

**The relationship between social status and stress with work pressure and socially prescribed perfectionism as possible mediators**

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### **Abstract**

The present study assessed the relationship between social status and stress, and whether this relationship was mediated by work pressure and socially prescribed perfectionism. The study was conducted with an online questionnaire measuring social status, stress, work pressure and socially prescribed perfectionism. The sample consisted of 148 participants after data cleaning. Results of a mediation analysis found no significant mediating effects of work pressure and socially prescribed perfectionism on the relationship between social status and stress. Results did find a significant effect for the relationship between social status and stress with a low social status leading to more stress. This was not in line with the hypothesis. The variable social support could explain why the hypotheses were not confirmed by the results. Limitations of the study were that there were not enough participants to have a high enough power and that social status was measured with a self-perception scale. A replication is needed to determine if work pressure and socially prescribed perfectionism are mediators of the relationship between social status and stress. In this replication social support should be added as a control variable.

*Keywords:* Social status, stress, work pressure, socially prescribed perfectionism, expectations

## Introduction

Social status is a topic of great interest and has been researched a lot in different ways. Social status can be defined as “the respect, admiration, and voluntary deference an individual is afforded by others, based on that individual’s perceived instrumental social value” (Anderson, et al., 2015). Wang et al. (2020) researched whether social class predicted the desire for social status and wealth. Anderson et al. (2015) reviewed empirical literature about the desire for status being a fundamental human motive and concluded that social status is indeed a fundamental human motive. Humans have an innate desire to achieve a high social status (Maslow, 1943). Status differences seem to exist in all human social environments (Rueden, 2014). and that the different levels of social status have consequences for individuals. People with a higher social status appear to enjoy higher life satisfaction, while individuals with a lower social status appear to experience more negative health effects like depression and anxiety (Anderson et al., 2015). Social status shapes subjective well-being.

Stress can also be a consequence of social status. According to Leary et al. (2014) social status can lead to stress. Stress can have several negative effects on health. It can lead to higher blood pressure (Vrijkotte et al., 2000). Stress has also been found to predict depression in individuals (Hammen, 2015) and burnout (Tracey & Hinkin, 2006). To reduce stress it is important to first look at what causes stress.

There seems to be a relationship between social status and stress but how straightforward that relationship is, is not clear. According to Leary et al. (2014) social status can lead to stress. Sachser et al. (1998) found that having a low social status does not necessarily mean an individual experiences more social stress than an individual with high social status. According to Knight & Metha (2017), high social status leads to more stress than low social status in an unstable hierarchy. The relationship between stress and social status is unclear, but it seems that a high social status can lead to more stress (Leary et al., 2014).

It seems that there is more to the relationship between social status and stress than just these two variables. Work pressure and socially prescribed perfectionism appear to mediate this relationship. Social status leads to weightier responsibilities and job demands, and these lead to more stress (Leary et al., 2014). Work pressure is a job demand (Bakker & Demerouti, 2007) that has been found to be positively associated with stress (Smith et al., 2019). Socially prescribed perfectionism is the second variable that could mediate the relationship between social status and stress. Socially prescribed perfectionism, a belief someone has that others expect them to be perfect (Hewitt & Flett, 1991) has been found to be positively associated with stress (DuongTran et al., 1996) and social status (Leary et al., 2014; Anderson et al., 2012b).

That is why this research focuses on the relationship between social status and stress with work pressure and socially prescribed perfectionism as mediators with the question: Does social status lead to stress and is this relationship mediated by work pressure and socially prescribed perfectionism?

### **Stress & Social Status**

Stress is a concept that is not easily defined, it does not have a widely accepted definition (Pacák, & Palkovits, 2001). One of the first definitions of stress was formulated by Hans Selye (1956), “stress is the nonspecific response of the body to any demand”. This definition is rather generic and broad. A second definition was formulated by McGrath (1976) “stress involves an interaction of person and environment. Something happens “out there” which presents a person with a demand, or a constraint or an opportunity for behavior” This definition is a little more specific than the one from Selye (1956), but is still rather vague. The definition that will be used in this research is the one formulated by Goldstein (1995) because it is an extensive definition that fits well with the content of this research. According to Goldstein (1995) stress is “a condition where expectations, whether genetically programmed, established by prior learning, or deduced from circumstances, do not match the current or anticipated perceptions of the internal or external environment, and this discrepancy between what is observed or sensed and what is expected or programmed elicits patterned, compensatory responses.”.

