Relationship between Perfectionism and Social Anxiety among University Students of Baluchistan

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Abstract

This study examined the relationship between Perfectionism and Social Anxiety among university students of Baluchistan. The objective of the study was to determine the relationship between Perfectionism and Social Anxiety and also to investigate the role of gender between Perfectionism and Social Anxiety regarding different demographic. The data comprised of 300 university students (150 men, 150 women) was selected through convenient sampling with the age range of 18-30 years. A cross-sectional survey design was used for data collection. Almost Perfect Scale (APS) and Social Interaction Anxiety Scale (SIAS) were used. Pearson product-moment correction and independent sample t-test were employed. The results were evaluated using SPSS 21. Results indicated a non-significant positive relationship between Perfectionism and Social Anxiety. The t-analysis showed that women had more social anxiety as compared to men. Gender differences were not observed in perfectionism. The present study aims to find out the relationship between perfectionism and social anxiety among university students of Baluchistan. Finding of the current study suggests that perfectionism is non- significantly associated with social anxiety while women faced more social anxiety as compared to men whereas both possessed the same level of perfectionism.

Keywords: *perfectionism, social anxiety, students, Baluchistan*

1. Introduction

Perfectionism is defined as suggesting a higher, even flawless performance than is actually the case. It can lead to depression, anxiety, eating disorders and other mental health problems. (American Psychiatric Association, 2016). In literature perfectionism is described as irrational belief. (Biases, 1999). In Ellis (2002) described that people have standards of themselves and for their environment. (Ellis, 2002). According to Slafe and Owens perfectionism has influence in psychology due to the fact that it helps in the growth of an individual and offers significant accomplishments regarding academic, career, sports etc. (Slafe & Owens, 1998). Perfectionism can be defined as when a person demanding high quality performance that the situation demands as compared to others. A person wants high quality of performance as compared to others. Perfectionism is considered to be a personality disorder and is usually developed in a child who needs approval, acceptance and love (Hollender, 1965).

Origin of Perfectionism

In the beginning perfectionism was categorized as a one dimensional category. (Burns, 1980). Further it was only related to negative aspects of personality. Perfectionism one-dimensional team only focuses on negative psychological outcomes

such as low Self-esteem (Ashby, 2002), low satisfaction with life and anxiety (Hewitt et al, 1995)

A study conducted by Hewitt & Flett, 1991 believe that perfectionism is mainly due to the improper cognitive manipulation of the ideal self. In the early studies of perfectionism, most researchers regarded perfectionism as a personality trait with negative self-worth, characterized by striving for perfection and setting Excessive performance goals, with a tendency to over-evaluate behavior (Flett & Hewitt, 2002).

Anxiety is the feeling of increased heart rate, rapid breathing, sweating or chills. Feeling weak or tired, jittery, irritable or nervous; Feeling of danger or impending death difficulty concentrating; sleep disturbances; and gastrointestinal problems.

Social anxiety disorder, also known as social phobia, is a mental health condition. (Diagnostic Statistical Manual of Mental Disorders [5th ed.; DSM-5], 2014) It is described as Excessive fear and avoidance of social events due to fear of the judgments of others.

Social anxiety disorder disturbs and interrupts your daily life and routine. It can affect your relationships, career goals, office, school, and work. Individuals who may attend parties or other social gatherings may feel fear or anxiety. Some people who are being called on in class may also feel anxious and fearful. It may progress in families. Amygdala, a structure in the brain controls

fear. Environment may also play a role, as well as embarrassing social situations. It leads to extreme fear of being observed and judged. Sometimes they end up staying away from places or events where they think they can do something that embarrasses them.

Social anxiety disorder is not uncommon; the studies show that about 70 percent of people in America are facing it. People who are shy in their youth tends to develop social anxiety disorder. Without treatment it can last for many years or a lifetime and prevent a person from reaching his/her full potential. People with SAD are always concerned about their actions around people. They fear negative

In Pakistani cultural contexts, SAD is mostly experienced by women as they find it difficult to travel alone ought to be done in a crowd they are always in search of companion they can rely on. Usually SAD can be treated by using CBT, exposure therapy, cognitive therapy and social skills training.

