

Perfectionism and well-being among student athletes: The mediating role of athletic coping

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ABSTRACT

This study aims at investigating the mediating effect of coping between perfectionism and well-being. In other words, it has been assumed that with the increase in the level of perfectionism, the increase will make it difficult to cope and consequently decrease the mental well-being of individuals, the study examined athletic coping mediated the perfectionism–wellbeing relationship among student athletes. According to recent research that athletic coping may mediate the relationship between perfectionism and well-being. Participants were 292 sports students obtained with the convenient sampling method comprising 119 females and 173 males. Ages ranged from 18-35 years ($M = 21.71$, $SD = 2.15$). Self-report data were collected including psychometric measures assessing multidimensional perfectionism, mental wellbeing and athletic coping skills. The results showed that there was a significant positive correlation between mental well-being and coping skills of sportspeople. There were negative significant correlations observed between mental well-being with other-oriented, socially-prescribed and self-oriented perfectionism. The results of this study suggest that athletic coping skills had a partial mediating role between other-oriented perfectionism and the mental well-being of sportspeople.

Keywords: Perfectionism, mental well-being, athletic coping, sport.

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INTRODUCTION

Though there are many defining features of perfectionism in the psychology literature, in a general sense, theoreticians agree that 'determination of high-performance standards' is the main feature of the perfectionism construct (Frost et al., 1990; Hewitt and Flett, 1991a). According to Freud (1959), perfectionism is an exaggerated product of the superego determining excessively strict rules to achieve a high degree of success (Taşdemir, 2003). Perfectionism is defined as striving for flawlessness and is a multidimensional personality tendency with both positive and negative aspects characterized by a person excessively criticizing their behavior and determining high performance standards (Frost et al., 1990; Flett and Hewitt, 2002; Stoeber, 2018). Contrary to previous negative and unidimensional definitions of perfectionism, perfectionism began to be discussed as being both negative and positive in the 1970s (Hamachek, 1978). Perfectionism is a multidimensional trait (Benson, 2003). Perfectionism is

noted for being a factor affecting interpersonal relationships and not just a self-focused assessment process -of one's own essence- by the individual. Perfectionist people may have high standards for themselves but it is emphasized they may also have high expectations and standards for other people or may perceive high expectations from those around them (Hewitt and Flett, 1991b). Many individuals identifying themselves as a perfectionist state there is a load on them due to stressful situations linked to being excessively critical and determining high performance (Greenspon, 2000).

Both positive and negative forms of perfectionism have effective roles for sportspeople. Perfectionist sportspeople choose very high, unrealistic targets requiring effort and add to their own internal load (Anshel, 2003). While sportspeople achieving elite level on a global scale may deal with perfectionism traits in a positive sense; they state that they display high

performance due to these traits and that dealing with perfectionism assisted their sporting development (Hardy et al., 1996). When research in the sports area is examined, there are a variety of studies associating perfectionism with different topics such as success and failure (Stoeber, Becker, 2008), performance anxiety (Nordin-Bates et al., 2011), anger at observed errors (Vallance et al., 2006), burnout symptoms (Hill and Curran, 2015), anxiety experienced before competition (Martinent and Ferrand, 2007), self-sabotage (Hobden and Pliner, 1995), learned helplessness (Flett et al., 1998), difficulty in interpersonal relationships (Hill et al., 1997), individual performance (Stoeber et al., 2009) and team performance (Hill et al., 2014). In this context, though the perfectionist construct is stated to be a central feature to achieve high performance level (Gould et al., 2002), on the other hand it is stated to be a negative feature causing low performance (Zinsser et al., 1998; Flett and Hewitt, 2005; Hall, 2006).

