CHAPTER 4

DISCUSSION

&

CONCLUSION
DISCUSSION AND CONCLUSION

The present study was designed to meet three main objectives—

First, to study the effects of perfectionism (High Perfectionism Group: HPG/ Low perfectionism Group: LPG) on the locus of control scores.

Second, objective of the research was to explore the effects of perfectionism (High Perfectionism Group: HPG/ Low perfectionism Group: LPG) on the mental health of subjects.

Third, objective of the research was to study Locus of Control (Internals/ Externals) effects on perfectionism scores are presented.

(1) PERFECTIONISM EFFECTS ON LOCUS OF CONTROL:-

Part one presents the results perfectionism (High Perfectionism Group: HPG/ Low perfectionism Group: LPG) effects on Locus of Control Scores.

Results indicated that the main effect of perfectionism was statistically significant t-value = 12.11, p < .01 for male Ss. It indicated that HP group was significantly different from LP group in their locus of control.

Results also showed that the main effect of perfectionism was statistically significant t-value = 12.11, p < .01 for female Ss. It indicated that HP group was significantly different from LP group in their locus of control scores.
Results indicated that the main effect of perfectionism was statistically significant t-value = 13.27, p < .01 for rural Ss. It indicated that HP group was significantly different from LP group in their locus of control scores.

Results indicated that the main effect of perfectionism was statistically significant t-value = 9.18, p < .01 for urban Ss. It indicated that HP group was significantly different from LP group in their locus of control scores.

There are several studies, which showed the perfectionism effects on different aspects of human social life.

Perfectionism can drive people to accomplishments and provide the motivation to persevere in the face of discouragement and obstacles. Roedell (1984) argues that "in a positive form, perfectionism can provide the driving energy which leads to great achievement. The meticulous attention to detail necessary for scientific investigation, the commitment which pushes composers to keep working until the music realizes the glorious sounds playing in the imagination, and the persistence which keeps great artists at their easels until their creation matches their conception all result from perfectionism".

Slaney found that adaptive perfectionists had lower levels of procrastination than non-perfectionists. High-achieving athletes, scientists, and artists often show signs of perfectionism. For example, Michelangelo's perfectionism may have spurred him to create masterpieces such as the statue David and the Sistine Chapel. Perfectionism is associated with giftedness in children.
In its pathological form, perfectionism can be very damaging. It can take the form of procrastination when it is used to postpone tasks ("I can't start my project until I know the 'right' way to do it."), and self-deprecation when it is used to excuse poor performance or to seek sympathy and affirmation from other people ("I can't believe I don't know how to reach my own goals. I must be stupid; how else could I not be able to do this?").

In the workplace, perfectionism is often marked by low productivity as individuals lose time and energy on small irrelevant details of larger projects or mundane daily activities. This can lead to depression, alienated colleagues, and a greater risk of accidents. Adderholt-Elliot (1989) describes five characteristics of perfectionist students and teachers which contribute to underachievement: procrastination, fear of failure, the all-or-nothing mindset, paralyzed perfectionism, and work holism. In intimate relationships, unreal expectations can cause significant dissatisfaction in both partners. Perfectionists may sacrifice family and social activities in the quest for their goals.

Perfectionists can suffer anxiety and low self-esteem. Perfectionism is a risk factor for obsessive-compulsive disorder, eating disorders, and clinical depression. Therapists attempt to tackle the negative thinking that surrounds perfectionism, in particular the "all-or-nothing" thinking where the client believes that an achievement is either perfect or useless. They encourage clients to set realistic goals and to face their fear of failure.

Like most personality traits, perfectionism tends to run in families and probably has a genetic component. Parents who practice an authoritarian style
combined with conditional love may contribute to perfectionism in their children.

Perfectionism may be a legacy of our evolutionary past. Hominids who were motivated for prolonged, incremental improvement (perfectionism) could create better tools and this would provide significant survival advantages.