Social Anxiety Disorder in DSM 5

Social anxiety disorder, also known as social phobia, is an anxiety disorder that involves discomfort in social interactions and worry about the embarrassment and judgment of others. (NIMH, 2014). It can range in severity from distressing to practically disabling fear with its infiltration into multiple areas of life, which can be avoided and accommodated. (American Psychiatric Association, 2013). Social anxiety can lead to isolation or lack of social skills, or stagnation in social skills, which can exacerbate existing social anxiety.

evaluation by others, that they might show any kind of anxiety symptoms.

A behavior is considered abnormal or classified as a disorder when the person fears the situation at an extreme level or might find interacting with peer their groups due to excessive fear of rejection or judgment. Due to this the individual reduce his/her self-interaction with others. She/he finds it more comfortable or convenient to stay away from others rather than being in a crowd of people with unwanted attention. Such an individual is always concerned if he or she is being observed or is exposed to any kind of scrutiny.

*Diagnostic Criteria of Social Anxiety According to Diagnostic and Statistical Manual of Mental Disorders (*DSM-V).

Fear or anxiety in one or more social situations in which the individual faces the possibility of being scrutinized by others. The examples are social interactions (e.g., talking, networking with strangers), being overbearing (e.g. eating and drinking), and behavior in front of others (e.g., pain, tasting melancholy). For children, anxiety should occur in peer environments, not just during interactions with adults.

Rationale of the Study

The current research study can help us to understand the individual's life about the concept of perfectionism, a person's concern with striving for perfection in everything. Perfectionism leads to anxiety. As literature demonstrates in many countries which elaborate perfectionism with many variables

along with social Anxiety. There is no research about perfectionism in developing cities of Pakistan except in Lahore. This study helps us to fill the research gap and assess the missing knowledge of perfectionism and social anxiety among university students. Additionally, it also helps us to identify the ratio between males and female's students of Baluchistan. The research study is conducted in Quetta where the lifestyle of people is gradually changing which leads to living a perfect life. This particular study assists to demonstrate the effectiveness and role of the concept of perfectionism and how it leads to social anxiety. The purpose of the study is to demonstrate Perfectionism and its association with social anxiety among university students.

Moreover, many colleges and universities have Counseling and on-campus programs specifically Designed to combat and address mental health Issues in their students.

The aim of this study was to find the correlation between perfectionism and Social Anxiety keeping in view the important demographic characteristics and how perfectionism and social anxiety are related to these characteristics.

The study is significant because it emphasizes the influence of perfectionism on student's psychological, social and academic areas of lives. This study will contribute to prevent people from being perfectionists and also from Social Anxiety. This is useful for researchers for understanding current trends and problems in students suffering social anxiety because they want perfectionism in their respective lives.

1. Literature Review

A study was conducted by Harlan and his colleagues in the University of Albany, New York. Which investigated perfectionism with social phobia too. Participants who meet criteria of social phobia mentioned in DSM-III were parts of this study. 61 participants were there which included both males and females. In order to measure perfectionism, the MPS (Multidimensional Perfectionism Scales) was used and for finding about social phobia the social interaction anxiety scale (SIAS) was used. The main purpose of this study was to assess the missing knowledge of perfectionism in social phobic patients. This particular study allowed the researchers to add new information in the field of psychology about the association between social phobia and perfectionism. Not much research is conducted on social phobic patients, so this study helped the researcher to learn new information about these interacting variables. Researchers concluded that perfectionism is positively correlated with social phobia. (Juster et al., 1995).

Fatima et al. (2021) conducted studies in Lahore to determine the relationship between perfectionism and social anxiety. Social anxiety was thought to be positively related to teacher perfectionism. A complete self-referral scale (PSPS) was used (Hewitt et al., 2003). It includes three features: full self-promotion, no deprivation, no deprivation detection, and a social anxiety scale.. , the Social Anxiety Questionnaire for Adults (SAQA-30). On the sub-levels of public speaking/speaking to authority, interaction

with the opposite sex, positive expression of resentment, criticism and embarrassment, interaction with strangers, the sample consisted of 200 teachers, a rice field. This representative was selected from public colleges and universities in Lahore. The results were obtained by applying descriptive statistics, reliability analysis, Pearson relationship and mediation analysis, and showed that subjective presentation of perfectionism was positively associated with social anxiety. The subscales were also correlated with each other. The conclusion of this study is that social anxiety explains the positive relationship with perfectionism.

