Perfectionism In Adults: Associations With Gender And Socioeconomic Status

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ABSTRACT

This study explores the association between perfectionism and demographic factors, specifically gender and socioeconomic status (SES), among young adults. Employing the Big Three Perfectionism Scale—Short Version (BTPS-SF) and the modified Kuppuswamy SES Scale, we evaluated 85 participants aged 18–26, comprising equal gender representation. The results indicate significant gender-related variations in self-critical perfectionism, with females scoring slightly higher than males. Similarly, participants from higher SES backgrounds displayed elevated levels of perfectionism, suggesting a possible link between socioeconomic pressure and perfectionistic tendencies. These findings emphasize the impact of demographic variables on perfectionistic behavior, which has important implications for mental health interventions targeting young adults.

*Keywords: P*erfectionism, Gender differences, Socioeconomic status, Self-criticism, Adaptive perfectionism, Maladaptive perfectionism.

I. INTRODUCTION

Perfectionism in young adults and associated with gender and socioeconomic status.The study will involve a total of 100 participants, equally divided into 50 males and 50 females, all fluent in English Participants will be between the ages of 18 to 26 years. Participants will be entirely voluntary, with informed consent obtained from each .

Perfectionism:

Young adults frequently establish unrealistic objectives and high expectations for themselves in an effort to be the best and win others' acceptance, a behavior known as perfectionism, as a result of parental expectations and social pressure. Setting extremely high expectations for oneself or others and aiming for perfection are characteristics of the perfectionism personality trait. It frequently entails a critical assessment of oneself as well as worries about the opinions of others. While perfectionism can drive individuals to achieve their best, it can also lead to significant stress, anxiety, and dissatisfaction due to the inability to meet self-imposed or perceived external expectations. There are main 2 types of perfectionisms are :

Adaptive Perfectionism and maladaptive perfectionism. Perfectionism can be influenced by various factors, including personality traits, cultural and societal expectations, family dynamics, and early life experiences. Understanding perfectionism, especially in specific populations like young adults, can help in addressing its potential negative impacts on mental health and overall well-being.

Theories on perfectionism

Multidimensional Perfectionism (MPS)—given by Hewitt and Flett in 1991. This scale categorizes perfectionism into three types: Self-Oriented Perfectionism: Setting high standards for oneself. Other-Oriented Perfectionism: Expecting others to be perfect. Socially Prescribed Perfectionism: Belief that others expect oneself to be perfect.

Cognitive-Behavioral Model of Perfectionism - given by Shafran, Cooper, Fairburn 2002. This model suggests that perfectionism arises from dysfunctional beliefs and maladaptive behaviors. Perfectionists often believe that their worth is based on meeting high standards. This belief leads to behaviors aimed at achieving perfection, such as over-preparation or avoidance, which are maintained by the avoidance of perceived failure or negative evaluation.

Transdiagnostic Theory of Perfectionism- given by Fairburn, Cooper and Shafran in 2003 . This theory views perfectionism as a transdiagnostic factor, meaning it contributes to the development and maintenance of various psychological disorders, such as OCD, eating disorders, and depression. It emphasizes the importance of treating perfectionism across different disorders.

Socioeconomic status

Socioeconomic status (SES) is one of the hallmarks of the social sciences and denotes the social and economic position of a person or a family in relation to other groups within the society(Semwal, Tripathi, et al., 1 C.E.). In the literature, SES is usually measured relative to three primary dimensions: income, education and occupation. SES is known to influence a wide range of outcomes during a person's lifetime, such as opportunities, resources, or optimal health.

SES is not simply defined in terms of material wealth, but also demands that one considers the social or cultural assets they have(Semwal, Tyagi, et al., 1 C.E.). For example, attaining a higher level of education is often followed by securing most of the high paying jobs and positions of power in the society. However, low SES is often linked to the inability to access education, lack of good paying jobs, and poor health. This perspective helps to evaluate spiritual stratification as this factor has an influence over many spheres of life: health, education, and migration. Equal's stance on the study of SES is very useful in dealing with concepts related to social justice since it points out social inequalities in terms of wealth, power, and opportunities(Semwal et al., 2024). In the context of SES, social equity issues can be better addressed through understanding its underlying factors and consequently finding solutions that can lead to improvement in the living conditions of marginalized populations.