Perfectionism has been described as the tendency of individuals to set unrealistically high standards and then critically evaluate one's ability to achieve those standards (Frost, Marten, Lahart, and Rosenblate 1990). Although the concept of perfectionism has been investigated for more than four decades, it was the concurrent efforts of separate research teams in the 1990s that have led to the multidimensional perfectionism measures commonly utilized today. Hewitt and Flett (1991) developed an instrument (HMPS; Hewitt Multidimensional Perfectionism Scale) that measured perfectionism based on three subscales: Self-Oriented Perfectionism (the setting of high expectations for oneself and the motivation to avoid failure), Other-Oriented Perfectionism (the setting of high expectations for others), and Socially Prescribed Perfectionism (the need to attain perceived high expectations of significant others). Independent research by Frost et al. (1990) led to the development of the Frost Multidimensional Perfectionism Scale (MPS). The MPS measures perfectionism in six dimensions: Concern over Mistakes (CM), Doubts about Actions (D), Personal Standards (PS), Parental Expectations (PE), Parental Criticism (PC), and Organization (O). Both the MPS and the HMPS have been used extensively in the literature (Frost,
Much of the research involving perfectionism concerns the differentiation of positive and negative aspects of the trait. Hamachek (1978) identified individuals that set high standards and allow little leeway for mistakes as neurotic perfectionists, while those that set high standards and allow themselves some degree of latitude for not achieving those goals were labeled as normal perfectionists. Research by Enns and Cox (1999), Frost et al. (1993) and Hill, McIntire, and Bacharach (1997) isolated adaptive (healthy) and maladaptive (unhealthy) aspects of perfectionism, suggesting that some facets of perfectionism lead to higher performance and some lead to higher anxiety over performance. Frost et al. (1993) identified separate adaptive subscales in the HMPS and the MPS, specifically labeling subscales Personal Standards and Organization from the MPS as a “positive striving” characteristic of perfectionism. In the original research, Frost et al. (1990) also found that Personal Standards and Organization were negatively correlated with the frequency of procrastination, ascribing this to the possible planning of work strategies. Flett, Blankstein, Hewitt, and Koledin (1992) and Flett, Hewitt, and Martin (1995) determined that certain aspects of perfectionism can lead to the setting of unattainable goals and procrastination. The isolation of the impact of certain aspects of perfectionism was suggested by Frost et al. (1990), who noted that in order to understand perfectionism, it is necessary to examine its dimensions separately. The individual aspects of perfectionism as measured by the MPS have been validated by Frost et al. (1990) and Frost et al. (1997).
Given the nature of perfectionism and its bidirectional effects on performance, it is surprising that very little research has been done on the impact of perfectionism in the college classroom. One such study by Brown et al. (1999), involving female undergraduate students enrolled in an abnormal psychology course, found that the Personal Standards subscale of perfectionism was associated with improved academic performance on a subsequent exam when the individual scored higher than expected on an initial examination. Results of the study also indicated that, as a single dimension, Personal Standards was positively associated with overall academic performance as measured by GPA. Not unexpectedly, elevated levels of Personal Standards were linked with increased study time and time spent in discussion with instructors about grades. In a study of students enrolled in a second year psychology course, Bieling, Israeli, Smith, and Antony (2003) found that college students with higher levels of perfectionism set higher goals and were more likely to fall short. They also concluded that adaptive perfectionism was related modestly with performance and was positively associated with a preparedness attribute, which is consistent with the findings of Brown et al. (1999). It appears that in the limited research involving college students, Personal Standards has been identified as a clear link of perfectionism to academic performance.

Perfectionism is not a healthy pursuit of excellence: Perfectionism is not a healthy pursuit of excellence. There are big differences between perfectionists and healthy achievers. Perfectionists believe that mistakes must never be made and that the highest standards of performance must always be achieved.
Those who strive for excellence in a healthy way take genuine pleasure in trying to meet high standards. Perfectionists on the other hand are full of self-doubts and fears of disapproval, ridicule and rejection. The healthy striver has drive, while the perfectionist is driven.

Education authors such as Miriam Adderholt and Antony and Swinson note that extreme forms of perfectionism in children and students in educational settings can take on destructive and debilitating forms such as psychosomatic symptoms (high blood pressure, tics, ulcers, etc.), drug use, eating disorders, or cause the exact opposite: fear of failure so poignant that students drop out or refuse to try new tasks they do not believe they can excel in. Educators suggest setting a distinctive line between the quest for excellence and the relentless pursuit of perfection, and offer strategies for educators, students, and parents to combat the harmful effects of extreme perfectionism.

Rice, Kenneth G.; Aldea, Mirela A. (2006) examined state dependency on depression, trait stability, and state-trait characteristics of perfectionism in a short-term longitudinal study of university students. Relative stability of perfectionism was assessed with test-retest correlations across 3 time points, and results showed higher rank order and relative stability for perfectionism scores compared with depression scores. Regression and path analyses to disentangle directions of effects revealed that initial maladaptive perfectionism scores remained robust predictors of later perfectionism scores, even after the authors controlled for prior and concurrent depression and other dimensions of perfectionism. Perfectionism proved to be quite stable and was a significant predictor of later depression. Perfectionism was also not meaningfully altered.
by state changes in depression. The overall findings indicate that perfectionism appears to have substantial relative stability, and perfectionist discrepancy in particular is a clear vulnerability factor for depression.

Dunn, Joshua C.; Whelton, William J.; Sharpe, Donald (2006) examined the roles of hassles, avoidant and problem-focused coping, and perceived social support as mediating the relationship between maladaptive perfectionism and psychological distress in a sample of university professors. Hassles and avoidant coping both partially mediated a strong association between maladaptive perfectionism and psychological distress. These results are discussed in terms of the need to better understand how coping styles and social support are associated with the negative impact of perfectionism on the lives of university professors. The implications of these findings for counseling practice are also explored.