Yap et al. (2016) The studies in Australia determined how Fear of positive Evaluation and fear of negative evaluation is related to perfectionism and how these components interact to predict social anxiety.FPE, FNE, perfectionism, and social anxiety were measured. In order to measure perfectionism, The Frost Multidimensional Perfectionism Scale and to find about social anxiety The Liebowitz Social Anxiety Scale-Self Report. The main purpose of this study was to test several predictions about the relationship between FPE, FNE, perfectionism and social anxiety. This studies have 382 Participants. The participants were given questionnaires to fill online. Participants were about 18 -63 ages around local university. The results of these studies showed that both FNE and FPE significantly rotated the relationship between perfectionism and social anxiety. High levels of FPE and FNE showed a positive relationship between perfectionism and social anxiety, while low levels of FPE and FNE rendered the relationship non-significant. The Study was conducted by Mohammadian Y, and Mahaki B, in Iran. Mohammadian et al. (2018).

This study was conducted in order to investigate perfectionism and social anxiety. Perfectionism, susceptibility to social rejection, and anger are personality traits associated with social anxiety. Social anxiety disorder also focuses on anger as a personality trait and emotional state. The primary objective of this study is to investigate the role of emotional experience and personality traits in predicting social anxiety among a non-clinical group of Iranian students.

The participants consisted of 131 students from Isfahan University in this research. Multiple linear regressions were used to ascertain associations with wholeness, emotional experience quality, and anger expression with self-reported social anxiety severity and subjective sensitivity. Total LSAS levels, job status, social fear and avoidance. The results of this research are perfection, experience of anger and expression, and personal sensitivity. All of this is related to social anxiety.

Similarly, Barrow and Moore (1983) suggest that perfectionism is at the root of evaluation anxieties, including social anxiety. Bums (1980) observed from his perfectionistic clients that they appear to be weak to a number of mood disorders, like depression, performance anxiety and social Anxiety. Other clinicians have observed related social

problems, such as social inhibition, anticipation of rejection of interpersonal encounters, withdrawal from social interactions, and shyness in perfectionistic individuals. The finding of these studies indicate that perfectionism is intricate in social and performance and phobias.

Hewitt et al., 1991. There are no existing studies examining that there is interlinked between social anxiety and perfectionism. However, establishing theoretical speculations and observations of perfectionists, there should be a positive relationship. Social anxiety should be positively associated with socially-prescribed perfectionism and self-oriented perfectionism because the self is an object of assessment in both. No significant relationship is expected between social anxiety and other-oriented perfectionism because social anxiety is a subjective experience of being evaluated by others; Hewitt and Flett (1991) found that 'interpersonal sensitivity, a measure related to social anxiety, correlated positively with perfectionism.

Research conducted in Canada to inspect the perfectionism interconnected to social anxiety disorders such as PD (Panic disorder), OCD (obsessive compulsive disorder) and other anxiety disorders. Multidimensional perfectionism scale contains 35-items and Beck depression inventory used for measurement. Both scales were applied on diagnostic and nonclinical participants, 195 are diagnostic participants (with anxiety disorder) and 49 non diagnostic participants (haven't any psychological disorder). There

were significant effects of perfectionism in the diagnostic group that had high scores in both scales Martin et al., (1998).

Study conducted in France 2011 concluded that unhealthy patterns of perfectionism promote anxiety disorder and also reported that perfectionism was predominant. 132 school students were the participants of study. Revised Children and Adolescent Manifest Anxiety scale, Children and Adolescent Perfectionism Scale used as for measurement. Both scales apply to two control groups, one of the gifted group and the other was a non-gifted group. There were significant differences noticed between both groups. Level of anxiety was high in the non-gifted group and low anxiety in the Gifted Perfectionism group (Grignard et al., 2011).