Theories on socioeconomic status

Cultural Capital Theory - developed by Pierre Bourdieu in 1970s Bourdieu introduced the concept of cultural capital, which includes non-economic resources such as education, tastes, mannerisms, and credentials that can influence social mobility. According to Bourdieu, individuals from higher SES backgrounds possess more cultural capital, which gives them an advantage in society, particularly in education and the labor market.

Social Determinants of Health (SDH) - The World Health Organization (WHO) defines Social Determinants of Health (SDH) as "the conditions in which people are born, grow, work, live, and age". The WHO established the Commission on Social Determinants of Health from 2005–2008 to promote health equity and draw attention to SDH. Lower SES is associated with higher levels of stress, limited access to healthcare,and unhealthy living conditions, all of which contribute to poorer health Outcomes.

Conflict Theory - is given by Karl Marx (1818–1883) Rooted in the ideas of Marx, conflict theory views SES as a source of inequality and conflict within society. It argues that the dominant classes use their power to exploit and oppress lower SES groups, maintaining their own privileges and perpetuating inequality. This theory highlights the role of SES in creating and sustaining social hierarchies.

Understanding the relationship between perfectionism and socioeconomic status

Understanding how perfectionism is influenced by socioeconomic status is inherently insightful; nevertheless, it comes with certain limitations that calls for future improvement on the concepts. The social, psychological, and environmental contexts all help shape this relationship. Perfectionism explains the behavior of setting unrealistically high standards for oneself and being very critical of oneself. It can be argued that perfectionism can depend on the environment that a person is brought up in and lives in. People with a higher SES are usually more pressure to achieve due to the availability of more resources, education and even the need to keep up or improve their social class. Such an environment Hewitt promotes a type of perfectionism that caters to external expectations and fear of lack of success since such individuals are usually required to live up to the family, peer, or societal expectations. Abstractly, socioeconomic status determines the exertion of pressure on a person to succeed or try hard. For instance, children out of such families but from lower SES, may build a sense of being perfect for the reason of striving against the socioeconomic limits in hope of better social

standing. The urge to do good in school or a job is with the view of acquiring a better living standard or changing the socio-economic status of an individual.

II. LITERATURE RIVIEW

1.Wayne D Parker, Carol J Mills (1996) The incidence of perfectionism in gifted students. Using the Multidimensional Perfectionism Scale (Frost et al., 1990), perfectionism scores were compared between a group of 600 students identified as academically talented and a group of 418 peers from the general cohort.Every student in this nationally collected sample was in the sixth grade and came from a comparable socioeconomic background. The results showed that there was little variation in the two groups' mean scores. An empirical typology of perfectionism was also used to compare the gifted children to the general cohort. The frequency of perfectionistic types among gifted students and the general population did not differ statistically significantly, according to this investigation. These results imply that varied labeling patterns of same actions when displayed by talented students and the general cohort may be the cause of the frequent anecdotal accounts of higher perfectionism among the gifted. It is necessary to distinguish more clearly between perfectionistic aspirations that inspire greatness and those that impede and frustrate success.

*2.***Jennifer R Castro, Kenneth G Rice (2003)** Perfectionism and ethnicity implications for depressive symptoms and self-reported academic achievement. A study of 189 Asian American, African American, and Caucasian American college students found that AsianAmerican students outperformed other groups on three perfectionism subscales. Parental expectations were higher in minority students. Depressive symptoms were correlated with
self-doubt, worries about mistakes, and perceived parental criticism. Perfectionism significantly accounted for these differences.