Mobley, Michael; Slaney, Robert B.; Rice, Kenneth G. (2006). investigated the cross-cultural construct validity of perfectionism using the Almost Perfect Scale-Revised (APS-R; R. B. Slaney, M. Mobley, J. Trippi, J. S. Ashby, & D. G. Johnson, 1996) with 251 African American college students. A LISREL confirmatory factor analysis (CFA) offered support for the 3 subscales of the APS-R: High Standards, Order, and Discrepancy. Multi group CFA results for a sample of 314 White college students supported factorial equivalence across the 2 cultural groups. Correlations between the subscales of the APS-R and measures of self-esteem, self-reported grade point average (GPA), satisfaction with GPA, trait anxiety, and depression were consistent with the results of previous research. A cluster analysis was performed on the APS-R; the cluster results were similar to those found in previous studies.
Finally, the limitations of the present study and the implications for future research with African Americans are discussed.

Grzegorek, Jennifer L.; Slaney, Robert B.; Franze, Sarah; Rice, Kenneth G. (2006) Cluster analyses using the Almost Perfect Scale–Revised yielded 3 clusters that represented adaptive perfectionists, maladaptive perfectionists, and non perfectionists. Maladaptive perfectionist scores were strongly correlated with self-critical depression, but not dependent depression. Adaptive perfectionist scores were correlated with higher self-esteem and greater satisfaction with grade point average (GPA). It was hypothesized that satisfaction with GPA would moderate the relationship between cluster membership and GPA, and that participant gender would moderate the relationship between cluster membership and self-esteem. Neither hypothesis was supported. A comparison of the cluster groups from this sample with those in 2 previous samples indicated similar scores between clusters. Clinical implications and directions for future research are discussed.

Mezulis, Amy H.; Abramson, Lyn Y.; Hyde, Janet S.; Hankin, Benjamin L. (2006)suggested the presence of a self-serving attributional bias, with people making more internal, stable, and global attributions for positive events than for negative events. This study examined the magnitude, ubiquity, and adaptiveness of this bias. The authors conducted a meta-analysis of 266 studies, yielding 503 independent effect sizes. The average d was 0.96, indicating a large bias. The bias was present in nearly all samples. There were significant age differences, with children and older adults displaying the largest biases. Asian samples displayed significantly smaller biases (d = 0.30) than U.S. (d = 1.05) or Western (d = 0.70) samples. Psychopathology was
associated with a significantly attenuated bias (d = 0.48) compared with samples without psychopathology (d = 1.28) and community samples (d = 1.08). The bias was smallest for samples with depression (0.21), anxiety (0.46), and attention-deficit/hyperactivity disorder (0.55). Findings confirm that the self-serving attribution bias is pervasive in the general population but demonstrates significant variability across age, culture, and psychopathology.

(2) PERFECTIONISM EFFECTS ON MENTAL HEALTH:–

II-A: MALE SUBJECTS

Results indicated that the main effect of perfectionism was statistically significant t-value = 13.9, p <.01 for male Ss. It indicated that HP group was significantly different from LP group in their overall mental health scores.

Results indicated that the main effect of perfectionism on egocentrism dimension of mental health was statistically significant t-value = 9.54, p <.01 for male Ss. It indicated that HP group was significantly different from LP group in their egocentrism dimension of mental health scores.

Results indicated that the main effect of perfectionism on alienation dimension of mental health was statistically significant t-value = 11.03, p <.01 for male Ss. It indicated that HP group was significantly different from LP group in their alienation dimension of mental health scores.

Results indicated that the main effect of perfectionism on expression dimension of mental health was statistically significant t-value = 8.78, p <.01
for male Ss. It indicated that HP group was significantly different from LP group in their expression dimension of mental health scores.

Results indicated that the main effect of perfectionism on emotional instability dimension of mental health was statistically significant $t$-value = 9.18, $p < .01$ for male Ss. It indicated that HP group was significantly different from LP group in their emotional instability dimension of mental health scores.

Results indicated that the main effect of perfectionism on social non-conformity dimension of mental health was statistically significant $t$-value = 13.56, $p < .01$ for male Ss. It indicated that HP group was significantly different from LP group in their social non-conformity dimension of mental health scores.

(II-B) FEMALE SUBJECTS

Results indicated that the main effect of perfectionism on overall mental health was statistically significant $t$-value = 15.12, $p < .01$ for female Ss. It indicated that HP group was significantly different from LP group in their overall mental health scores.

Results indicated that the main effect of perfectionism on egocentrism dimension of mental health was statistically not significant $t$-value = 2.56 for female Ss.

Results indicated that the main effect of perfectionism on alienation dimension of mental health was statistically significant $t$-value = 5.98, $p < .01$
for female Ss. It indicated that HP group was significantly different from LP group in their alienation dimension of mental health scores.

Results indicated that the main effect of perfectionism on expression dimension of mental health was statistically significant t-value = 7.72, p < .01 for female Ss. It indicated that HP group was significantly different from LP group in their expression dimension of mental health scores.

Results indicated that the main effect of perfectionism on emotional-instability dimension of mental health was statistically significant t-value = 4.69, p < .05 for female Ss. It indicated that HP group was significantly different from LP group in their emotional-instability dimension of mental health scores.