In one of the studies 129 students were interviewed and given questionnaires to know the socially prescribed perfectionism and perfectionistic Self-presentation, perceived social support, and social anxiety are there. (Hesler, 2016)

The other study examined the role that anticipatory processing has on the interlinked between social anxiety and perfectionism. The sample size of this study is 245 individuals from the general community. The online survey was taken. The participants were given a questionnaire package which comprised depression, perfectionism, and social anxiety measures. Results of this study elaborates that both were positively associated i.e. social anxiety and maladaptive perfectionism (Scott et al., 2020).

According to the researchers both maladaptive and adaptive anticipatory processing can be used to reduce social anxiety but the results of both classes of anticipatory processing are different in changing the status of the social anxiety such as maladaptive anticipatory processing like away from the problems, and preservative thinking have been set up to be positively connected to depression and mental distress. Adaptive anticipatory processing such as analyzing the problems and its details and mental simulation is positively connected to adaptive mental health results. (Scott et al., 2020).

The study conducted in foreign country in (2001) the main focus of the study was to see the maladaptive perfectionism with higher level of social anxiety the experiment among university students of Massachusetts. The study has 209 samples of college students.

The study using cross sectional designs to see the gender differences in the study they also generalize during controlling the depression its links with anxiety that can attract social anxiety. The result is considered that female and female participants did not significantly correlate between social Anxiety and Perfectionism. And this study also describes positively the association of perfectionism and social Anxiety that is r = 49 (Kawamura et al., 2001).

Alden et al. (2002) highlights the nature of perfectionism which are intrapersonal context, Uni-dimensional and multidimensional construct, perfectionism related to high standard and construct

impairment that is psychological data were collected on two completeness scales containing high-level subscales and one critical self-assessment assessment subscale. Frost and others. A multidimensional scale of perfection used to assess high standards. FMPS was tested in a sample of 128 undergraduate students from the University of California. Almost Perfect Scale –Revised was applied to undergraduates' unselected students. The Data Analytic Strategy was a multivariate assessment of social anxiety in both data sets. The hypothesis of this study was that social anxiety would not be a positive covariate of high standard. The outcomes of this study are that the difficulty to achieve high standards, appears to contribute to dysfunction that is psychological in the form of social anxiety.

An experimental study was conducted by Peter J. Birling and Lynn E. Alden in the University of British Columbia. In order to look into the level of perfectionism in social phobic and to investigate in such individuals, the upshots of perfectionism. An experimental study is used in two groups. In order to investigate the level of perfectionism between phobic and non-phobic individuals in a controlled situation. This study consists of an experimental and control group. Experimental group has 28 social phobic patients while the control group has 29 participants. The final sample of the experimental group consisted of 13 female and 15 male and there mean age is 36.1 years and the sample of control group consisted of 16 males and men and 13 females and there mean age is 34.9 years. Data was collected through

survey method. Which included the scale of MPS for perfectionism and SAD for social anxiety. This study was analyzed by regression analysis. The multiple regression equation was used in this study. Hence this study clarifies that social phobic are more likely to be socially perfectionists then ordinary individual. This study put forward that a key note of social Phobia is a sense of not failing to meet own standards and also failing to meet others' standards. The study also expands that patients having social Phobia have perfectionistic personality features. By comparing data from two groups the result obtained that social Phobic reported greater socially prescribed perfectionism then control.

2. Methodology

Problem Statements

To investigate if perfectionism has an impact on social Anxiety among university students in Baluchistan.

Objectives

- To investigate the relationship between perfectionism and social anxiety among university students.
- To investigate the role of gender in the relationship between perfectionism and social Anxiety regarding the different demographics.

Study Design

This research used correlation design. It is basically used to find out the relationship among two variables and to allow the future possibilities from present knowledge.

Hypothesis

- There will be a positive relationship between perfectionism and social anxiety among university students.
- There will be a gender differences in the relationship between perfectionism and Social Anxiety.

Sample

The target population of this research is university students, both male and female students. The sample consisted of a total of 300 participants, enrolled in different program in various departments of universities. Data was collected from 150 males and 150 female's participants. Data was collected via the convenience sampling technique of non-probability sampling.