*3.***JJ Klibert, J Langhinrichsen-Rohling, M Saito (2005)** Adaptive and maladaptive aspects of self-oriented versus socially prescribed perfectionism.Using correlations with adaptive and maladaptive constructs (i.e., self-esteem, perceived self-control, achievement motivation, depression, anxiety, suicidal proneness, shame, guilt, and procrastination), the current study sought to determine how much self-oriented versus socially prescribed perfectionism can be distinguished from one another. According to theory, self-oriented perfectionism should have both maladaptive and adaptive traits, but socially dictated perfectionism should only be detrimental. The participants (n = 475), who were 68% Caucasian and had a mean age of 20.9 years, were from a university in the Southeast. The findings showed that the two forms of perfectionism were substantially correlated with procrastination, depression, anxiety, suicidal inclination, self-esteem, perceived self-control, achievement motivation, and shame and guilt. In general, self-oriented perfectionism was less strongly associated with maladaptive conceptions than socially dictated perfectionism.. In contrast to the assertion that self-oriented perfectionism is exclusively a vulnerability factor (Benson, 2003), and as hypothesized, results indicated that high self-oriented perfectionism in the absence of socially prescribed perfectionism is adaptive. The clinical implications of these findings are discussed.

4.Rich Gilman et al (2005) The relationship between perfectionism and multidimensional life satisfaction among Croatian and American youth. The study compared Croatian andAmerican youth's life satisfaction levels with multidimensional perfectionism. Results showed differential predictive values of personal standards and discrepancies across satisfaction domains. Adaptive perfectionists reported higher satisfaction than maladaptive perfectionists and non-perfectionists. Males and females reported similar satisfaction levels across most life domains, except for friendship satisfaction. The study concludes with implications and suggestions for future research.

5.Emily Elizabeth Dykstra (2006) Relationship of perfectionism and gender to academic performance and social functioning in adolescents. The study examines the relationship between perfectionism and social functioning in the adolescent population. It involved a sample of 127 adolescents from central Indiana, aged 7, 8, 9, and 10. The results showed that those with higher levels of self-oriented perfectionism had higher average grades, perceived academic performance, effort, and importance. Conversely, those with higher levels of socially prescribed perfectionism had lower grades, perceived academic effort, and importance. The study supports previous research on perfectionism in the undergraduate population and suggests future research on perfectionism in the adolescent population. The findings supportprevious research on perfectionism in the undergraduate population.

6.**Danielle S. Molnar et al. (2006)** A mediated model of perfectionism, affect, and physical health. This study examined a structural model that proposes that the relationship between perfectionism and physical health is mediated by both positive and negative affect. The Multidimensional Perfectionism Scale (MPS-H; Hewitt & Flett, 1991b), the Positive and NegativeAffect States Survey (PANAS; Watson, Clark, & Tellegen, 1988), and items evaluating three dimensions of physical health were among the questionnaires filled out by a community. sample of young adults. The findings validated a structural hypothesis that linked improved physical health to self-oriented perfectionism.

7.**Hassan et al. (2012)** Perfectionism and Performance Expectations at University: Does Gender Still Matter?investigates if gender has an impact on the link between university performance expectations and perfectionist orientation. The Multidimensional Perfectionism Scale's Self-Oriented (SOP) and Socially Prescribed Perfectionism (SPP) subscales were filled out by 100 first-year students. The results showed that SOP, SPP, and performance expectations were positively correlated, and that students' SOP levels were generally higher. Performance expectations were strongly correlated with both SOP and SPP, with high perfectionists and self-oriented people expressing noticeably higher expectations than others. However, there were no gender differences in SOP, SPP, or performance expectations, and gender did not attenuate these interactions.

8.**J Klibert et al (2015)** Associations between perfectionism and generalized anxiety:Examining Cognitive Schemas and Gender. The study found that socially prescribed perfectionism is the only dimension related to generalized anxiety symptoms. The stability in thedirect effect between perfectionism and anxiety symptoms varied by gender. For women, threat and control schemas partially mediate the link, while men did not. This suggests that perfectionism dimensions operate differently for women and men in predicting psychopathological outcomes.

9.**Noor and Talib (2019)** Family Income, Perfectionism, and Social Anxiety Among Higher Education Students explores the influence of family SES factors, like income, on social anxiety and perfectionism among university students. Conducted in Malaysia, the survey included 1,618 students aged 18–25, selected through multistage stratified sampling. Using a self-administered questionnaire with the Almost Perfect Scale-Revised and the Liebowitz Social Anxiety Scale, the study assessed perfectionism and social anxiety. Results showed that over half the students exhibited high perfectionism standards (M = 36.55, SD = 6.31), but low levels of perfectionism discrepancy, social fear, and avoidance anxiety. Most students demonstrated a positive social outlook and low maladaptive perfectionism, despite moderate family SES levels. The study discusses family roles in shaping these traits.