Literature on the relationship between social status and stress is divided. According to Leary et al. (2014) social status can lead to stress. According to Sachser et al. (1998), however, the level of social status does not necessarily have an influence on the level of stress experienced. Furthermore, other literature only gives positive effects of social status and not negative effects like stress. For one, it appears that social status shapes subjective well-being (Anderson et al., 2015). High social status provides people with benefits in relation to well-being. People with high social status have higher self-esteem, life satisfaction, and positive affect than people enjoying a lower social status, and high socioeconomic status is associated with lower perceived stress (Gallo, 2013). So on one hand it has been found that a higher status has positive effects like a decrease in perceived stress (Gallo, 2013), but on the other hand, high social status can also have costs or negative effects of which an increase in stress is one (Leary et al., 2014).

In research by Gesquiere et al. (2011) the relationship between rank and stress in wild male baboons was investigated. They measured stress by measuring glucocorticoid levels. The more glucocorticoids, the more stress is experienced (Wingfield & Sapolsky, 2003). They found that alpha males, the highest rank, experienced about the same amount of stress as the lowest

rank, and both experienced more stress than the ranks in between. Their results were found to be independent of hierarchy stability. Research by Sapolsky (2005) found levels of cortisol, a glucocorticoid, and stress to be higher in high status compared to low status for animals. This relationship was found in unstable hierarchies. Knight & Metha (2017) found this relationship to be true for humans too. A high social status leads to more stress than low social status in an unstable hierarchy. It leads to more stress because individuals want to maintain their high social status. According to Leary et al. (2014) a high social status can also lead to stress. It appears that high-status individuals react intensely to status threats because they have more status to lose than others and come to care about status more as they gain more of it (Pettit, Yong, and Spataro, 2010; Anderson et al., 2015). The desire to keep one's higher social status could lead to stress. Based on this, I propose that

*(H1) social status is positively associated with stress*

### **Work pressure**

However, it seems that dominants and subordinates can be stressed equally (Sachser et al., 1998). For example, almost all stressors related to contest or agonistic behavior seem to increase cortisol levels in both subordinates and dominants (Chichinadze & Chichinadze, 2008). Cortisol is a glucocorticoid and a stress hormone, an increase in cortisol means an increase in stress (Wingfield & Sapolsky, 2003).

According to Sapolsky (2005) which rank or in this study level of social status experiences more stress is dependent on which rank experiences the most physical and psychological stressors. According to Abbott et al. (2003) which rank experiences more stress could be dependent on different social environments. For example in aggressive societies subordinates experienced higher levels of cortisol and thus more stress than dominants. Abbott et al. (2003) found for different monkey species, that differed in social environments, different levels of cortisol concentrations in subordinates versus dominants. For some species, cortisol levels were higher for subordinates, for others in dominants, and for again others, there was no significant difference in cortisol levels. Therefore it seems as if the relationship between social status and stress is mediated by another variable. One variable could be work pressure.

According to Leary et al. (2014) social status itself is not what leads to negative effects like stress, but the attainment and maintenance of the social status does. Social status can bring weightier responsibilities and more work. These weightier responsibilities or in other words more demanding tasks can lead to stress (MacDonald, 2003). In research by MacDonald (2003) employees who performed more demanding tasks and had higher job demands, experienced higher levels of stress. Furthermore, according to the job demands resource model (Bakker &

Demerouti, 2007) job demands lead to health impairments of which stress is the main one. According to Meijman & Mulder (1998) job demands are not necessarily negative but they can lead to stressors. Especially when meeting the job demands require a lot of effort. Work pressure is such a job demand (Bakker & Demerouti, 2007). Work pressure is “the degree to which workers feel under pressure to complete work given time and resource constraints” (Smith et al., 2019).