Inclusion Criteria

This study includes those students belonging to universities, Able to read and understand English.

Exclusion Criteria

Students not belonging to universities. Those who are not able to read and write English.

Variable of the Study

Two variables were measured, Perfectionism and Social anxiety.

Conceptual and Operational Definitions of Variables

Perfectionism.

Perfectionism is defined as when a person has an inclination to demand of ego and others in an extremely high and unblemished

performance level as compared to other people, which is required by society and situations. (American Psychiatric Association, 2016). The higher the person's score in APS-R scale the more Perfectionism he/she has.

Social Anxiety.

According to Diagnostic Statistical Manual of Mental Health Disorders, (5th ed.; DSM-5) Social Anxiety includes the criteria when a person has fear and worries that he and she is negatively judged by society. He/she has distress and panic with social situations. Like meeting strangers, conveying, building connections, and dating. They believe that they are judged awkwardly and negatively like weak and stupid. (American Psychiatric Association, 2000). Students who score high on Social Interaction Anxiety Scale tend to have more social anxiety as compared to those who scored less.

Instruments

Informed Consent

Informed consent was used ensuring that the participation will be voluntary, anonymous, and confidential.

Demographic Questionnaire

It consisted of demographic variables related to participant's age, gender, ethnicity, institution, department, marital status, family system.

Almost Perfect Scale- Revised (APS-R)

The developer of Almost Perfect Scale Slaney and Johnson in 1992. The original APS has 39 items and APS-R has 23 items having 12 items as measure of the variation factors, 7 items to indicate the highly excellence factors and

4 to indicate the sequence factors. The reply range from strongly agree to strongly disagree (1-7). There is no reverse scoring. The structure coefficient of all of the items ranged from 42 to a high of 88. The reliability of APS- R is .82 to .92. (Slaney et al., 1992)

Social Interaction Anxiety Scale (SIAS)

Mattick and Clark in (1988) develops Social Interaction Anxiety Scale. The SIAS comprises 19 items. Which values on a 5-points Likert scale range from not at all to extremely true of me. This scale contained all the negative statements. Only two items are positive so they will score in reverse. The reverse items are 8 and 10. The Cronbach's alpha range is 0.93 the total SIAS score is brought out by the addition of values after reverse scoring of 2 positively worded items (Mattick et al., 1988).

Procedure

This research consists of undergraduate students, who were taken from different universities of Baluchistan. It included both male and females. For this purpose, data collected from Buitems, Baluchistan, Alhamd and SBK University. The permission was obtained from their respective universities. In contemplation for getting permission informed consent was taken from the participants for the sake of their willingness in research study. Afterward they were notified about the purpose of research and given the surety about confidentiality and all other ethical standards would be followed. Most importantly informed consent taken from the participants for getting permission for their volunteer participation would not be shared with anyone. Questionnaires given to

participants individually. The participants were asked to carefully read instructions and not to leave any items unanswered. The rules and principles include that a researcher don't forcibly give questionnaires to participants. And also the research doesn't imply any type restriction to volunteers or participants. After most coordination of participants were appreciated. Meanwhile collecting data was analyzed statistically to encounter the objectives of study. The study obeyed all ethical guidelines for protection of data, confidentiality, and voluntary participation. The researcher provides written informed consent to the entire respondent so they have the option to withdraw from research whenever they want.

Ethical Consideration

Simultaneously when assent with authorities of university were taken, data were gathered appropriately right after that. Additionally, participants were given written informed consent and only consensual participants were given the questionnaire. They were asked about whether their privacy and confidentiality was maintained throughout the research project.

RESULTS

Table 1 represents the demographic information about the participants that were part of the research. Which include 150 males (50%) and 150 females (50%), with their age ranging between 18 to 29. The student lies in 18-21(56.7%), 22-25(42%), and 26-29 (1.3%). The sample was collected from four public universities of Quetta, including SBK (35.3%), BUITEMS (18.7%), UOB (25.3%) and ALHAMD (20.7%). Students were from two program BS (91.7%), MASTER (8.3%). The

students were enrolled in diverse Departments as well, including Management Sciences (16.0%), Social Sciences (25.0%), Arts and humanities (17.0%), Basic Sciences (10.0%), Life sciences (21.7%), and Engineering (10.3%). Students belong to 6 diverse ethnicities; Pathan (39.3%), Baloch/ Baravi (32.0%), Urdu (8.7%), Punjabi (13.7%), Persian (2.0%) and others (4.3%). Single Students (93.0%) and unmarried Students (7.0%) from the joint family (69.3%) and from nuclear family (30.7%).

