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Maladaptive perfectionism and its implication in medical school selection: A personal view

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From exams based on short answer questions and multiple-choice questions with a definite answer keys, to project-based, independent, and problem-oriented studies offered in university, the rapid dive transitioning from pedagogical learning into the world of andragogy within the university, truly is one of the highlights of a scholar's long journey. A 6 year-long habit of having information spoon-fed into our mind, meticulously studying every Cambridge GCE A-Levels past marking scheme and question papers available on the internet had led me to believe that there always had to be the correct, if not perfect, way of finishing an assignment.

Feeling assured and confident on how to approach my study in medicine, it was a surprise to discover that the medical school landscape was far different than what I was used to. Yet being able to define "perfect" in medical school assignments, I found myself approaching every essay as if it was a work of art. Hours, days would be spent writing, reading, and re-writing a single essay assignment. I laboured through every paragraph, often spending more than 30 minutes to finish a paragraph. I regularly consulted a thesaurus, ensuring no word had been repeated within a paragraph, always searching for the perfect word to convey my thoughts. Opinions of others were sought multiple times: Should I mention this? Should I use this word?

The brand-new learning method through problem-based discussions were exciting, yet no less frustrating at times. In completing our assignments for each discussion session, it is likely that we would encounter numerous journals that, more often than not, are contradictory to each other. Significant time would be spent creating a comprehensive literature review, crafting an interactive and thorough presentation, yet at the end of the week, more often than not I doubt that I would be able to answer the simple question of, "what would be the most appropriate treatment for the patient within the trigger case?"

Over time, I would come to the realisation that such habits and behaviour would not be sustainable in the long run, as I continue to ponder to find the "right way" to study in medical school. By the time that this article was written, 24 months had passed, and although I had an overall satisfactory GPA, each discussion sessions, essay assignment remained invariably the same: challenging as ever. Reflecting back on my prior habit in learning, it is most likely clear to imply that my actions were a result of some degree of perfectionism. The new medical education landscape has caused a turbulence in these habits but as of now, it is still something I am pushing to adapt to by using that drive as something good. But this perfectionist manner of thinking is known to affect more medical students than ever reported, and the

perfectionism comes in various degrees in an unpredictable pattern. It might be argued that perfectionism is not necessarily a good trait to have in the study of medicine, but entertaining this idea is not as easy as black and white.

Perfectionism could be simply described as high personal standards with very specific and non-flexible goals to meet. The reactions to these high standards are explained in two different concepts: adaptive and maladaptive perfectionism. The difference between both concepts lies on a thin line, where adaptive perfectionism refers to the standard one puts on his or her performance as a driving force to reach a certain goal. This type of perfectionism, although highly pushing of themselves, still sets realistic standards and is only related to their strivings. Most importantly, the failure of achieving certain goals does not result in self-deprecation. On the other hand, maladaptive perfectionism refers to the same concept of having high standards, but often intensely self-critical over small failures, constantly concerned about creating mistakes, and undermining their success attributing to their low self-esteem. It is simply the overwhelming concern of wanting to do the best, creating a barrier in enjoying a happy life and compromises their state of mind. This type of perfectionism is the most often associated with mental disorders such as anxiety or depression, which sadly, is commonly found among medical students (Seeliger & Harendza, 2017).

Among practicing physicians, the concept of perfectionism often lies in a grey area. In their daily practice, having high standards for their care without having unrealistic expectations is sometimes difficult to do, since responsibilities of physicians are put on the highest pedestals to begin with. As mentioned earlier, adaptive perfectionism presents itself as something good, simply an ambition to always do better without fear of failure. The learning process in medical school is shaped in such a way as an effort to promote this type of perfectionism. As mentioned in a review on medical education by Mylopoulos et al. (2018), most of its studies consist of direct assessments of student's abilities in recalling factual information. These performance-focused assessments support perfectionism in the lives of students, since their performance is clearly measured by numbers, which for a perfectionist is a perfect judgment of their standards. The review continues by emphasizing on what should be the important components of medical education, including understanding rather than remembering, allowing for challenges and failure to occur as a lesson learned experience, and supporting the variation in individual approaches that come with the

aforementioned challenges & failure (Mylopoulos et al., 2018).

So, where do perfectionism stand in these ideal medical education standards in students? Medical education is slowly but steadily pushing towards allowing medical students to dive deep first-hand into their studies and approach it individually, letting mistakes and personal insights influence their clinical judgement before giving the appropriate feedback to put them back on the right track had they stray too far. This type of learning creates opportunities for students to create errors, those of which are hoped to be able to be transformed into valuable learning opportunities. For those with adaptive perfectionism, it could be assumed that they simply adapt to the situation and strive to do well in this new environment as their goals are to strive for good quality outcomes. This assumption is easy to make since adaptive perfectionism rarely associates with the concern of messing-up. However, those with maladaptive perfectionism would most likely succumb under the pressure of starting a learning experience on their own and not having standards to do it perfectly. This is because their actions are fully based on their concerns and feelings, allowing the trait of. Maladaptive perfectionism to become a mediator for mental health disorders as well as an overall decline in quality of life. (Rutter-Eley et al., 2020) The feeling of not knowing what to expect is often the significant cause of anxiety in students with maladaptive perfectionism, and it could lead to further mental instabilities if their performances turn out to not be up to their standards (Bußenius & Harendza, 2019).

From these, there is an implication that if medical education continues to push forward the realization of a new, significantly independent approach in teaching and learning, those with maladaptive perfectionism would simply not survive. This argument could support another issue relating to medical school admission, where several studies had recommended means and the possible benefits in establishing maladaptive perfectionism as a trait to be selected out during medical school selection process (Gärtner et al., 2020; Seeliger & Harendza, 2017). Unfortunately, adaptive and maladaptive perfectionism sometimes live alongside one another, causing a combined effect that is somewhat unpredictable. Because of this, the authors believe that perfectionism could not be ruled out as a negative trait since mental concerns may come and go along the way, where one could use their perfectionism as a driving force one day and use it against them in an episode of low self-esteem another day. Marking it as an elimination characteristic in medical education would not be fair for those with a more stable perfectionism,

since we will never know for sure which perfectionist is overly driven, or overly concerned.

It is true that maladaptive perfectionism could pose serious challenges in the learning process of a medical student. This is why traits like these, along with other personality traits that disrupt a good learning environment for an individual, calls for adequate support from the medical school. The trait of maladaptive perfectionism runs rampant among medical students, and it could be tackled by reassurance from their community, teachers, and friends, as well as creating a learning environment that limits the existence of fear-based achievements. (Mylopoulos et al., 2018) The thin line between maladaptive and adaptive perfectionism makes it possible to shape those with the more negative trait into a more positive trait. All in all, we believe that perfectionism is not a trait to shun from medical education, but it is one which medical schools should be able to recognise and provide adequate support in order to nourish the said maladaptive perfectionism, into an adaptive perfectionism in order to nurture physician who would be able to consistently set the bar high, without compromising their own well-being.

Notes on Contributors

Both authors are third year medical students from the Faculty of Medicine, Universitas Indonesia, who is currently undergoing a research internship at Medical Education Center, Indonesia Medical Education & Research Institute (IMERI), Faculty of Medicine, Universitas Indonesia.

Garry Soloan designed and led the study, contributed to argument development, conceptual development, and develop & finalise the manuscript. Muhammad Athallah Arsyaf contributed to argument development, conceptual development, and manuscript development.

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Declaration of Interest

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