Social status is positively associated with work pressure because a high social status can bring weightier responsibilities and more work (Leary et al., 2014). More work and more job demands can lead to work pressure. High social status can therefore lead to more work pressure. Based on this, I propose that

*(H2) social status is positively associated with work pressure.*

Work pressure is a job demand (Bakker & Demerouti 2007). In research by MacDonald (2003) employees who had higher job demands, experienced higher levels of stress. Based on this, I propose that

*(H3) work pressure is positively associated with stress.*

According to the literature, it seems that social status brings more work pressure with it (Leary et al., 2014) and that work pressure leads to more stress (MacDonald, 2003). This makes it seem as if the relationship between social status and stress is mediated by work pressure. Based on this, I propose that

*(H4) work pressure mediates the relationship between social status and stress.*

### **Socially Prescribed Perfectionism**

Another construct that could mediate the relationship between social status and stress is socially prescribed perfectionism. Socially prescribed perfectionism can be described as a belief someone has that others expect them to be perfect (Hewitt & Flett, 1991), it is a belief that striving for perfection and being perfect is important to others and that others will be highly critical of them if they fail to meet these expectations.

In a study by Anderson et al. (2012b) over 65% of the participants did not want to have the highest social status in a group. They found that this was dependent on an external constraint, namely the expectations of others. When these constraints were removed participants did have a preference for high status (Anderson et al., 2012). They tended to conform to people’s expectations. Higher social status is afforded to individuals who are perceived to possess instrumental social value (Leary et al., 2014; Ridgeway, 1984). In other words, they are expected to display certain competencies and to act in accordance with that instrumental social value. They are expected to be perfect at something. Roles bring

expectations with them regarding how people should behave in a certain role or how their image has to be in a certain role (Leary et al., 2014). These role expectations are likely to be present with the degree of social status. People with high social status could experience higher expectations of others to be perfect at something. In other words, there could be more socially prescribed perfectionism in individuals with a higher social status (Hewitt & Flett, 1991).

*(H5) social status is positively associated with socially prescribed perfectionism*

Expectations of others could also affect stress, with the high expectations others have leading to more stress in individuals (DuongTran et al., 1996). Socially prescribed perfectionism has been associated with role stress (Childs & Stoeber, 2012). In a study by Childs & Stoeber (2012) the relationship between socially prescribed perfectionism and stress was examined. They found that people high in socially prescribed perfectionism experienced more role stress over time. At the first time, they measured that people high in socially prescribed perfectionism already experienced more stress than people low in socially prescribed perfectionism and after 6 months the level of role stress even increased. Based on this I propose that

*(H6) socially prescribed perfectionism is positively associated with stress.*

So it seems that social status could lead to more expectations of others or in other words socially prescribed perfectionism (Hewitt & Flett, 1991) and that socially prescribed perfectionism can lead to an increase in stress (Childs & Stoeber, 2012). The reason socially prescribed perfectionism leads to more stress is that people experiencing this think, feel and behave in ways that generate more stress (Smith et al., 2017). Therefore, maybe the relationship between social status and stress is mediated by socially prescribed perfectionism. Based on this, I propose that