3. **Table 1**

Frequency and Percentage across Demographic Variable

Table 2

Descriptive Study and Psychometric Properties of Almost Perfect Scale and Social Interaction Anxiety Scale (N=300)

Scales	*M*	*SD*	Range	α
APS	106.5	19.6	34-157	.83
SIAS	33.66	12.6	3-70	.82

Note APS = Almost Perfect Scale; SIAS = Social Interaction Anxiety Scale.

Table 2 outline shows the means, standard deviation, alpha reliability, maximum and minimum level of range, and skewness and kurtosis for the Almost Perfect Scale and Social Interaction Anxiety Scale among university students. It shows that alpha reliability coefficient of Almost Perfect Scale is .83 and of Social Anxiety Scale is .82 which indicates that the scale is reliable for the present study. The data is normally distributed as skewness is less than 1.)

Table 3

Table 3 shows that Pearson's correlation coefficient was apply to compute the results. PPMC of social anxiety and perfectionism were positively correlated. *(r = 0.006, P>0.05).*

Correlation between Almost Perfect Scale and Social Anxiety Scale among University Students

Variables	APS	SIAS
APS	-	.006
SIAS	.006	-

(N=300)

Note APS = Almost Perfect Scale; SIAS = Social Interaction Anxiety Scale

Variables	Characteristics	Frequency	%
Gender	Male	150	50.0
	Female	150	50.0
Age	18-21	170	56.7
	22-25	126	42.0
	26-29	4	1.3
Program	BS	275	91.7
	Master	25	8.3
Institution	SBK	106	35.3
	Buitem	56	18.7
	UOB	76	25.3
	Alhamd	62	20.7
Department	Management Sciences	48	16.0
	Social sciences	75	25.0
	Arts and humanities	51	17.0
		30	10.0
	Basic sciences	65	21.7
	Life sciences engineering	31	10.3
Ethnicity	Pathan	118	39.3
	Baloch/Baravi	96	32.0
	Urdu	26	8.7
	Punjabi	41	13.7
	Persian	6	2.0
	others	13	4.3
Marital status	Single	279	93.0
	Married	21	7.0
Family System	Joint family	208	69.3
	Single/nuclear family	92	30.7

Table 4

Independent t Test Variance for Males and Females.

Variables	Men (n-150)		Women (n-150)		t	p	Cohen's d
	M	S.D	M	S.D			
APS	108.7	17.76	102.77	104.77	1.591	.113	.18
SIAS	31.21	12.94	36.10	12.00	-3.391	.001	.41

Table 4 shows findings of independent t-test that administered to determine the difference between almost perfect scale and social interaction anxiety scale with respect to gender. According to statistics males social anxiety levels (M = 31.21, SD = 12.937) and females social anxiety levels (M = 36.10, SD = 12.002) did not had significant differences (t=-3.391).Similarly, males participants perfectionism level (M =108.37, SD = 17.758) and female participants perfectionism level (M =104.77, SD = 21.281) also did not yield significant gender differences (t =1.591) .It indicates that there is no statistically significant difference between males and females on the scores of perfect scale as p > 0.05and on social interaction anxiety scale there is gender differences as p < 0.05.

4. Discussion

The study is conducted to explore the concept of perfectionism and social Anxiety. The aim of the study was to assess the relationship between perfectionism and social anxiety from public universities of Baluchistan. A sample of 300 students is drawn and the sample selection is convenient. Data was collected. The result demonstrated a high score on perfectionism will positively correlate with social anxiety. The investigation is carried out to understand the perfectionism and social anxiety among university students the first hypothesis was that there was a positive relationship between perfectionism and social anxiety.