10.**Curran and Hill (2019)** Perfectionism Is Increasing Over Time: A Meta-Analysis of Birth Cohort Differences From 1989 to 2016 examines whether cultural shifts towards neoliberal values have coincided with rising perfectionism among college students. Analyzing 164 samples of 41,641 American, Canadian, and British students (70.92% female, Mage = 20.66), the study used the Multidimensional Perfectionism Scale. Results from cross-temporal meta-analysis showed a linear increase in self-oriented, socially prescribed, and other-oriented perfectionism over 27 years. These trends persisted across gender and country, suggesting that recent generations increasingly feel others' demands, demand more of others, and are more self-demanding.

11.**Liv Sand et al (2021)** Perfectionism in adolescence: Associations with gender, age, and socioeconomic status in a Norwegian sample. This study examined perfectionism among adolescents aged 16-19, focusing on demographic factors. The sample consisted of 10.217 adolescents, with 52.9% girls. The study assessed perfectionism using the EDI-P scale, which measures self-oriented and socially prescribed perfectionism. Results showed no gender differences in perfectionism scores, but girls scored slightly higher on socially prescribed perfectionism. High perfectionism was associated with socioeconomic status for perceived economic well-being but not parental education level. The study suggests further research and clinical interventions to better understand the relationship between perfectionism and socioeconomic status.

12.**Solhaug et al. (2021)** Perfectionism in Adolescence: Associations With Gender, Age, and Socioeconomic Status in a Norwegian Sample investigates perfectionism among adolescents in relation to gender, age, and socioeconomic status (SES). Utilizing a cross-sectional sample of 10,217 Norwegian adolescents aged 16–19, the study employed the Eating Disorder Inventory's Perfectionism scale (EDI-P), focusing on self-oriented and socially prescribed perfectionism. Results indicated minimal gender differences, though girls scored

slightly higher on socially prescribed perfectionism (SPP). SES was significantly associated with perfectionism, as higher perceived economic well-being increased the odds of high perfectionism scores. However, parental education level showed no significant relationship with perfectionism levels.

13.Anis Nakhaei et al.(2023). Relationship Between Iranian EFL Learners' Perfectionism and Extraversion Considering Age, Gender, and Socioeconomic Status. The majority of research on perfectionism examined the connections between academic success, learner anxiety, and procrastination among college students who exhibit perfectionism. There is a need to look into this topic given the paucity of research on perfectionism in the context of EFL learners, particularly in Iranian contexts, and the increasing emphasis on the role perfectionism plays in language acquisition and academic performance. Furthermore, there is a clear gap in the literature on Iranian EFL learners' perfectionism and the understudied contributions of demographic variables including age, gender, and socioeconomic status. Thus, this study used a quantitative correlational research methodology to investigate the relationship between the demographic characteristics of EFL learners—such as age, gender, and socioeconomic status—and perfectionism as well as the relationship between perfectionism and extraversion.

14.Shafiq et al., (2024) Perfectionism, mattering and loneliness in young adulthood of Generation-Z. The study investigates the relationship between perfectionism, mattering, and loneliness in young adults of Gen-Z. A sample of 320 students from seven universities in Lahore was collected. Results showed that closer relationships with parents, mothers, and friends negatively impacted loneliness. Age was a significant predictor of loneliness, while self-oriented, other-oriented, and socially prescribed perfectionism were positive predictors. Mattering was a significant negative predictor of loneliness. No significant differences were found between male and female students on perfectionism, mattering, and loneliness.

III. METHODOLOGY

Aim:
To understand the association with gender and socioeconomic status in perfectionism.

Objectives
To access the socioeconomic status.
To compare males and females.
To find dimensions of perfectionism.

Participants
The study involves a total of 85 participants, equally divided into 44 males and 40 females, all fluent in English Participants will be between the ages of 18 to 26 years. Participants will be entirely voluntary, with informed consent obtained from each participant.