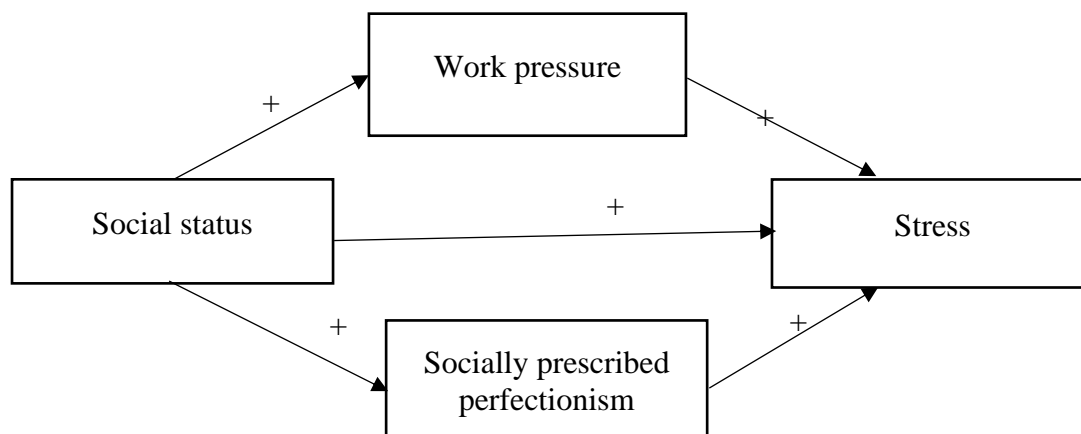
*(H7) socially prescribed perfectionism mediates the relationship between social status and stress.*

### **Present study**

The present study will focus on whether socially prescribed perfectionism and work pressure mediate the relationship between social status and stress. The hypotheses will be tested with a questionnaire about social status, stress, work pressure, and socially prescribed perfectionism. The results of the study will be analyzed with a mediation analysis.

**Figure 1**

*A Model of the Expected Direct and Indirect Effects of Social Status on Stress with Work Pressure and Socially Prescribed Perfectionism as Mediators*



## Methods

### Design

For this cross-sectional research participants were asked to complete a questionnaire about social status, stress, work pressure, and socially prescribed perfectionism. This study tested for two mediations between social status and stress.

### Participants

The sample consisted of 202 participants before the data was cleaned, after cleaning the sample consists of 148 participants. Before recruiting participants a power analysis was done. Results of the power analysis indicated a sample of  $N = 194$  was required to achieve 80% power for detecting an effect of at least  $r = .2$  at a significance level of  $p = .05$ . Participants were 148 adults, aged 18 to 75 ( $M = 35.9$ ,  $SD = 15.17$ ). The participants included 60 males, 80 females, 2 nonbinary, 3 people who did not want to disclose their sex, and 3 people who did not fill in the question. Of the participants, 142 were born in The Netherlands. Participants came from different work sectors, for example, healthcare, government, and education. For 10 participants the highest level of education was high school, for 56 it was university. For the other participants level of education was either secondary vocational education (MBO) or higher professional education (HBO). The sample was a convenience sample. Participants were approached via e-mail, WhatsApp, and social media. Participants had to give their consent for participation before starting with the survey, by checking a box.



## **Procedure**

Qualtrics was used for administering the survey. Participants received an invitation message with a short explanation about the study and a link to the survey (Appendix A). Participation was completely voluntary and anonymous.

Before starting with the survey participants were asked to fill in informed consent. Once they agreed with the informed consent, the survey started. The survey was the same for all participants. They were asked to fill in questionnaires about social status, stress, work pressure, expectations, socio-sexual orientation, and self-esteem. Data was collected with someone else doing different research about social status. The last two questionnaires, socio-sexual orientation, and self-esteem were relevant for the research of my fellow student and are not relevant for this research and the results of these will not be analyzed. After these questionnaires, demographic questions about sex, birthplace, age, highest degree, and work sector were asked. The demographic question about the work sector showed that all participants had a job.

After the questionnaires, a short debriefing of the study followed and the participants could click send and finish the survey.

## **Measurements**

### ***Social status***

Participants were first asked to list the three most important face-to-face groups they belonged to. Then they were given a definition of social status and were asked to rate their social status in all three groups on a 7-point Likert scale item. Perceived social status was measured with the item “How high is your status in group...” which was rated on a 7-point Likert scale, ranging from “1 = very little” to “7 = a lot”. This scale is a Dutch version of the scale used by Anderson et al. (2020) with a Cronbach’s alpha of  $\alpha = .64$ .