Results indicated that the main effect of perfectionism on social non-conformity dimension of mental health was statistically significant t-value = 8.19, p < .01 for female Ss. It indicated that HP group was significantly different from LP group in their social non-conformity dimension of mental health scores.

(II-C) RURAL SUBJECTS

Results indicated that the main effect of perfectionism on overall mental health was statistically significant t-value = 8.19, p < .01 for rural Ss. It indicated that HP group was significantly different from LP group in their overall mental health scores.

Results indicated that the main effect of perfectionism on egocentrism dimension of mental health was statistically significant t-value = 3.66, p < .05
for rural Ss. It indicated that HP group was significantly different from LP group in their egocentrism dimension of mental health scores.

Results indicated that the main effect of perfectionism on alienation dimension of mental health was statistically significant $t$-value = 6.19, $p < .01$ for rural Ss. It indicated that HP group was significantly different from LP group in their alienation dimension of mental health scores.

Results indicated that the main effect of perfectionism on expression dimension of mental health was statistically significant $t$-value = 4.33, $p < .05$ for rural Ss. It indicated that HP group was significantly different from LP group in their expression dimension of mental health scores.

Results indicated that the main effect of perfectionism on emotional-instability dimension of mental health was statistically significant $t$-value = 7.92, $p < .01$ for rural Ss. It indicated that HP group was significantly different from LP group in their emotional-instability dimension of mental health scores.

Results indicated that the main effect of perfectionism on social non-conformity dimension of mental health was statistically significant $t$-value = 7.92, $p < .01$ for rural Ss. It indicated that HP group was significantly different from LP group in their social non-conformity dimension of mental health scores.
(II-D) URBAN SUBJECTS

Results indicated that the main effect of perfectionism on overall mental health was statistically significant t-value = 9.18, p < .01 for urban Ss. It indicated that HP group was significantly different from LP group in their overall mental health scores.

Results indicated that the main effect of perfectionism on egocentrism dimension of mental health was not statistically significant t-value = 2.32, for urban Ss. It indicated that HP group was not significantly different from LP group in their egocentrism dimension of mental health scores.

Results indicated that the main effect of perfectionism on alienation dimension of mental health was statistically significant t-value = 8.15, p < .01 for rural Ss. It indicated that HP group was significantly different from LP group in their alienation dimension of mental health scores.

Results indicated that the main effect of perfectionism on expression dimension of mental health was statistically significant t-value = 5.62, p < .01 for urban Ss. It indicated that HP group was significantly different from LP group in their expression dimension of mental health scores.

Results indicated that the main effect of perfectionism on emotional-instability dimension of mental health was statistically significant t-value = 5.26, p < .05 for urban Ss. It indicated that HP group was significantly
different from LP group in their emotional-instability dimension of mental health scores.

Results indicated that the main effect of perfectionism on social non-conformity dimension of mental health was statistically significant $t$-value = 6.12, $p < .05$ for urban Ss. It indicated that HP group was significantly different from LP group in their social non-conformity dimension of mental health scores.

Srivastava (1984) conducted a study which was intended to determine the relationship between alcoholism and mental health. 50 gamma alcoholics, 50 delta alcoholics and 50 non alcoholic teetotalers graduate males of Varanasi district participated in this study. Their age ranged from 30 to 45 years with a mean age of 38.62 years. Hindi version of MMHSI was administered to these Ss. Findings indicated poor mental health for alcoholics than the non-alcoholics.

In 1984, Thakur conducted a study of the mental health scores of a sample of industrial area (Bombay) and non-industrial area (Darbhanga). MMHSI was administered on these samples. It was found that industrialization no doubt, provided help in general economic development but, at the same time, it left bad effects on the mental health of people of the area.

Pandey (1984) conducted a study to explore differentiated personality correlates of mental health in Migraine patients. The sample consisted of 100 migraine patients and 100 normal graduate males of Varanasi district these groups were matched on the variables of age (range 17 to 38 years) and socioeconomic status. Hindi version of MMHSI was administered to these
groups. It was found that migraine patients had poor mental health than the normal:

Gupta, Jam and Kumar (1985) conducted a study to ascertain variations among mental health of urban and rural women. The sample consisted of 100 urban and 100 rural women matched on the variables of age (range 25 to 40 years), education and socio-economic status. Hindi version of MMHSI was administered to them. It was found that urban women scored significantly higher on MMHSI than the rural women which indicates poor mental health for urban women.

Kumar, Pathak and Thakur (1985) explored variations in mental health of individual, team and non athletes. The sample consisted of 50 individual athletes, 50 team athletes and 50 non-athletes' graduate males of different educational institutions of Varanasi district in India these groups were matched on age (range 18 to 30 years with a mean age of 24.86 year) and socioeconomic status. Only skilled competitive athletes were taken in this study as individual and team athletes. Hindi version of MMHSI was administered to them Analysis yielded significantly poorer mental health for non-athletes than the team athletes and individual athletes.
LOCUS OF CONTROL EFFECTS ON PERFECTIONISM

Results indicated that the main effect of locus of control on perfectionism scores was statistically significant t-value = 10.39, p < .01 for female Ss. It indicated that internals were significantly different from externals in their perfectionism scores.