Tools Description

The Big Three Perfectionism Scale, Short Version (BTPS-SF)is a multidimensional measure of perfectionism that offers a short version of the BTPS (Smith, Saklofske, et al. (2016)). It consists of 16 items that assess different aspects of perfectionism, focusing on rigid, self-critical, and narcissistic perfectionism. The BTPS-SF has been shown to have good reliability and validity in measuring perfectionism across different populations. And the BTPS-SF uses a Likert scale. Ranging from 1 (strongly agree) to 5 (strongly disagree). and for BTPS-SF, the Cronbach's alpha reliability values for each of the three perfectionism dimensions typically range between 0.80 and 0.90. The validity often falls in the range of 0.50 to 0.80.

The Kuppuswamy socioeconomic status (SES) scale modified version is one of the most
widely used tools in India to assess the socioeconomic status of individuals and households,
particularly in urban populations. The original SES scale was developed by Dr. B.G. Kuppuswamy in 1976. The scale is based on three primary factors: Education of the head of the family, Occupation of the head of the family, and Family income. Internal consistency and test-retest reliability. Content and construct validity.

Procedure
The research aims to understand the relationship between perfectionism and socioeconomic status in young adults. The individuals were given access to a Google form that included the BTPS-SF Questionnaire scale

developed by Smith, Saklofske, Stoeber, and Sherry in 2016. And the SES questionnaire scale was originally developed by Dr. B.G. Kupuswamy in 1976 and modified in 2024. They were requested to provide their details on the Google form. All of the replies were gathered once the form was completed. The participant responds that were recorded and assessed by the researcher. Participants' group data was combined, and a correlation was used to determine the relationship between perfectionism, gender, and socioeconomic status.

IV. RESULT

Figure-1 Comparison of males and females on three dimensions of Perfectionism
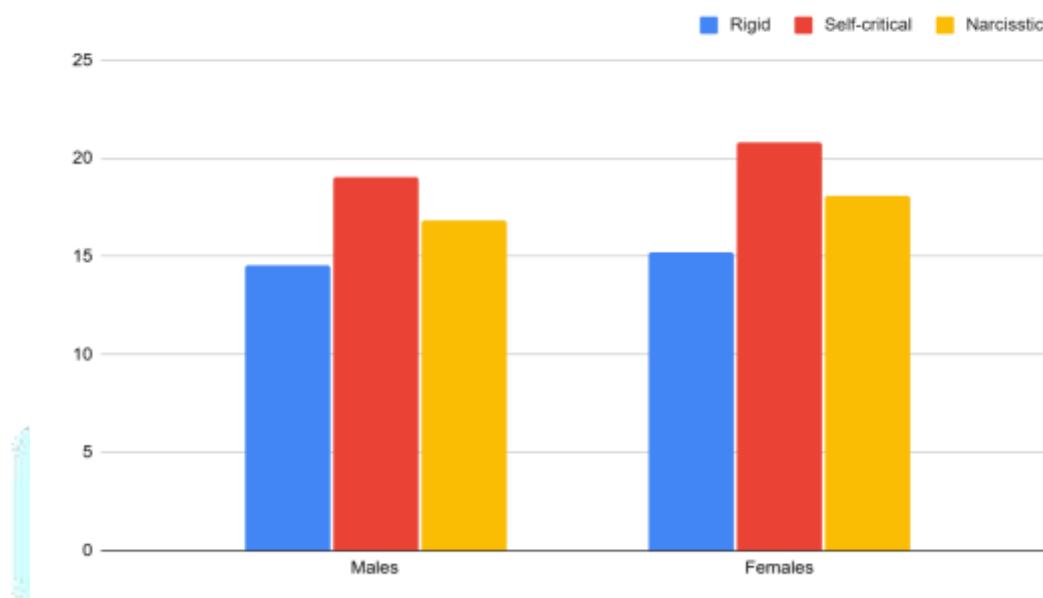
Based on the graph, we can analyze the characteristics of Rigid, Self-critical, and Narcissistic in terms of differences between males and females:

Males:

Rigid: Males display a moderate level of rigidity, shown by the blue bar, which is the lowest among the three traits for males.