### ***Stress***

Stress was measured with a Dutch version of the *Perceived Stress Scale* (1983). The reliability of the scale is good with a Cronbach’s alpha of  $\alpha = 0.84$ . This is a 5-point Likert scale, ranging from “0 = never” to “4 = very often”. The scale consists of 10 items asking how often someone felt a certain way. Examples of items are “In the last month, how often have you been upset because of something that happened unexpectedly?” and “In the last month, how often have you felt nervous and stressed?”.

### ***Work pressure***

Work pressure was measured with four work pressure items as used by Gallie (2005). The reliability of the scale constructed by Gallie (2005) is acceptable with a Cronbach’s alpha

of  $\alpha = 0.72$ . 1. “My job requires that I work very hard” (5-point response scale: “0 = Strongly agree”–“4 = Strongly disagree”), 2 “I work under a great deal of pressure” (5-point response scale: 0= Agree– 4 = Disagree), 3 “I never seem to have enough time to get everything done in my job”( 5-point response scale: “0 = Strongly agree”–“4 = Strongly disagree”), & 4 “I often have to work extra time, over and above the formal hours of my job to get through the work or to help out” (5-point response scale: “0 = Strongly agree”–“4 = Strongly disagree”).

### ***Socially Prescribed Perfectionism***

Socially Prescribed Perfectionism was measured with the dimension socially prescribed perfectionism from the *Multidimensional Perfectionism Scale* (Hewitt & Flett, 1990). This is a 7-point Likert scale existing of 15 items. 10 items range from “1 = disagree” to “7 = agree” and 5 items range from “7 = disagree” to “1 = agree”. Example items are “I find it difficult to meet others expectations of me” and “Others will like me even if I don’t excel at everything”

### **Analyses**

To examine the hypotheses a mediation analysis using PROCESS for spss has been done.

## **Results**

### **Preliminary analyses**

SPSS was used to analyze the data. The first step was cleaning the data. Of the 202 responses 53 were removed, because participants had not completed the questionnaire or questionnaires were empty. One questionnaire was removed because the participant was younger than 18. Participants who did fill in the complete questionnaire but did not fill in all demographic questions were kept in the sample. The final sample consisted of 148 responses.

Items from the questionnaire which needed to be reverse scored were reversed scored. Means were calculated for social status, stress, work pressure, and socially prescribed perfectionism.

Before the results could be analyzed and interpreted, assumptions of the mediation analysis were checked. The assumptions that were checked for the mediation analysis were linearity, homogeneity of error variance, and independence of errors.

The assumption of linearity was checked with scatter plots. The assumption was met for all outcome variable predictor relationships.

### **Testing of hypotheses**

A bootstrapping method was performed using SPSS Process Macro to examine if work pressure and socially prescribed perfectionism mediated the relationship between social status and stress. Results are displayed in Table 2. First, the results of the simple linear regression

analyses show that social status was not a significant predictor for work pressure,  $b = .056$  CI [-.085, .196],  $t = .79$   $p = .43$ . This is not in line with hypothesis 2 that states that social status is positively associated with work pressure. Second, the results of the simple linear regression analyses show that social status was not a significant predictor for socially prescribed perfectionism,  $b = -.072$  CI [-.167, .026],  $t = .79$ ,  $p = .15$ . Hypothesis 5, that states that social status is positively associated with socially prescribed perfectionism, is not supported by the results.

Results of a multiple regression analysis, while controlling for work pressure and socially prescribed perfectionism, show that social status is a significant predictor of stress,  $b = -.095$  CI [-.183, -.006],  $t = -2.12$ ,  $p < .04$ . The results are not in line with hypothesis 1 that states that social status is positively associated with stress, the results show a negative relationship between social status and stress. The results of the multiple linear regression, furthermore, show that work pressure is not a significant predictor of stress,  $b = -.030$  CI [-.135, .076],  $t = -.56$ ,  $p = .58$ . Hypothesis 3 states that work pressure is positively associated with stress, the hypothesis is not supported by the results. Lastly, results of the multiple linear regression analysis show that socially prescribed perfectionism was a significant predictor of stress,  $b = .377$  CI [.226, .528],  $t = 4.92$ ,  $p < .001$ . The results are in line with hypothesis 6 which states that socially prescribed perfectionism is positively associated with stress. This model where social status, work pressure, and socially prescribed perfectionism are displayed as predictors of stress explains 19,7% of the variance in stress,  $R^2 = .197$ ,  $F(3,144) = 11.75$ ,  $p < .001$ .