Coping with difficulty is accepted as a contextual intermediary between the person and their surroundings. Much research is encountered related to psychology, physiology and behavior connected to stress perceived by a person and their ability to cope (Lazarus, 1993). Additionally, the ability to cope with difficulties is accepted as being a marker of capability in terms of the person's mental state, motivation and effort made to achieve their determined targets (Duda et al., 1995). In other words, coping is defined as the cognitive and behavioral actions an individual uses to respond to internal and external demands which exceed their limits and cause difficulty (Lazarus and Folkman, 1984). A sportsperson's form of coping with difficulties will probably affect personal and social outcomes (Lazarus, 2000a). An adjustment framework, coping is not only a response to problems and negative feelings, but is also accepted to include planned and proactive cognition and behavior to ease positive psychological and emotional development (Tamminen et al., 2014). Additionally, coping processes mediate the relationship between perfectionism and emotional adjustment (Dunkley et al., 2003). It is stated to be associated with perfectionism and anxiety experienced by sportspeople before competitions (Martinent and Ferrand, 2007). Sportspeople with low coping levels are emphasized to experience more anxiety (Barrell and Terry, 2003). Sportspeople's ability to cope with stressful situations they experience before an important competition or race and make great efforts is important for them to meet their expected high performance. In this context, as stated in research, perfectionism may be counted as a probable precursor of active coping (Gaudreau and Antl, 2008; Appleton et al., 2010). Moreover, active coping ability displayed in difficult situations may be linked to the person having perfectionist requirements (Flett et al., 1991b). Coping may have many positive and negative outcomes like increasing or reducing sports performance and achieving sporting targets, changes in feelings, burnout,

psychological well-being, interpersonal relationships and socialness and tendency toward injury (Hoar et al., 2006; Jordet, 2010; Tamminen et al., 2014). For sportspeople to cope effectively with difficulties encountered in the preparation period before a competition or during a competition, they need to display behavior requiring high effort. From this aspect, preceding studies have defined perfectionism as a probable precursor of active coping (Gaudreau and Antl, 2008; Appleton et al., 2010) because a sportsperson's ability to cope with difficult situations encountered during training or competition may be due to the person's perfectionist standards (Flett et al., 1991a). Ultimately, coping acts on the process between perfectionism and emotional adjustment (Dunkley et al., 2003).

The term "well-being" has more than 475,000 citations indexed in the scientific research literature. However, in spite of this interest, there is no consensus about the definition of well-being (Dodge et al., 2012). According to the target-oriented theory, subjective well-being is reached when a target is achieved or a need is met. The basis of this theory is known to be Wilson's opinion about the occurrence of happiness when needs are met, and that contrary to this, needs that are not met and become permanent may cause unhappiness (Diener, 1984). A parallel view is that the individual's life satisfaction will increase in direct proportion to their needs being fulfilled (Omodei and Wearing, 1990). However, sportspeople encounter difficulties due to difficult opponents, injury, sudden falls in performance, difficult trainer-sportsperson relationships, media pressure, excessive expectations and unofficial processes (Hanton et al., 2005; Nicholls and Polman, 2007; Mosewich et al., 2014). These types of threats and difficulties may cause stress and may easily affect general physical and mental well-being in a negative sense, in addition to a sportsperson's search for perfectionism. However, sportspeople feel better about themselves when they successfully achieve their targets (Amiot et al., 2004; Gaudreau and Blondin, 2002; Graham et al., 2002). Effective use of coping during competitions is stated to affect both achieving targets and subjective well-being (Hoar et al., 2006). Additionally, the correlation between maladjusted perfectionism and psychological problems is emphasized to be connected to the strategies an individual uses to cope with stress. The avoiding coping style for difficulties increases the severity and duration of stress; thus, causes higher tendency to experience stress factors (Carver and Connor-Smith, 2010; Dunkley et al., 2003). The negative traits of the perfectionist character of determining difficult-to-achieve personal performance standards, overemphasis on errors, and lack of flexibility in assessment of their own behavior increases a person's stress level and this maladjusted perfectionism increases the risk of people developing a range of psychopathological disorders (Flett et al., 1991a). Effective coping is thought to increase psychological well-being in addition to sporting performance (Lazarus,

2000b). If perfectionist sportspeople develop a proactive and duty-focused approach when they are successful in dealing with difficulties, they protect themselves from the negative effects of perfectionism to a certain extent. This process represents an important key role in development of flexible feelings toward difficult situations among sportspeople according to variable conditions and expectations (Flett and Hewitt, 2005). Based on the theoretical framework above, this study researched the mediating effect of coping between perfectionism and well-being. In other words, it is assumed that increases in perfectionism levels will make coping more difficult and as a result, the mental well-being of individuals will reduce.