Self-critical: Self-critical behavior is the highest trait in males, represented by the red bar, indicating that males in this sample exhibit a strong tendency toward self-criticism.

Narcissistic: Narcissism, shown by the yellow bar, is lower than self-critical but slightly higher than rigidity, suggesting that males have some level of narcissistic tendencies, though it is not the dominant trait.

Females:

Rigid: Females exhibit a level of rigidity similar to males, though slightly higher. This indicates that females also show moderate levels of rigidity.

Self-critical: Self-criticism is the most pronounced trait for females, as it is for males, and is even more prominent in females than in males. This suggests that females in this sample are particularly self-critical.

Narcissistic: The narcissistic trait in females is comparable to that in males but is slightly higher. Although it's the least prominent trait in females, it is still notable.

Overall Comparison:

Both males and females are most self-critical, with females having a slightly higher self-critical tendency than males.

Females consistently display higher levels in all three characteristics (Rigid, Self-critical, Narcissistic) compared to males.
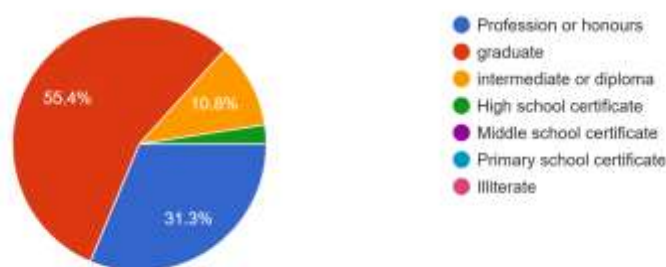
Narcissistic tendencies are the least prominent trait for both genders, though females have a slightly higher level of narcissism than males.

In summary, while both genders share similar trends (self-critical being the highest, narcissistic the lowest), females tend to score slightly higher across all characteristics compared to males.

Figure 2

"What is the highest level of education completed by the head of the family?"
83 responses

- Profession or honours
- graduate
- intermediate or diploma
- High school certificate
- Middle school certificate
- Primary school certificate
- Illiterate

The pie chart illustrates the highest level of education completed by the head of the family, distributed as follows:

55.4% are graduates, making up the majority with at least a bachelor's degree.

31.3% have completed professional or honors-level qualifications, indicating advanced education or specialization.

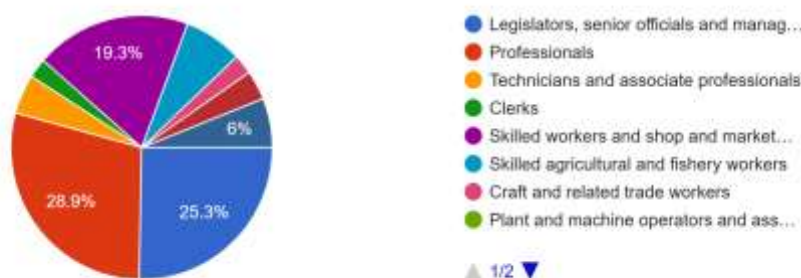10.8% hold an intermediate or diploma qualification.

A smaller portion, 7%, have completed only a high school certificate.

This distribution highlights that most heads of families have achieved higher education, with a notable proportion pursuing advanced studies or professional qualifications.

Figure 3

What is the occupation of the head of the family?
83 responses

- Legislators, senior officials and manag...
- Professionals
- Technicians and associate professionals
- Clerks
- Skilled workers and shop and market...
- Skilled agricultural and fishery workers
- Craft and related trade workers
- Plant and machine operators and ass...

1/2 ▼

The pie chart represents the occupations of the heads of families, with the following key categories:

28.9% are professionals, the largest group, indicating a high level of skill or specialized education.

25.3% are in roles such as legislators, senior officials, or management, suggesting significant leadership or decision-making positions.

19.3% are skilled workers, shop owners, or market traders, showing a presence in trade and skilled labor sectors.
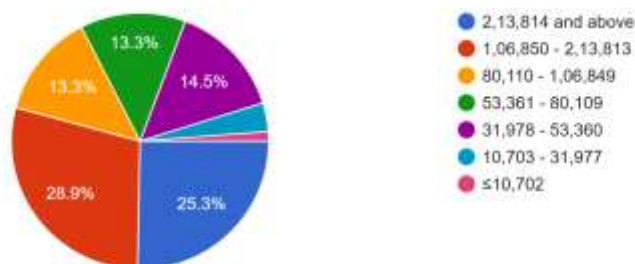
6% are unemployed, representing a small portion without current employment.

