АКТУАЛЬНІ ПРОБЛЕМИ ПРАКТИЧНОЇ ПСИХОЛОГІЇ

Збірник наукових праць

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ДЕРЖАВНИЙ УНІВЕРСИТЕТ МОЛДОВИ
УНІВЕРСИТЕТ ІМЕНІ КОМІСІЇ НАРОДНОЇ ОСВІТИ В КРАКОВІ
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АКТУАЛЬНІ ПРОБЛЕМИ ПРАКТИЧНОЇ ПСИХОЛОГІЇ

Збірник наукових праць

Міжнародної науково-практичної інтернет-конференції

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Отримані дані можуть бути використані для розробки психологічних програм, спрямованих на підтримку самоактуалізації та розвитку резильєнтності у молоді, що сприятиме їхньому психологічному благополуччю та успішній адаптації до дорослого життя.

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PECULIARITIES OF PERFECTIONISM AND TENDENCIES TOWARD SELF-HARM

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The empirical study of the relationship between perfectionism and self-destructive behavior was conducted in three stages:

- 1. **Preparatory stage**, which involved preparing for the study: selecting and adapting psychodiagnostic tools, translating and approving one of the methods, and developing an author's questionnaire to collect information from participants.
- 2. **Main stage**, which included creating an online survey using Google Forms and distributing it via the Internet.
- 3. **Final stage**, which consisted of mathematical and statistical processing of the collected data and their further interpretation.

Considering the situation in the country, the study was conducted remotely. A Google Forms questionnaire was created and distributed via social networks. The survey included several key elements: an address to participants stating the research objective and instructions for completing the form; a consent form to participate in the study with an option to decline; a questionnaire to collect social and demographic data of respondents; and psychodiagnostic tools allowing the assessment of the level and type of perfectionism, as well as the frequency, intensity, duration, and functional aspects of self-harming behavior.

Before the study began, all participants were introduced to the informed consent form [4]. Respondents agreed to participate in the study and were informed of their right to discontinue participation at any time. The introductory section stated that all information provided would be kept confidential, with details on data storage and publication conditions.

Below is the distribution of study participants by levels of perfectionism. According to the results:

- 77 respondents (55.5%) demonstrated a high level of perfectionism, indicating high performance standards and a drive to achieve the best outcomes.
- 36 respondents (25.5%) showed a medium level of perfectionism. This group had moderate expectations regarding achievements and showed some flexibility in defining quality standards.
- 25 respondents (18.4%) had a low level of perfectionism, suggesting lower self-demands and greater flexibility in goal achievement (see Fig. 1).

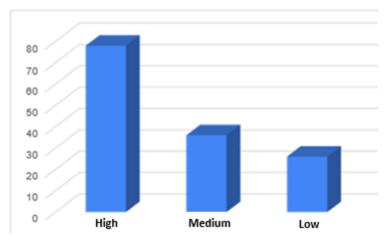


Fig. 1. Classification of respondents by degree of perfectionism.

According to the results, 44 respondents (31%) reported self-destructive behavior. This indicates a significant portion of individuals prone to self-destruction, which may be associated with various psychological factors (see Fig. 2).

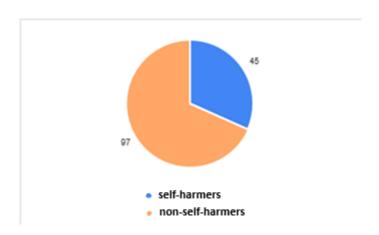


Fig. 2. Classification of respondents based on manifestations of self-destructive behavior.

The study showed that self-harming behavior varied in duration among respondents:

- 9 respondents (6.40%) had engaged in self-harm less than a year ago;
- 4 participants (2.84%) indicated such behavior occurred 1–2 years ago;
- 8 respondents (5.69%) 2–3 years ago;
- 6 individuals (3%) 3–5 years ago;
- The largest group, 18 respondents (18.70%), reported experiences of self-harm more than five years ago.

This indicates that self-harming behavior can be both short-term and chronic, with long-term psychological consequences for those affected (see Fig. 3).

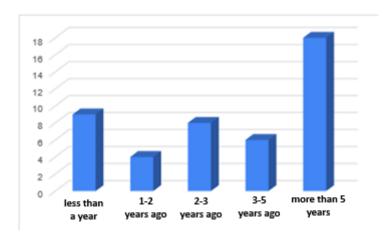


Fig. 3. Distribution of participants by timing of most recent self-harming behavior.

During the research, several challenges arose that are worth noting. One major issue was the inability to provide verbal instructions to participants on how to complete the methods. This was especially important as the research was conducted online, making verbal communication impossible [3].

There were also difficulties providing additional explanations or answering questions from participants during the survey process. This limitation may have affected the accuracy of instructions' interpretation and the precision of responses, potentially influencing data quality.

To gather data within the empirical study of perfectionism and self-harming behavior, survey and psychodiagnostic methods were used. Participants were given various psychodiagnostic tools, listed below [5].

The questionnaire for assessing perfectionism, developed in 1996, was based on statements from patients with emotional disorders in outpatient treatment [1]. The instrument was later refined and underwent reliability and validity testing, confirming its effectiveness in diagnosing perfectionistic traits.

This method is designed to assess the overall level of perfectionism and the intensity of its individual components:

- Polarized thinking a tendency for dichotomous perception of outcomes,
 where planning and evaluation occur on an "all or nothing" basis.
- Focusing on own mistakes and failures a tendency to selectively pay attention to negative results, leading to self-criticism and lowered self-esteem.
- Aspiration for high performance standards, success orientation a tendency to set ambitious goals and look up to the most successful people as role models.
- Excessive self-demands the urge to set challenging tasks and ambitious plans that may exceed actual capabilities.
- Perceived social pressure and expectations the belief that others have overly high expectations, prompting constant comparison and internal stress.

Perfectionism level is measured on a scale from 0 to 4, where 0 means complete disagreement, and 4 means complete agreement. Evaluation criteria include:

- Dependence on others' opinions
- Tendency to self-blame

- Polarized "all or nothing" thinking
- Focus on one's own mistakes and failures
- Orientation toward high performance standards
- Excessive demands on oneself
- Sense of social pressure and expectations

In our study, an adapted Ukrainian-language version of the method was used. It had been modified to better suit linguistic and cultural context, achieving an overall reliability level (Cronbach's alpha) of 0.75.

Internal consistency analysis of individual scales confirmed their psychometric stability:

- Polarized thinking $-\alpha = 0.75$
- Excessive self-demands $\alpha = 0.74$
- Dependence on others' evaluation $\alpha = 0.73$
- Orientation toward high performance standards $\alpha = 0.73$
- Focusing on own mistakes and failures $\alpha = 0.72$
- Perceived social pressure and expectations $-\alpha = 0.68$
- Tendency to self-blame $\alpha = 0.67$

The results confirm that the adapted method is a reliable tool for studying the level of perfectionism and its components and can be used in psychological research to assess personal manifestations of perfectionistic tendencies [2].

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METHODS OF PSYCHOLOGICAL ASSESSMENT AND DIAGNOSIS OF EMOTIONAL STATE

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The participant selection process was carried out in stages, using clearly defined inclusion and exclusion criteria.

Participant recruitment. During the specified period, volunteers were recruited to participate in a training program based on the BASIC Ph model. Targeted informational mailings aimed at representatives of the educational sector in one of the metropolitan areas were used to attract respondents. At this stage, all interested