METHOD

Sample

Participants were sports students obtained with the convenient sampling method comprising 119 (40%) females and 173 (60%) males. Ages ranged from 18 to 35 years ($M = 21.71$, $SD = 2.15$). Among sports students, 55 were in first year (19%), 66 were in second year (23%), 96 were in third year (33%) and 75 were in fourth year (26%). Of participants, 235 (81%) continued with active sports. Additionally, 53 participants (18%) were national athletes.

Instrument

Multidimensional perfectionism

The Multidimensional Perfectionism Scale developed by Hewitt and Flett (1991b) and with Turkish validity and reliability studies performed by Oral (1999) was used. The scale measures the perfectionist level of people and comprises 45 items in three subdimensions to assess dimensions of perfectionism. Items are assessed on a 7-point Likert-type scale (1 = definitely disagree, 7 = definitely agree). The “self-oriented perfectionism” subdimension measures the degree to which the person determines high standards for themselves (e.g., it is very important to me that everything I do is perfect). The “other-oriented perfectionism” subdimension measures the degree to which the person has high standards for other people and expectations from others (e.g., I cannot tolerate my relatives making mistakes). The “socially-prescribed perfectionism” subdimension measures the person’s self-perception of the degree to which they can achieve the perfectionism expectations determined by other important people (e.g., my family expect me to be perfect). Total points obtained on each subscale show the perfectionism level for that subscale and the increase in points obtained from each subscale means the person has elevated levels of perfectionism (Hewitt and Flett,

1991b). Each subdimension comprises of 15 items. The original scale had internal consistency coefficient from .79-.89 on validity and reliability studies, while the Turkish validity and reliability had internal consistency coefficient of .91 for the whole scale, .91 for the self-oriented perfectionism dimension, .73 for the other-oriented perfectionism dimension and .80 for the socially-prescribed perfectionism dimension.

Mental well-being

The Warwick Edinburgh Mental Well-Being Scale used in the research was developed by Tennant et al. (2007) with the aim of measuring the mental well-being levels of individuals in England. The validity and reliability study for the Turkish form of the scale was completed by Keldal (2015). The scale comprises 14 positive items encompassing “psychological well-being” and “subjective well-being”. The scale has 5-point Likert type and minimum 14 and maximum 70 points. Ratings on the scale are in the form of 1=definitely disagree, 2=disagree, 3=slightly agree, 4=agree and 5=definitely agree. High points obtained from the scale indicate high mental well-being. Internal consistency reliability for the scale was calculated with data from 348 people and Cronbach alpha coefficient was .89. The test reliability of the scale was performed on 124 people with correlation coefficient of .83.

Athletic coping skills

The Athletic Coping Skills Inventory-28 (ACSI-28) was developed by Smith et al. (1995) to measure athletes’ ability to cope with psychological difficulties with Turkish validity and reliability studies performed by Ozcan and Gunay (2017). The ACSI-28 had exploratory and confirmatory factor analysis completed and is qualified as a developed personal assessment form. The scale structure is 28 items and seven subscales (goal setting and mental preparation, freedom from worry, concentration, coping with adversity, confidence, peaking under pressure, and achievement motivation and training status). The scale has 4-point Likert-type form and requests participants to state how often they experience what the items refer to (ranging from 0 = almost never to 3 = almost always). The alpha internal consistency coefficients for the 7 subfactors of the ACSI-28 vary from .62 (concentration) to .78 (peak performance under pressure). The alpha reliability coefficient for the whole scale was stated to be .86.

Data analysis

Before assessing the mediation model in the study, the correlations between variables were investigated with the

Pearson correlation coefficient. Then models were analyzed with the regression-based bootstrapping technique using the PROCESS macro developed by Hayes (2018). Based on general use, confidence intervals are created with bootstrapping coefficients in models made by making 10,000 bootstraps. For interpretation of outcomes, or for results to be significant in other words, the lower and upper limits of the confidence intervals are examined and if these limits do not include zero the analysis path is concluded to be significant (Preacher and Hayes, 2008).