The chart also includes smaller, unspecified portions in roles such as elementary occupations, clerks, skilled agricultural work, craft, trade, and machine operation, indicating a diverse occupational spread across various sectors.

Figure 4

The pie chart shows the distribution of total monthly family income across various incomes:

28.9% of families earn between 1,06,850 and 2,13,813, making it the most common income range.

25.3% earn 2,13,814 and above, indicating a high-income group.

13.3% fall into each of the middle-income brackets: 80,110–1,06,849 and 53,361–80,109.

14.5% have an income between 31,978 and 53,360.

Additional lower-income brackets, including 10,703–31,977 and less than 10,702, are also present but not specified in detail. This distribution highlights a diverse income range among families.

V. DISCUSSION

The study explored the influence of gender and socioeconomic status (SES) on perfectionism among young adults aged 18–26. The results reveal that perfectionism manifests in three main dimensions: rigid, self-critical, and narcissistic, and that these dimensions are influenced by both gender and SES factors. These findings offer important insights into how demographic variables shape perfectionistic tendencies, which in turn affect young adults' mental health and well-being.

The most prominent trait across genders was self-critical perfectionism, with females scoring higher than males. This gender difference is consistent with previous research, which suggests that women are more susceptible to self-imposed critical standards due to societal pressures that emphasize appearance, success, and self-evaluation (Klibert et al., 2005). Social expectations often lead women to internalize higher standards, contributing to greater self-scrutiny and critical evaluation. While both genders may aim for high achievement, societal norms tend to place additional pressures on women, leading them to internalize self-critical beliefs more intensely than men (Curran & Hill, 2019). This trait was notably dominant in females in the current study, aligning with findings that women tend to experience more stress when their self-set standards are not met, potentially impacting their mental health.

For males, rigidity was the least prominent trait, which might reflect social expectations that encourage them to adopt a more flexible approach in managing high standards. However, some rigidity was observed, suggesting that while males may not face the same societal pressures to be critical, they are still influenced by a desire to adhere to certain standards. Self-oriented perfectionism in males is often linked to individualistic and competitive goals, where achieving success is a personal endeavor rather than one rooted in societal validation. This can explain why males in this study showed moderate levels of rigidity, as they strive to meet personal standards but might not face the same level of societal pressure to maintain consistency (Sand et al., 2021).

Additionally, SES emerged as a significant factor affecting perfectionism, with participants from higher SES backgrounds demonstrating higher levels of perfectionism across all three dimensions. This finding aligns with Bourdieu's concept of cultural capital, which posits that individuals from affluent backgrounds have access to resources that not only encourage success but also foster a strong emphasis on high standards and achievement (Bourdieu, 1970). Higher SES often means greater exposure to social networks, educational resources, and economic stability, which can amplify expectations for individuals to perform well. In the context of perfectionism, these expectations can translate into increased pressure to uphold family standards and achieve high status, which may foster self-critical or rigid perfectionistic traits as observed in this study.

The association between high SES and perfectionism can also be attributed to the inherent competitive environment in higher socioeconomic groups. Individuals in these groups may experience pressure to maintain or improve their social standing, which often demands excellence. When success and perfection are equated with worth, individuals may feel compelled to meet elevated standards to maintain their social position, fueling perfectionistic behaviors. This association is in line with the theory of social determinants of

health, which emphasizes that people's conditions—where they are born, grow, work, and age—are central to their opportunities and challenges (WHO, 2005-2008). In this case, SES functions as both a resource and a source of pressure, influencing young adults to adopt perfectionistic tendencies that are shaped by both family expectations and social capital.