The Near Perfectionism Scale (APS-R) is used to assess perfection, and the Social Interaction Anxiety Scale (SIAS) is used to assess social anxiety. They found a positive relationship between perfectionism and social anxiety. Hence the hypothesis H1 was supported. This shows that an increase in perfectionism would lead to higher social anxiety.

Our research findings support this hypothesis, Consistent with this hypothesis perfectionism is correlated to increased level of social anxiety in this study. The further finding suggests that a construct related to social anxiety was associated with other oriented Perfectionism in a study conducted to determine the three dimensions of perfectionism and correlates (Hewitt & Flett, 1991). Other research shows that perfectionism is positively correlated with social phobia (Juster et al., 1995). (Fatima et al, 2021) conducted research in Lahore and concluded that social Anxiety Explains positive relationship between perfectionism. Relationship between perfectionism and social anxiety was positively demonstrated. (Yap et al., 2016). Mohammadian et al. (2018).Study was found that interpersonal sensitivity, anger experience, expression skills are positively related to social anxiety.

The second hypothesis of study is there will be gender differences in the relationship between perfectionism and social Anxiety. Hence this research find differences between male and female on Social Anxiety. Females scores high on social anxiety as compared to males. Our research findings supports

hypothesis as the results of several researches. According to study the spreading of SAD catch women's in large quantity then men's. Which also varies culturally. (Goffins, 2012) Women are more likely to have SAD, and also have increase subjective distress. Female as compared to males have more generalized anxiety disorder, specific phobia, and. (Asher, 2018).

Masculinity is negatively associated with, trait anxiety, social anxiety. While Feminist scores report more anxiety. (Christiansen, 2015).

5. Conclusion

The study conducted in the public universities of Baluchistan, for the purpose to obtain the relationship between perfectionism and social Anxiety and also to point out the gender differences obtain on both scale. For measuring perfectionism Almost Perfect Scale is used and for Social Anxiety, Social Interaction Anxiety Scale. The results are cultivate through the analysis of frequency table, descriptive table, Pearson's correlation analysis, and t test table. Hence concluded there is positive relationship between perfectionism and Social Anxiety and females have high social anxiety as compared to males, while there is no significant gender differences on Almost Perfect Scale.

Limitations

The findings of this study have to be seen in light of some limitations. Firstly, the population of this study only include the university students not school and college students. For that reason the obtain knowledge of the study could always be generalized in this particular population. In order to have better understanding studies on large sample size and diverse demographic of sample should be used. Secondly this research was limited due to time and data was collected through convenience sampling and we were only able to collect from four universities of Quetta. Thirdly this research is also restricted to one city of the province Baluchistan. Furthermore this study used Quantitative approach as there is no access to specific feedback.

Implication

Perfectionism is associated with particular anxiety disorders. Thus the current obtaining have important implications for cure anxiety disorders. Since using cognitive and behavioral strategies. It is crucial to address the relevant types of perfectionist thoughts in treatment. Arrange Awareness seminars in school, colleges and university in order aware people that perfectionist is not be mandatory for living in societies but people must be grateful and have proud lifestyle what they have in their life. Motivational seminars and counselling will also provide assists to students about speaking publicly, to be confident in social gathering, in short to reduce the level of social Anxiety among students.

6. References

Antony, M. M., Purdon, C.L., & Swinson, R. P. (1998). Dimensions of Perfectionism Across the Anxiety Disorder. *behavior research and therapy 36(8) 1143-1154.*

Ashby, J. S., & Rice, K. G. (2002). Perfectionism, Dysfunctional Attitudes, and Self-Esteem: a Structural Equation Analysis.

Asher, M., & Aderka, M. I. (2018). Gender Differences in Social Anxiety Disorder. *Journal clinical psychology, 74(10), 1730-1741.https://doi.org/10.1002/jclp.22624*

Bieling, P. J., & Alden, L. E. (1997).The Consequences of Perfectionism for Patients with Social Phobia. *British journal of clinical psychology, 36, 387-395.*

Burns, L. R., Dittmann, K., Nguyen, N., & Mitchelson, J. K. (2000). *Academic journal of Procrastination, Perfectionism, and Control Associations with Vigilant and coping. Social behavior & personality, 15, 35-46.*

Christiansen, D. M. (2015). Examining Sex and Gender Differences in Anxiety Disorders. *a fresh look at anxiety disorder, DOI: 10.5772/60662*

American Psychiatric Association.(2013). *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.) American psychiatric association.