The results of the indirect effect with work pressure as a mediator show that there is no significant indirect effect between social status and stress mediated by work pressure,  $b = -.002$  CI [-.014, .011]. Hypothesis 4, which states that work pressure mediates the relationship between social status and stress, is not supported by the results. The results of the indirect effect with socially prescribed perfectionism as a mediator show that there is no significant indirect effect between social status and stress mediated by socially prescribed perfectionism,  $b = -.027$  CI [-.070, .011]. Hypothesis 7, which states that socially prescribed perfectionism mediates the relationship between social status and stress, is not supported by the results. The results do show a significant direct effect between social status and stress,  $b = -.095$  CI [-.183, -.006],  $t = -2.12$ ,  $p < .04$ . The direction of the effect, however, is not as expected. The results show a negative relationship between social status and stress, while a positive one was expected. The results are not in line with hypothesis 1.

Lastly, the results show a significant total effect of status on stress,  $b = -.123$  CI [-.219, -.028],  $t = -2.57$ ,  $p = .01$ . According to the results social status explains 4,3% of the variance in stress in the total effect model of status and stress,  $R^2 = .043$ ,  $F(1,146) = 6.58$ ,  $p = .01$ . In this model no mediators are present.

Table 2. Results Mediation Analysis

*Results of the Mediation Analyses for the effects of Social Status on Stress with Work Pressure (WP) & Socially Prescribed Perfectionism (SPP) as mediators*

	B	SE	t	p	LLCI*	ULCI*
Social Status	-.095	.045	-2.116	.04	-.183	-.006
WP	-.030	.053	-.555	.580	-.135	.076
SPP	.377	.077	4.924	< .001	.226	.528
<i>Effects</i>						
Direct	-.095	.045	-2.116	.04	-.183	-.006
Indirect WP	-.002	.006			-.014	.011
Indirect SPP	-.028	.021			-.072	.010
Total	-.123	.048	-2.566	.01	-.219	-.028

\*95% confidence interval

## Discussion

The present study assessed the relationship between social status and stress, and whether this relationship was mediated by work pressure and socially prescribed perfectionism. According to the literature the expectation was to find higher stress levels in people with a higher social status (Leary et al., 2014; Knight & Metha, 2017). Furthermore, the expectation was to find significant mediation effects with work pressure and socially prescribed perfectionism mediating the relationship between social status and stress. These expectations were not found in the results of this study.

Hypothesis 1, social status is positively associated with stress, was not confirmed. There was a significant direct effect found of social status on stress with a lower social status leading to more stress than a higher social status. Hypothesis 2, social status is positively associated with work pressure, was not confirmed by the results. There was no significant effect found of social status on work pressure. Hypothesis 3, work pressure is positively associated with stress, was not confirmed by the results. There was no significant effect found of work pressure on

stress. Hypothesis 4, work pressure mediates the relationship between social status and stress, was not confirmed by the results. There was no significant mediation effect found where work pressure mediates the relationship between social status and stress. Hypothesis 5, social status is positively associated with socially prescribed perfectionism, was not confirmed by the results. There was no significant effect found of social status on socially prescribed perfectionism. Hypothesis 6, socially prescribed perfectionism is positively associated with stress, was confirmed by the results. There was a significant effect found of socially prescribed perfectionism on stress with a higher degree of socially prescribed perfectionism leading to more stress. Hypothesis 7, socially prescribed perfectionism mediates the relationship between social status and stress, was not confirmed by the results. There was no significant mediation effect found where socially prescribed perfectionism mediates the relationship between social status and stress.

### **Stress**

A significant direct effect of social status on stress was found. However, the effect had the opposite direction of what was expected according to the literature. According to Leary et al. (2014) a high social status would lead to more stress than a low social status. The effect found, however, was that a low social status leads to more stress than a high social status.