RESULTS

This section of the research presents preliminary

analyses. Then the answers to the research questions are given.

Preliminary analysis

Firstly, correlations were examined to investigate the relationships between mental well-being, perfectionism and coping in athletes. Findings are presented in Table 1.

As seen in Table 1, there was a statistically positive significant correlation between mental well-being and coping skills of athletes ($r = .55, p < .01$). There were negative significant correlations observed between mental well-being with self-oriented ($r = -.41, p < .01$), other-oriented ($r = -.32, p < .01$) and socially-prescribed ($r = -.24, p < .01$) perfectionism.

Table 1. Correlations between variables.

Variables	1	2	3	4	5
1. Mental well-being	-				
2. Athletic coping skills	.55**	-			
3. Self-oriented perfectionism	-.41**	-.33**	-		
4. Other-oriented perfectionism	-.32**	-.25**	.67**	-	
5. Socially-prescribed perfectionism	-.24**	-.21**	.66**	.67*	-

Note. * $p < .05$; ** $p < .01$.

Mediating role of athletic coping skills

The mediation of perfectionism and mental well-being of

athletes by coping skills was investigated using the regression-based bootstrapping analysis. Figure 1 gives the findings from these models.

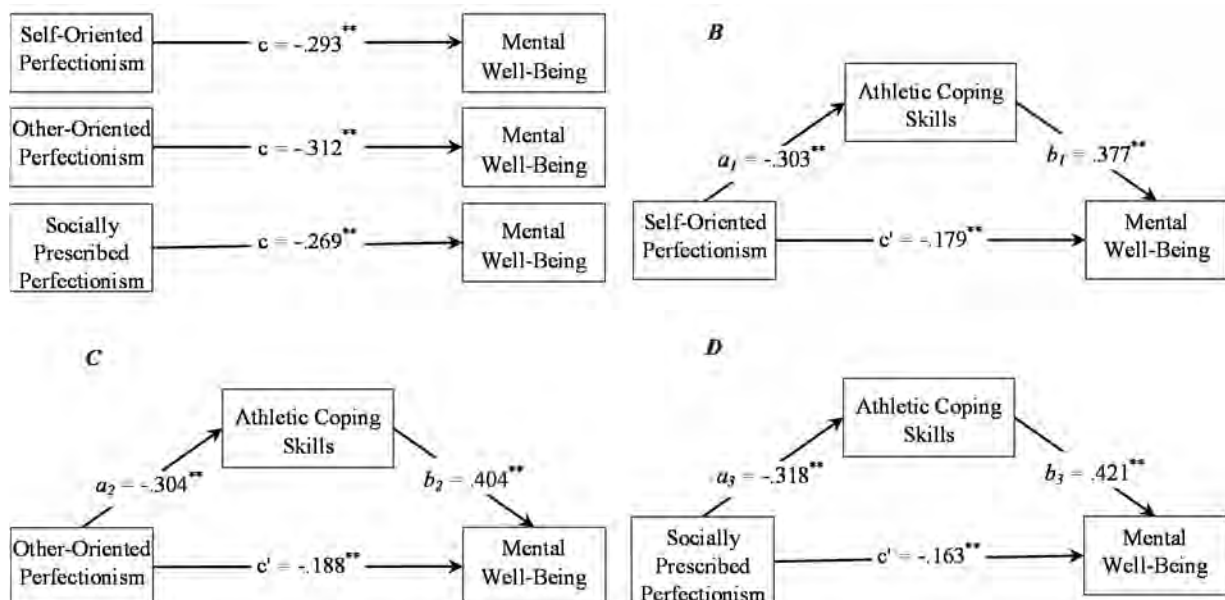


Figure 1. Mediated outcomes on mental well-being (panels B, C, and D) showing indirect effects of perfectionism through athletic coping skills. Note: Student evaluations of teaching (SETs) were administered in two modalities in Years 1 and 2: paper based for face-to-face courses and online for online courses. SETs were administered online for all courses in Year 3.