Results indicated that the main effect of locus of control on perfectionism scores was statistically significant t-value = 11.25, p < .01 for male Ss. It indicated that internals were significantly different from externals in their perfectionism scores.

The self and the not self constitute the totality of an individual's experience. How one of these is perceived and experienced would have profound consequences for the way the other would be defined, both perceptually and experimentally. Abramson (1978) studied the relationship between internal and external attributions and self-esteem. She exposed a group of students to inescapable noise and induced in them a sense of personal helplessness by informing them that people usually learned to escape the noise. These subjects suffered both performance decrements and loss of self-esteem. Another group was informed that no one could learn to escape that noise. They were thus induced to make an external attribution for their helplessness and view it as universal helplessness. There was performance decrement under this condition but there was no loss of self-esteem.
How the noise (not-self) was perceived influenced how the self was evaluated. Therefore, de Charms' (1968) notion of personal causation of either perceiving oneself as being the origin (hence the agent) of action or as a pawn in the hands of external forces and being pushed around, and Rotter's (1966) concepts of internal and external control orientations are critical concepts for any theory of personality. Many European and American societies view internality, efficacy, and ego strength as positive values. Numerous western studies have demonstrated that internality was associated with a number of socially valued characteristics such as preferring skill-determined activities to chance-determined ones (Schneider, 1968), more effective learning and performance (Glass & Singer, 1972), and being less dependent on external cues for succeeding at a task (Taub & Dollinger, 1975). This is a vigorous area wherein thousands of studies have been reported giving rise to many issues and several new concepts.

The broad trends however are clear. A large number of western studies emphasized the value of internality. The bulk of Indian studies have followed suit. Rao and Murthy (1984) found that externally-oriented subjects compared to internals were low achievers, more anxious, morbid, neurotic, and low on need for achievement. Saraswati and Thomas (1984) noted that neurotic subjects were high on externality and alienation and had low self-esteem. Externality and religiosity were positively related and females were more external than males which explained their greater religiosity (Helode & Barlinge, 1984). Those who did not manifest a clearly differentiated sex role orientation were more external. Men reported greater control over their lives (Bhogle & Murthy, 1988). A.K. Singh (1987) observed that internals were more
dogmatic. Internal students regardless of gender were high academic achievers (E Sharma, 1986).

Subjects high on externality were less involved in predicting and planning their futures (Achamamba, 1987). Those who had a greater need for approval were more external (N.K.M. Tripathi, 1980). A comparison of couples revealed that wives were more external, and they were described as lacking in self-confidence. Shejwal and Palsane (1986) studied the relationship between life events stress and locus of control. The high stress group was more internal. According to the authors, this was probably due to the internals perceiving a threat to the very control which they valued. The externals scored lower on stress as they accepted the environment without any struggle. These findings were interpreted in terms of the beliefs prevalent in the Indian culture—belief in God, karma, and predetermination.

Faroqi (1984) examined "a common stereotype of the Indian society as encouraging belief in pre determination and attitude of resignation and passive acceptance of what is seen to be preordained" (p. 101). He estimated the median of the mean scores of American samples on Rotter's 1-E Scale on the basis of 8 studies reported between 1963 and 1972. In a similar manner he determined the median score of Indian samples on the basis of 11 studies reported between 1974 and 1984. He took into account questions "concerning comparability of the instruments and samples and concluded that this present analysis fails to support the proposition that Indian college students are more external than corresponding groups of American students" (p. 105).

Faroqi's study raised the question "Are Indians external?". This is an important question, but a number of other questions also need to be asked. A
basic question concerns the very meaning of "external" and "internal". At a concrete level, skin is the dividing line between the self and the not-self; the internal and the external. But that is valid only for a mind that is still at a basic level. Even a school child is aware of the constant interchange of substances between the organism and the environment. A loaf on the table is external, an instant after ingestion it is internal. As the mind ascends the ladder of complexity and sophistication, the dividing line between the internal and the external becomes progressively blurred. At the highest level of evolution of human consciousness, that is, the Trans cognitive state of spiritual realization, the distinction is altogether lost. The universal brotherhood of all beings which saints of all climes and creeds preach, is the spontaneous expression of the punitive experience which they attain, after transcending the cramping limitations of the ego's boundaries.

In view of this tremendous range of human variation, is it scientifically valid to use Rotter's scale for one and all, for those at the beginning, the middle and at the end of this dimension? Should not an effort be made to devise different kinds of instruments for people occupying varying positions on the spectrum?

It is true that this question is valid for all psychological instruments. This issue is raised here as this is an appropriate occasion as perceptions of internal and external are particularly sensitive to the level of evolution of consciousness. One possibility is to assess the clarity and definiteness with which an individual makes judgments about what is internal and external, say, a measure of perception of convergence of the internal-external dichotomy.
That variable may lead to the formulation of a new theoretical model and search for correlates.

