14) When another person does better than I do, I get tense and aroused.

15) I feel good when I cooperate with others.

16) It is important to me that I respect the decisions made by my groups.

Short 15-item Big Five Inventory (Lang et al., 2011)

1 = Strongly Disagree, 2 = Disagree, 3= Somewhat Disagree, 4 = Neither Agree nor Disagree, 5 = Somewhat Agree, 6 = Agree, and 7 = Strongly Agree

Instructions: Below you see a number of statements, each of which starts with "I see myself as someone who …" For each statement, indicate how much you agree with this.

I see myself as someone who …

1) Worries a lot
2) Gets nervous easily
3) Remains calm in tense situations
4) Does a thorough job
5) Tends to be lazy
6) Does things efficiently

Patient Health Questionnaire- 4 (Kroenke et al., 2011)

Likert Scale: 0 = Not at all, 1 = Several days, 2 = More than half the days, 3 = Nearly every day

Instructions: Over the last two weeks, how often have you been bothered by any of the following problems?

1) Feeling nervous, anxious, or on edge
2) Not being able to stop or control worrying
3) Feeling down, depressed, or hopeless
4) Little interest or pleasure in doing things

Hewitt and Flett Multidimensional Perfectionism Scale (Hewitt & Flett, 1990)

1 = Disagree, 7 = Agree

Instructions: Listed below are a number of statements concerning personal characteristics and traits. Read each item and decide whether you agree or disagree and to what extent.

1.When I am working on something, I cannot relax until it is perfect

2. I am not likely to criticize someone for giving up too easily

3. It is not important that people I am close to are successful

4. I seldom criticize my friends for accepting second best

5. I find it difficult to meet others' expectations of me

6. One of my goals is to be perfect in everything I do

7. Everything that others do must be of top-notch quality

8. I never aim for perfection on my work

9. Those around me readily accept that I can make mistakes too

10. It doesn't matter when someone close to me does not do their absolute best

11. The better I do, the better I am expected to do

12. I seldom feel the need to be perfect

13. Anything that I do that is less than excellent will be seen as poor work by those around me

14. I strive to be as perfect as I can be

15. It is very important that I am perfect in everything I attempt

16. I have high expectations for the people who are important to me

17. I strive to be the best at everything I do

18. The people around me expect me to succeed at everything I do

19. I do not have very high standards for those around me

20. I demand nothing less than perfection of myself

21. Others will like me even if I don't excel at everything

22. I can't be bothered with people who won't strive to better themselves

23. It makes me uneasy to see an error in my work

24. I do not expect a lot from my friends

25. Success means that I must work even harder to please others

26. If I ask someone to do something, I expect it to be done flawlessly

27. I cannot stand to see people close to me make mistakes

28. I am perfectionistic in setting my goals

29. The people who matter to me should never let me down

30. Others think I am okay, even when I do not succeed

31. I feel that people are too demanding of me

32. I must work to my full potential at all times

33. Although they may not say it, other people get very upset with me when I slip up

34. I do not have to be the best at whatever I am doing

35. My family expects me to be perfect

36. I do not have very high goals for myself

37. My parent rarely expected me to excel in all aspects of my life

38. I respect people who are average

39. People expect nothing less than perfection from me

40. I set very high standards for myself

41. People expect more from me than I am capable of giving

42. I must always be successful at school or work

43. It does not matter to me when a close friend does not try their hardest

44. People around me think I am still competent even if I make a mistake

45. I seldom expect others to excel at whatever they do

Family Composition Questionnaire

Instructions: Please read each question carefully and answer truthfully. Please click the answer that best describes your response.

1. How old are you?
2. What gender do you identify as?

   Female, Male, Non-Binary
3. Are you Hispanic/Latino/Latina?

   Yes/No
4. [SU ONLY] How would you describe yourself?

   First Nations, Indigenous, or Alaskan Native; East Asian/East Asian American; South Asian/South Asian American; White; Black or African American; Biracial; Multiracial; Other (describe)

5. [AUC ONLY] What is your nationality?

   Egyptian; Non-Egyptian/Other

6. What is your current grade point average ("GPA") on a 4.0 scale? If unknown, please write "N/A".

7. [AUC ONLY] What is your current year at university?

   Freshman/First-year student, Sophomore, Junior, Senior, Not in School

8. Please anonymously list all of your siblings in chronological order with their current age and gender.

   For example: If I'm a twin who has 2 older siblings and 1 younger sibling, my response would look like this: Sibling: 25 (M), Sibling: 23(F), Me/Sibling: 20(MF), Sibling: 16 (M)

   If I am an only child, my response would look like this: Me: 20(F)

9. How many parents/parental figures (step-parents, grandparents, etc.) currently live in your household?

   1, 2, 3, More than 3

10. Based on how many parents live in your household, what are their gender identities? If you have more than two parents/parental figures living in your household, please choose the two who have been the most influential in your life.

    Parent 1: Female, Male, Non-Binary,

    Parent 2: Female, Male, Non-Binary

11. [SU ONLY]Referencing who you chose as Parent 1 and Parent 2 in the previous question, what is the highest level of education obtained by each parent?

Parent 1: Some high school, high school diploma/GED equivalency, Associate's Degree, Bachelor's Degree, Master's Degree, Doctoral Degree

Parent 2: Some high school, high school diploma/GED equivalency, Associate's Degree, Bachelor's Degree, Master's Degree, Doctoral Degree, I do not have a Parent 2

12. [SU ONLY] Which of the following best describes your household's socioeconomic status?

    Less than $25,000 a year, $35,000 a year, $45,000 a year, $55,000 a year, $65,000 a year, $75,000 a year, $85,000 a year, $95,000 a year, $105,000 a year, More than $105,000 a year

13. [AUC ONLY] Please answer the following question regarding your parents' highest level of education achieved.

    Mother: Less than a high school diploma, High school diploma, Intermediate (2 years) Institution, University degree, Post-graduate degree

    Father: Less than a high school diploma, High school diploma, Intermediate (2 years) Institution, University degree, Post-graduate degree

14. [AUC ONLY] Which of the following best describes your family's economic status?

    In debt, Able to just meet routine expenses, Able to meet routine expenses and emergencies, Able to save/invest money