Firstly, the direct effects in Figure 1 are considered. Among athletes, other-oriented perfectionism ($B = -.31, p < .001$), self-oriented perfectionism ($B = -.29, p < .001$) and socially-prescribed perfectionism ($B = -.27, p < .001$) negatively predicted mental well-being. At the same time, other-oriented perfectionism ($B = -.30, p < .001$), self-oriented perfectionism ($B = -.30, p < .001$) and socially-prescribed perfectionism ($B = -.32, p < .001$) negatively and significantly predicted coping skills. It was identified that coping skills of athletes positively and significantly predicted mental well-being.

When the mediating role of coping skills between perfectionism and mental well-being is investigated, partial mediation was present. In this context, the bootstrapping coefficient and 95% confidence intervals (CI) in relation to significance of indirect effects in the model are presented in Table 2.

As understood from Table 2, the model for SOP →

Coping → MW was identified to be significant [$F_{(2, 289)} = 82.84, p < .001$]. When mediation in the model is considered, it is understood that athletic coping skills had a partial mediating role between self-oriented perfectionism and mental well-being of athletes (bootstrap = $-.114, 95\%CI = -.167, -.069$). Similarly, the OOP → Coping → MW model was determined to be significant [$F_{(2, 289)} = 76.09, p < .001$]. When mediation is considered in the model, it was understood that athletic coping skills had a partial mediating role between other-oriented perfectionism and mental well-being of athletes (bootstrap = $-.122, 95\%CI = -.191, -.058$). Finally, the model of SPP → Coping → MW was identified to be significant [$F_{(2, 289)} = 70.16, p < .001$]. When mediation in this model is considered, it was understood that athletic coping skills had a partial mediating role between socially-prescribed perfectionism and mental well-being of athletes (bootstrap = $-.134, 95\%CI = -.230, -.052$).

Table 2. Outcomes related to indirect effects.

Indirect effect	Bootstrap	SE	95%CI		R ²	F _(2, 289)
			Lower limit	Upper limit		
SOP → Coping → MW	-.114	.03	-.167	-.069	.36	82.84**
OOP → Coping → MW	-.122	.03	-.191	-.058	.34	76.09**
SPP → Coping → MW	-.134	.04	-.230	-.052	.33	70.16**

Note: SOP, self-oriented perfectionism; SPP, socially prescribed perfectionism; OOP, other-oriented perfectionism; MW, mental well-being. ** $p < .001$.

DISCUSSION AND CONCLUSION

In this study, the role of coping in explaining the relationship between the perfectionist personality construct and the mental well-being of students attending a sports science faculty was researched. The hypothesis of the research assumed that coping has the effect of mediator in the relationship between perfectionism and well-being. Perfectionism occurs in situations where the desire to reach high standards becomes unhealthy. Just as the person may have expectations of high standards for themselves, they may have the same expectations from people around them or they may develop the perception that others have high expectations of them. The perfectionist personality construct is stated to have both positive and negative effects on athletes. In this context, it is not easy to say whether perfectionism is good or bad.

If the targets determined by individuals are not consistent with reality or uncertain, happiness will not last for long (Diener, 1984). As people advance on the path to achieving their targets, they display an increase in positive behavior, while they begin to display more negative attitudes when they do not reach their targets (Diener et al., 1999). For athletes to be perfect, they must display flawless and faultless performance. Coping

processes mediate the relationship between perfectionism and emotional adjustment (Dunkley et al., 2003). Especially, the experience of achieving a single positive target appears to be sufficient to ensure sustainable increases in emotional adjustment (Wiese, 2007). Athletes who successfully achieve their targets feel better about themselves (Amiot et al., 2004; Gaudreau and Blondin, 2002; Graham et al., 2002). However, though sports encourage perfectionism, athletes attempting to be perfect may encounter difficulties in terms of motivation, well-being and performance and may enter a paradox with efforts to be perfect (Flett and Hewitt, 2005, 2014). For this reason, individuals with a perfectionist personality structure who cannot cope may have an increased risk of encountering health problems and this situation may negatively affect the well-being of the person (Sirois and Molnar, 2014; Kempke et al., 2013; Molnar et al., 2016).