An explanation for this result could be that participants with a high social status experienced more social support than participants with a low social status. Social support has been found to reduce stress (Beausaert, 2016). If social support was present for most of the individuals with a high social status this could explain why a significant effect of social status being negatively associated with stress was found and not a positive relationship between social status and stress.

A second explanation could be that the measurement of social status was not reliable. It was a self-perception scale and self-perception scales are not always accurate. It could be that people thought they had a lower social status than they actually have.

The main effect of social status on stress not being found could be a reason for the mediation effects not being supported by the results.

### **Work pressure**

There was no significant effect found of social status on work pressure, this is contrary to hypothesis 2. This could mean that level of social status does not influence the amount of work pressure experienced by individuals, but this is not likely. The results are contrary to what was found in the literature. According to Leary et al. (2014) social status is positively associated

with work pressure because a high social status can bring weightier responsibilities and more work.

There was no significant effect found of work pressure on stress, this is contrary to hypothesis 3 which stated that work pressure is positively associated with stress. This is contrary to what was found in the literature. The job demands resource model by Bakker & Demerouti (2007) supported the hypothesis that more work pressure leads to more stress. Meijman & Mulder (1998) also supported this hypothesis, albeit a little more cautiously, saying job demands can lead to stressors. So why then was there no significant relationship found? Maybe other variables influenced the results or maybe it was not found in this study because there were not enough participants. A variable that could have influenced the results is social support. According to the job demands resource model job demands lead to stress when job resources such as social support are lacking (Bakker & Demerouti, 2007). This could mean that when there are job resources present there might not be a lot of stress as a result of job demands. If participants experienced social support this could be an explanation for not finding support for hypothesis 3 stating that work pressure is positively associated with stress. For future directions, social support could be added as a control variable for this relationship. Social support possibly being present for participants could also be the reason why no mediation effect was found.

There was no significant mediation effect found where work pressure mediates the relationship between social status and stress, this is contrary to hypothesis 4. The reason the mediation effect was not found, could be that the relationship between social status and stress was not found and because there might have been other variables that were not taken into account influencing the results. Such as social support that is found to reduce stress (Bakker & Demerouti, 2007).

### **Socially prescribed perfectionism**

There was no significant effect found of social status on socially prescribed perfectionism, this is contrary to hypothesis 5 and literature. According to literature roles bring expectations with them about how people should behave in a certain role (Leary et al., 2014; Leary, 1995). This can be interpreted as people with a high social status experiencing more socially prescribed perfectionism because they probably experience higher expectations of others to be perfect at something. Furthermore, higher social status is afforded to individuals who are perceived to possess instrumental social value (Leary et al., 2014; Ridgeway, 1984). They are expected to have certain competencies and to be perfect at something. A lot of literature thus seems to suggest a relationship between social status and

socially prescribed perfectionism. Limitations of the study like not having enough participants to get enough power could be the reason for not finding this effect.

There was a significant effect found of socially prescribed perfectionism on stress, this is in line with hypothesis 6. People experiencing more socially prescribed perfectionism experience more stress than people experiencing less socially prescribed perfectionism. This is in agreement with literature from Childs & Stoeber (2012), who found that people high in socially prescribed perfectionism experienced more role stress over time.

There was no significant mediation effect found where socially prescribed perfectionism mediates the relationship between social status and stress, contrary to hypothesis 7. Socially prescribed perfectionism is associated with role expectations (Kahn et al., 1964; Hewitt & Flett, 1991; Rizzo et al., 1970). It does make sense that socially prescribed perfectionism has a relationship with stress, or role stress (Childs & Stoeber, 2012), because both socially prescribed perfectionism and role stress bring social expectations with them. The mediation effect was probably not present, because the expected relationship between social status and stress was not found.