Fatima, M., Qayyum. S., & younas. F. (2021). Perfectionistic Self-Presentation, Social Anxiety and Interpersonal Problems in Teachers. *58(2), 5060-5074.*

Flett, G. L., Hewitt, P. L., & Rosa, T. D. (1996). Dimensions of Perfectionism,

Psychosocial Adjustment, and Social Skills. *personality and individual differences, 20, 143-150.*

Frost, R. O., & Steketee, G. (1997). *Perfectionism in Obsessive Compulsive Disorder Patients. behavior research and therapy.35, 291-296.*

Gauffin, S. K., Pollock, W. R., & Mattila M. (2012). Gender Differences in Social Anxiety Symptoms: *A Novel Use of Two Self-Report Measures in a Finnish Sample.cureus,4(12) doi:10.7759/cureus.78*

Hesler, k. (2016). Perfectionism, Social Support, and Social Anxiety in College Students. *proceedings of GREAT day.2015(9)*

Hewitt, P. L., & Flett, G. L. (1991). Perfectionism in the Self and Social Contexts: Conceptualization, Assessment, and Association with Pathology. *journal of personality and social psychology. 60(3), 456-470.*

Hollender, M. H. (1965).*Perfectionism. Comprehensive psychiatry,6(2), 94-103.* https://doi.org/10.1016/S0010-440X(65)80016-5

Jessica, H., Scott., Yap. K., Andrew, J. P., Francis., & Schuster, S. (2014) Perfectionism and its Relationship with Anticipatory Processing in Social Anxiety. *australian journal of psychology, 66(3), 187-196.*

Juster, H. R., Heimberg, G. R., Frost, O. R., Holt, C. S., Mattia, I. J., & Faccenda, K. (1995). Social Phobia and Perfectionism. *elsevier science Ltd, 96.*

Kawmura, K. K., Hunt, L.S., Frost, R.O., & DiBartolo, P. M. (2001). Perfectionism, Anxiety, and Depression: Are the Relationships Independent? *Cognitive therapy and research, 25(3), 29*

Lee, M. A., Schoppe, S. S. J., & Kamp, D. (2012). *Parenting Perfectionism and Parental Adjustment. personality and individual differences, 52, 454-457.*

Mattick. R. P., & Clarke. J.C. (1988). Development and Validation of Measures of Social Phobia Scrutiny Fear and Social Interaction Anxiety. *behaviour research and therapy, 36.*

Mohammadian, Y., & Mahaki, B. (2018). Investigating the Role of Interpersonal Sensitivity, Anger, & Perfectionism in Social Anxiety. *international journal of preventive medicine, 9(2).*

Shumaker, E. A., & Rodebaugh, T. L. (2009). Perfectionism and Social Anxiety: *Rethinking the Role of High Standards. journal of behavior the* and experimental psychiatry, 40(9), 423–433. Doi:10.1016/j.jbtep.2009.04.002

Stoeber, J., & Otto, K. (2006). Positive Conceptions of Perfectionism: *Approaches, Evidence, Challenges.*

personality and social psychology review, 10, 295-319.

Stoeber, J., & Stoeber, F.S. (2009). Domains of Perfectionism: Prevalence and Relationships with Perfectionism, Gender, Age, and Satisfaction with Life. *personality and individual differences, 46,* 530–535.

Slaney, B. R., Rice, K. G., Mobley, M., Tripp, J., & Ashby, J. S.(2001). *Measurment and Evaluation in Counseling and Development. 34(3). 130-145.*

Yap, k., Gibbs, L. A., Francis, J. P., & Schuster, E.S. (2016). Testing the Bivalent Fear of Evaluation Model of Social Anxiety: *the Relationship between Fear of Positive Evaluation, Social Anxiety, and Perfectionism. cognitive behavior therapy.Doi.org/10.1080/16506073.2015. 125941*