As far as Indian research is concerned, A.K. Singh and Dhawan (1984) found that only under easy task condition internals were more persistent. These findings were explained in terms of the relevance of situational cognitions as mediators of personality and achievement behaviour. Zainuddin and Taluja (1990) observed that boys from low and middle economic classes were more external than those from high income families. Externally-oriented students of both sexes were more aggressive. Rahman and Kumar (1984) reported that absenteeism among blue collar workers was unrelated to locus of control. Gaur and Upadhyay (1988) exposed internal and external subjects to experimentally induced conditions of no-stress, mild and moderate stress. Performance of both groups on a selective attention task improved up to moderate stress and then it declined. The decline in the performance of externals under severe stress was significant. These results were interpreted in terms of Yerkes-Dodson Law.

Jahan (1989) measured the locus of control orientations of women students who either opted or did not opt for the skill training programme offered by the Career Planning Centre, Women's College, Aligarh Muslim University. Students who opted for the programme were more internal but this pattern was not observed in the case of adults.

This review would be failing in its task if it does not place on record appreciation of the excellent work done by the Career Planning Centre, which is the result of the vision and dedication of a psychologist, Dr Sultan Akhtar of Aligarh Muslim University. He succeeded in forging his psychological expertise
into an effective instrument of social service. More such workers are needed if the credibility of psychology as a useful discipline is to be established in the eyes of the Indian public. Jahan's work emanates from the activities of the Centre.

As in the case of self-concept, loci of control studies have focused on special groups. Schizophrenics and manics were more external compared to normals (Varkey & Sathyavathi, 1984), badminton players compared to non players were more internal (Kumar & Shukla, 1988). A.K. Sinha, Singh, and Shukla (1986) conducted a factor analytic study to investigate the structure of locus of control among junior and middle managers. They identified 8 factors, a theme common to many of these factors was the importance of significant others in determining the outcome. In another study sons and daughters of employed mothers were found to be more external (Rao, Parwathi, & Swaminathan, 1983).

Verma and Dubey (1982) obtained a moderate but significant correlation between PGI Locus of Control Scale and the Hindi adaptation of Health Locus of Control Scale. Another study on methodology (Begum & Shams, 1981) provided evidence for experimenter expectancy effect in all combinations of experimenter and subject control orientations.

Almost all the studies reported here, barring a few experimental investigations, are correlation studies. This is so not on account of any particular scientific merit of this method but due to the ease with which it lends itself to use. Rotter's (1966) scale or some variant of it, such as a version translated into the language of the region of the study, has been frequently used.
Rotter (1966) for his part defined locus of control as a generalized expectancy of perceived internal or external control or the degree to which an individual perceives events as being contingent upon his or her own behavior or own relatively permanent characteristics, which are assumed to be more or less stable under varying conditions. Individuals who believe that they can influence outcomes though their own abilities, efforts, skills and characteristics are designated as of internal orientation (internals). Those who perceive that outcomes are contingent upon external forces such as luck, chance, fate and powerful others or are of the belief that events are unpredictable because of the many complexities in the environment are designated as of external orientation (externals). People are then classified along a spectrum of very internal to very external. It is important to note that locus of control is not about a specific reinforcement, but instead is a problem-solving (i.e. cognitive process), generalized expectancy that addresses the issue of whether behaviors are perceived to be directly related to the attainment of needs, no matter what the goal or reinforcement. It should also be noted that in some particular situations or environments, individuals of an external orientation can (and do) exhibit internal behavior; this occurs because they have learned from earlier situations that they have control of the reinforcement.

Locus of control and working life

This section discusses locus of control and its relationship with working life behavior, with the aim of resenting a broader view of the many areas of working life to which the construct can be applied, thus underlining its potential as a variable of considerable interest.
In investigating the many facets of locus of control in working life, it is argued that the assumption that an individual's locus of control can be altered is of particular importance for the use of the concept. This assumption is empirically supported by a number of studies (see e.g. Phares, 1976; Partridge & Johnston, 1989; Hansemark 1998), thus allowing empirical research not only to enquire into possible individual differences that may be found, but even to develop methods and models that are capable of enhancing workers' abilities, or indeed the ability of persons seeking to enter or re-enter the labour market to deal successfully with obstacles encountered in working life, as well as designing work environments, work tasks, and organizational learning.

Job Satisfaction

A widely used definition of job satisfaction is that presented by Lock (1976), which is conceptualized as an employee's affective response to different facets of the job or organization, implying a personal evaluation of one's job. Another way of putting this is to say that employees experience job satisfaction if they perceive that their abilities, competence, and values are put to use in the organization and if they receive both rewards and further opportunities from the organization, based on their perceived abilities and performance. From the theory of locus of control, a logical hypothesis would be that those of internal orientation are more inclined then those of external orientation to a higher level of job satisfaction. For example, an employee with a low belief in his/her own efforts and skills having any influence upon outcomes would be unlikely to be always willing to engage with much enthusiasm and dedication in achieving goals at the workplace; while the
contrary is to be expected of persons who believe that outcomes are contingent upon their own efforts and skills.