Perfectionists are exposed to stress linked to high standards and expectations and considering self-esteem may be lost when these expectations are not met, coping ability is important to deal with psychological disorder that may form as a result of being perfectionist. Furthermore, due to the high personal standards of perfectionism, self-oriented perfectionism (SOP) reflects a process with the potential to contribute to both positive and negative

outcomes (Flett and Hewitt, 2006). Therefore, effective coping, in addition to physical and psychological health, causes emotional reactions like positive adaptation to disease, subjective well-being, efforts shown in line with determined targets or addictive behavioral markers, and desire to progress and succeed in targets (Aldwin, 2007; Lazarus, 1991) which affect sporting performance (Lazarus, 2000b). Self-oriented perfectionism is stated to be associated with some maladjusted coping strategies like avoidance, self-blame and lack of active problem-solving interventions (Dunkley et al., 2003; Weiner and Carton, 2012). Clearly, this area is important in terms of better understanding the processes causing changes in the psychological well-being of perfectionist athletes (Gaudreau and Antl, 2008). Athletes must display high efforts both physically and mentally in order to cope with difficult situations that will be encountered during important competitions in the training season. In this sense, previous studies have identified perfectionism as a precursor to effective coping (Gaudreau and Antl, 2008; Appleton et al., 2010) because a person's ability to regulate behavior, and as a result effectively deal with difficulties, may be due to their perfectionist norms (Flett et al., 1991b). The perfectionist construct may leave athletes in a difficult situation between success and failure, and they may experience a problematic process while attempting to attain the unachievable. Athletes who cannot cope as required by this process may experience negative effect on psychological well-being and this may cause negative outcomes (Flett and Hewitt, 2006; Greenspon, 2000). However, a person's desire to meet internalized standards with self-oriented perfectionism is generally accepted as being adaptable and it is stated they display similarity with positive behavior in self-oriented perfectionism. Self-oriented perfectionism is not maladjusted in very successful athletes displaying relatively high levels of performance; however, it is stated to be associated with negative thoughts and reactions to errors among those who are less successful (Wieczorek, Flett and Hewitt, 2003). When associated with coping styles for events that cannot be controlled, it is stated that concern about making mistakes and self-blame may lead to negative assessment of the self (Ogai, 2004). However, there is a positive correlation between self-oriented perfectionism and the process of achieving desired targets, so the negative effects of SOP may not be displayed until athletes encounter negative situations (Hill et al., 2008).

Different from the positive aspects of perfectionism, the negative dimension or aspect of perfectionism of negative reactions to flaws causes increasing concerns about not meeting the standards determined by the perfectionist due to perfectionism maladjustment and abnormal traits of the person (Stumpf and Parker, 2000; Suddarth and Slaney, 2001; Hamachek, 1978). Other-oriented perfectionism is considered to have a similar basis to self-oriented perfectionism; however, behavior is between

people under natural conditions. In other words, people with perfectionism oriented towards others direct unrealistic expectations toward other people and respond to their expectations of others with hard and critical interventions (Flett and Hewitt, 2002; Hewitt and Flett, 1991). Besides, other-oriented perfectionism is simultaneously associated with self-confident and competitive character structure (Bieling et al., 2004).