Another insight from the study is the lower perfectionistic tendencies observed in participants from lower SES backgrounds. This finding aligns with the literature on aspirational motivation, where individuals from lower SES backgrounds may develop perfectionistic traits as a strategy to improve their social position, albeit to a lesser extent than their higher SES counterparts (Solhaug et al., 2021). For instance, individuals from lower SES backgrounds may exhibit rigidor self-critical perfectionism not as an internalized trait but as a survival mechanism aimed at securing better socioeconomic standing. This suggests that perfectionism in lower SES groups may be more contextually driven, with individuals aiming for perfection as a means to access better opportunities, rather than as a core personality trait rooted in societal or familial expectations.

Although the study provided valuable insights, there are notable limitations. First, the sample size was relatively small, which may not provide a comprehensive understanding of perfectionism across diverse SES backgrounds or capture variations in other demographic variables such as ethnicity and cultural background. Additionally, self-report measures were used, which may introduce response bias. For instance, social desirability bias might lead participants to underreport self-critical tendencies or overreport traits perceived as favorable, such as adaptive perfectionism. Future research could benefit from incorporating mixed methods, using both qualitative and quantitative measures, to capture a broader range of perfectionistic tendencies and understand the lived experiences of young adults in different SES groups.

Moreover, while the study focused on young adults, it would be beneficial to conduct longitudinal studies to examine how perfectionism evolves over time in response to changing SES conditions. Such research could offer valuable insights into how economic stability, career progression, or social mobility influence perfectionistic tendencies. For instance, individuals from lower SES backgrounds who achieve upward mobility may develop or intensify perfectionistic traits as they adjust to new social expectations, while those from high SES backgrounds may experience shifts in perfectionism depending on career success or failure.

In sum, this study underscores the complex interplay between gender, SES, and perfectionism in young adults. The findings reveal that young adults are not only influenced by intrinsic traits but also by external factors that shape their motivations and coping strategies. Gender and SES each exert unique pressures that contribute to the development of specific perfectionistic tendencies, which in turn affect young adults' mental health and academic or career outcomes. In light of these findings, interventions targeting perfectionism in young adults could benefit from a more nuanced approach that considers demographic factors.

For mental health practitioners, understanding the influence of gender and SES on perfectionism could be crucial in developing targeted therapeutic interventions. Recognizing that females are more susceptible to self-critical perfectionism, practitioners might focus on helping women set realistic, self-compassionate goals. For individuals from high SES backgrounds, strategies could include managing family expectations and balancing personal aspirations with intrinsic motivations, rather than succumbing to societal pressures.

The role of SES in perfectionism also has implications for educational and workplace settings. Institutions can help reduce the pressure on young adults from high SES backgrounds by fostering an environment that values effort and personal growth over perfect results. For young adults from lower SES backgrounds, providing support mechanisms that emphasize resilience and growth rather than absolute achievement can mitigate the pressures that lead to perfectionistic behaviors. In the study highlights that perfectionism is not solely an individual trait but is deeply embedded within societal structures that influence how young adults perceive and react to expectations. Gendered socialization and socioeconomic status shape the way perfectionism is experienced, with both adaptive and maladaptive aspects impacting young adults' psychological well-being. Addressing perfectionism with an understanding of these demographic influences can pave the way for more inclusive mental health support systems that recognize the diverse needs of young adults. By adopting a holistic approach that considers both individual traits and social context, interventions can better support young adults in managing perfectionistic tendencies in a healthy and balanced manner.

VI. CONCLUSION

The study explored the impact of gender and socioeconomic status (SES) on perfectionism among young adults, revealing significant variations in perfectionistic traits based on these demographics. Females demonstrated higher self-critical tendencies, likely due to societal pressures that emphasize achievement and self-evaluation. Males, while less rigid, showed moderate self-oriented perfectionism, reflecting individualistic goals over societal validation. SES played a crucial role, with individuals from higher SES backgrounds exhibiting stronger perfectionistic traits, potentially driven by access to resources, social expectations, and cultural capital. Those from lower SES backgrounds displayed perfectionism as a motivational tool for upward mobility. These findings underscore the complex interplay between gender, SES, and perfectionism, highlighting the need for targeted mental health interventions. Addressing perfectionism with a nuanced approach that considers gender and socioeconomic influences can help young adults manage perfectionistic tendencies in a balanced way, promoting better mental health outcomes and social resilience.

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