This assumption is supported by Lefcourt's (1982) statement that one can probably see locus of control as more of a diagnostic indicator of a person's likelihood to seek to accomplish their goals in life. This should to lead to internals being more active than externals in seeking ways of creating situations where their actions will be rewarded, and if not, they may be expected to pursue other forms of action. Spector (1982) suggests, for example, that internals will then leave a dissatisfying job. Further suggestions by Spector (1982) that support why internals more than externals should have a higher level of job satisfaction are that internals can be expected to perform better than externals and therefore to receive the benefits of a better performance, such as faster promotion and better pay, thereby increasing their job satisfaction. The hypothesis put forward here is supported by the research findings presented below.

Rothmann (2000), in a cross-sectional study using 624 employees from 7 different organizations in South Africa, found that job satisfaction was related to an internal locus of control orientation and a sense of coherence, which in turn was found to be related to internal control. Muhonen and Torkelson (2004), using a sample of 281 in a Swedish telecom company, reported that externals were less satisfied with their jobs then internals. Spector (1986), in a meta-analysis using 101 samples from 88 studies, found that a high perception of control was related to job satisfaction. Other studies that support this result are Petersen (1985), Garson & Stanwyck (1997), and Newton &Keenan (1990). One can even assume that the level of job satisfaction will
influence other areas of working life behaviour. One example of this is in the area of organisation commitment, where a relationship between commitment and locus of control has been found to exist (Luthans et al., 1987; Spector, 1982). Another area of organizational behavior that locus of control has been reported to influence is organizational frustration (Storms & Spector, 1987). Logically, one would expect that both commitment and frustration should have an impact on employees' job satisfaction. The conclusions drawn from the evidence is that locus of control influences employee perceptions of job satisfaction in organizations.

Many researchers argue that job performance can and should be judged from the point of view of the role employees see themselves as having. These roles are seen as being either of a compliant nature or of an initiatory nature, whereof the terms compliant performance and initiative performance. These two roles are the point of departure for the discussion below. There is quite a lot of empirical evidence that connects cognitive ability with job performance (Hunter & Hunter, 1984; Ree et al., 1994). The proposal here is that locus of control can be expected to play an important role in work performance. Some empirical evidence would seem to support this assumption. Lefcourt (1982) notes that externals seem to have a greater need for task structure before and during the performance of tasks; that they do not readily question the need or reason for carrying out tasks, and that as a result they may not take part in the performance of tasks with enthusiasm until they receive information on the benefits of their task. They are generally therefore more dogmatic in carrying out tasks, that is to say, give a more compliant performance. They also tend to show less interest in the entrepreneurial skills
that might enable them to take greater control of situations or to produce new structures or organizations that might enable them to gain better results from their efforts (Lefcourt 1982). Internals, on the other hand, tend to show much more curiosity in the reasons for task performance and to spend more time seeking information about the various tasks they are required to perform. Here one can indeed speak about initiative performance (Lefcourt, 1982), for having acquired information, internals are inclined to use that information in a more advantageous way than externals (Lefcourt, 1982). Internals also tend to have greater interest in entrepreneurial skills; and seem to be quicker and more willing in the extraction of cues from information and the different situations that they find themselves in, which makes it possible for them to produce new structures or organizations that might enable them to gain better results from their efforts. They even tend to show greater variability and are more deliberate and confident when making decisions than externals. Research shows that internals are more verbally fluent than externals and use verbal abilities to greater advantage. The general conclusion that can be drawn from the research into locus of control and cognitive ability is that there is a clear tendency for internals to show a higher level of alertness in many cognitive activities than externals. They also seem more willing to search for and find information that they interpret as helpful for controlling and coping with different situations and in the performance of tasks (Phares, 1976; Lefcourt et al., 1984; Skinner, 1995, Erbin- Roesemann & Simms 1997). The proposed relationship between locus of control and job performance has received empirical support; for example in the results found by Broedling (1975), and Hyatt & Prawitt (2001). Spector (1982, 1986), after reviewing research
pertaining to job performance and its relation to locus of control, concludes that there is scientific evidence that internals tend to produce a better job performance than externals. Blau (1993), using a sample of 146 bank employees, found support for the proposal that an internal locus of control is related to higher initiative performance and that externals exhibited a more compliant performance. An important dimension of job performance is motivation, or as Skinner (1995) puts it, motivated action, which is defined as "intentional goal-directed behaviour" and consists of three components, behaviour, orientation, and emotion. Skinner argues that perceived control influences both motivation and volition. Spector (1982, 1986) supports this proposed relationship of locus control—motivation—job performance in organizational settings, arguing that persons of internal orientation will show more job motivation, since they are more task and goal oriented. Other empirical support can be found in studies looking into the relationship between locus of control and achievement motivation (Rotter, 1966; Lefcourt & Ladwig, 1965). In conclusion, the arguments and research finds presented here support the existence of a relationship between locus of control and job performance. Similar to the research carried out into locus of control and job satisfaction, the instruments used for investigating locus of control—job performance are both domain-specific and general; populations used are of both western and non-western origin, and all races are represented.