Shafran et al. (2010) proposed that 24 to 49% of perfectionism is hereditary. Of course, this means that our social surroundings play an important role in development of personality structure. Playing sports involves continuous assessment. Athletes are continuously assessed by their teammates, trainers, authorities, fans, competitors and other people. This situation represents a risk that increases the probability of each performance being assessed as successful, in addition to being unsuccessful, by perfectionist athletes. When compared to other perfectionist personality constructs, socially-prescribed perfectionism is stated to be more harmful to the mental health of the person due to having high maladjusted characteristic features (Bieling et al., 2004; Curran and Hill, 2019). Hewitt et al. (1995) emphasized that socially-prescribed perfectionism is associated with weak constructive thinking. People in this situation give inadequate reactions when faced with difficult situations, are unable to produce solutions and this causes increasing self-blame and negative effects (Flett et al., 1994). Trainers and parents in the social environment of athletes can reduce the negative effects caused by perfectionism by displaying positive approaches and may assist athletes in avoiding the use of poor coping strategies. This situation will assist in improving performance and success standards. Those with socially prescribed perfectionism do not use problem-focused coping strategies applying personal control as they believe others have control of success. As a result, they perceive problem-focused strategies as ineffective and athletes easily increase environmental stress when they reconnect with the source of stress (Dunkley et al., 2003; Appleton et al., 2010). The ability to cope required for athletes to manage perfectionism will assist in dealing with difficulties that occur with the continuous efforts of athletes to attain more difficult targets. For example, encouraging problem-focused coping tendencies may have a range of beneficial outcomes, contrary to avoiding coping styles. The main product and outcome of this situation are that athletes are helpless and unable to use sport skills and techniques appropriately. This helplessness and feelings of inadequacy do not just increase competitive anxiety (cognitive and somatic) but also have a weakening effect on mental well-being states. Displaying an avoiding coping style when difficulties need to be faced does not directly address stress factors and thus increases the severity and duration of stress; this causes a tendency to experience additional stress factors (Carver and Connor-

Smith, 2010; Dunkley et al., 2003). Consistent with the target achievement process and effects on well-being in the self-adjustment model within the broad conceptual framework of Sheldon and Elliot's (1999) self-determination concept, Smith et al. (2007) found that athletes achieving their targets was positively associated with satisfaction of basic requirements and as a result was a predictor of psychological well-being. Psychological well-being is not just defined as the absence of psychological problems but also having a positive psychological state (Ryff, 1995). Continuous failure in achieving high and fixed standards with perfectionism will cause the sportsperson to develop low efficacy. This low efficacy later increases anxiety and reduces coping causing disruption of well-being (Stoeber, 2017). The sportsperson wants to overcome their failure and this puts the sportsperson under more stress; athletes who cannot cope with this situation experience problem and this may lead to the formation of problems disrupting psychological well-being (Haase and Prapavessis, 2004). As a result, coping strategies seem to be an important mediator of the relationship between perfectionism and psychological well-being (Stoeber, 2015). To meet the necessities and psychological demands of competition and to display high performance for sport, the use of coping is positively associated with psychological well-being (Carrasco et al., 2010; Kim et al., 2003). In other words, if athletes can overcome difficult situations encountered, they will feel better psychologically.

One of the most important topics in sport is shown to be the balance between psychological difficulties and coping efficacy among young athletes with development at the desired international levels and remaining at that level without being affected by negative situations. This approach explains psychological well-being status and coping strategies for difficulties of young athletes in a very difficult competitive environment. For healthy well-being, positive or negative coping with the high standards brought by perfectionism and accompanying stress will affect the psychological well-being of athletes with the same parallel relationship.

Limitations

The results of the current study contribute to understanding the relationship between perfectionism dimensions and well-being of athletes but involve some limitations. Firstly, results obtained from a small sample size reduce the possibility to generalize the results, especially for mediation analysis (Fritz and MacKinnon, 2007). A larger sample will contribute to identifying the necessary statistical power and true effects in mediation analysis. Another limitation is that the study was performed with the cross-sectional research method. Past research has stated that the perfectionist construct

is not a momentary feature but may change over time. Longitudinal studies performed in different sports branches considering the variations in stress intensity in various periods of the sporting season will assist in resolving this limitation by determining whether there is a variation in well-being of athletes while coping with perfectionism and its outcomes. Additionally, these are important to understand coping with varying stress conditions during the season in association with perfectionism dimensions and how perfectionism affects the well-being of athletes. It is difficult to observe these variations in cross-sectional research. Finally, though the study dealt with perfectionism, coping and well-being predictors based on the literature, we cannot create cause-outcome relationships between variables based on correlations in analyses. Despite these limitations, the current research reveals the predictive power of coping ability in terms of psychological well-being when faced with difficult situations due to perfectionist personality structure among university students attending a sports science faculty.

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