Many of the studies that have investigated the locus of control construct have applied the measurement scale developed by Rotter (1966). However, in the last two decades a number of new tools of measurement have been developed with an emphasis on criterion-specific scales, thereby increasing
the measurement's validity (Lefcourt, 1984). The development of these new scales is in line with the advice given by Lefcourt and even by Rotter (1975). Today there are quite a number of scales that are either sphere-specific or multidimensional. There are, however, still a number of important questions being asked about the measurement of locus of control. Coombs & Schroeder (1988) concluded that the assumption that locus of control has strong generalized expectancy properties does not hold up when analyzing data with the use of factor analysis. They even suggest that more goal-specific scales should be used, if the locus of control is to have any great value in predicting the individual's expectancies. Rotter (1990) addressed this critique in his paper "Internal Versus External Control of Reinforcement", where he clearly points out that the construct is heuristic, an important aspect when discussing the validity of the measurement. In replying to the criticism, he presented four propositions, of which three will be taken up here, as the forth is in many respects merely an extension of the arguments in the second proposition. The first of Rotter's propositions is the importance of having a "precise definition", essential for a heuristic construct. This definition needs to be carefully worded in formulations that are precise and lead to mutual understanding. These statements should also include criteria that are both logical and generally accepted (Rotter, 1990). The second proposition emphasizes the importance of having the construct embedded in a strong and extensive theory of behaviour. In the case of the locus of control construct the theory of human learning is its principal influence. It is from this proposition that Rotter offers explanatory arguments in his discussion of generalized expectancies. He counters by stating the following: "The theory does not specify independent
traits, faculties, or types, but numerous psychologists have taken a 23-item test, subjected it to an orthogonal factor analysis, and concluded mistakenly that the concept had no generality because some specificity could be demonstrated. Generality-specificity is a matter of degree, not kind." This statement emphasizes the fact that the learning theory principle is comprised of both generalization and gradient generalization. The third proposition put forward by Rotter states that "measurement principles should be derived from psychological theory." In particular it is argued that the surety of achieving acceptable predictive value from a scale increases "if the principles of measurement are derived from the same theory as the constructs to be measured" Leone and Burns (2000) take on two other controversies concerning the measurement of locus of control. They point to the general content validity of the measurements; and also to whether or not sphere-specific scales are more reliable than multidimensional scales in predicting behaviour. To investigate these problems they carried out a study using three different measurements of locus of control, as well as applying nine scales to assess perceived behaviour-outcome contingency, interpersonal power, and self-efficacy. Their results showed construct validity problems with the three measurements and that it is possible that locus of control is confounded with interpersonal power or self-efficacy or both. At the same time, Lebone and Burns caution that their results might benefit from more inquiry, both psychometric and theoretical, that may give better explanations and identification to the assumed relations between locus of control and other psychological phenomena. The argument that locus of control may be confounded with other constructs is rebutted by Lefcourt (1991), who points
out that perception of control, personal causation, personal competence, helplessness, causal attributions, and efficacy are seen as cognates of locus of control, thus strong relations should be found between these constructs. Concerning whether sphere-specific scales are more reliable than multidimensional scales in predicting behaviour, it would seem that this question is still the subject of debate among many researchers (Furnham & Steele 1993). However, both Rotter (1975) and Lefcourt (1991) have suggested that it cannot be rejected that sphere specific scales would enhance the prediction of behaviour; an assessment that this author is in agreement with, despite the fact that the scale used in this work is not sphere-specific. This gives rise to the question of whether the relations found in the work presented here between locus of control and the various dependent variables would have appeared stronger if a sphere-specific scale had been used. Further research concerning this matter is necessary to give answers of this question.
CONCLUSIONS:-

The results of the study strongly implicate the following:

- A very clear-cut perfectionism effects on locus of control were obtained in the present research. In this context main effects of Perfectionism were found among male & female Ss, rural & urban subjects.

- A very Clear-cut perfectionism effects for overall mental health and their dimensions (Alienation, expression,) were obtained in the present research. These results were found for male & female Ss, rural and urban subjects.

- A very clear-cut locus of control (internals/externals) effects on perfectionism scores were found for male and female Ss.

It may therefore conclude that mental health decidedly more complex than generally interpreted by macro level analysis of political, economic and social data. In this concern, perfectionism and locus of control played very vital role in way of understanding mental health of Subjects.
LIMITATIONS OF THE STUDY:

The results of the present study perhaps are simply suggestive of the need for several further studies. The present study clearly shows that individual attitudes about their life are also embedded in the social context of the study. While it is not denied that wider political and economic imperatives are intimately linked up with the problem of mental health, perfectionism and locus of control. The need for further studies which use both macro: socio-political and economic indicators and also individual behavior variables can scarcely be overemphasized.