### **Other implications & limitations**

A reason for only finding 2 of the 7 expected effects and not finding the indirect effects of status on stress through socially prescribed perfectionism and work pressure could for one be that there was not enough usable data and more participants should have been recruited. According to the results of the power analysis, a sample of  $N = 194$  was required to achieve 80% power for detecting an effect of at least  $r = .2$  at a significance level of  $p = .05$ . In the data analysis only data from 148 participants was used, because data of 54 participants was not usable. That means there were almost 50 participants less than needed. Next time it is important to make sure there are enough participants so there will be enough usable data for the analysis. Not having enough power means that the test only has a small chance of detecting a true effect or that the results are likely to be distorted by random and systematic error (Field, 2018). To avoid this it is important to make sure there is enough power by making sure there are enough participants in the study.

Another limitation could be that the sample was a convenience sample. Participants that were contacted were people we knew or people that friends and/or family members knew. A result of using the convenience sample can be that most participants have the same social circles and could also have the same social status. This could have influenced the results a great deal and be a reason that not all hypotheses were confirmed.

This brings me to another limitation of this research. Social status was measured with a self-perception scale. Participants stated their own social status in different groups and the mean of those self-perceived levels of social status were used in the analysis. Self-perception is not always accurate, therefore, it could be that the results were affected by this and maybe the mediation effects do exist if a different way of measuring social status is used instead of a self-perception scale. Furthermore, the reliability of the self-perception scale of social status was not too good with a Cronbach's alpha of  $\alpha = .64$ . In future research it might be better to select participants based on their social status and divide them into two groups before giving the questionnaire. One group being high social status and the other being low social status.

### **Future Directions**

In this research, hierarchy stability was not taken into account. For future research, it could be better to add this variable as a moderator. Knight & Metha (2017) found hierarchy stability to be a moderator for the relationship between stress and social status. In an unstable hierarchy individuals with a high social status experience more stress. Maybe the expected mediating effects will be present in an unstable hierarchy where a high social status leads to more stress. Therefore, for future research, a model with hierarchy instability as moderator and work pressure and socially prescribed perfectionism as mediators in the relationship between social status and stress should be used.

To be certain that work pressure does not mediate the effect of social status on stress a replication of this research needs to be done. However, some things should be kept in mind and done differently in the replication. In this research, there were no control variables used, in future research about the same topic it would be of importance to include social support as a control variable as it could influence stress levels (Beausaert, 2016). Furthermore, it is best to make sure there will be enough usable data. Therefore, more participants need to be recruited than in this research. And last but not least the design of the study should be slightly different. Instead of using a self-perception scale to measure social status, it would be better to select participants based on their social status and divide them into two groups before giving the questionnaire. One group being high social status and the other being low social status.

### **Conclusion**

In short, the results were not as expected. For the relationship between social status and stress, a significant effect was found with a low social status leading to more stress than high social status. This was the opposite of what was expected. Furthermore, there were no significant mediation effects found for the relationship between social status and stress with work pressure and socially prescribed perfectionism as mediators. There was, however a



significant effect found for the relationship between socially prescribed perfectionism and stress. More socially prescribed perfectionism leads to more stress. Several implications and limitations could have influenced the results of the study, such as the study not having a high enough power and the use of a self-perception scale for measuring social status. It seems that it is still possible for the expected results to exist. Social support and hierarchy stability could be variables that influenced the results. A replication of this study is needed with a few changes. In this replication it is important to make sure the power of the study is high enough, it is important to recruit enough participants. This replication should select people based on their social status and divide them into two groups. Furthermore, the variable social support should be added as a control variable and hierarchy stability should be added as a moderator. Future research there also needs to be looked at social threat as a mediator of the relationship between social status and stress.

### References

- Abbott, D., Keverne, E., Bercovitch, F., Shively, C., Mendoza, S., Saltzman, W., Snowdon, C., Ziegler, T., Banjevic, M., Garland, T., & Sapolsky, R. (2003). Are subordinates always stressed? a comparative analysis of rank differences in cortisol levels among primates. *Hormones and Behavior*, *43*(1), 67–82. [https://doi.org/10.1016/s0018-506x\(02\)00037-5](https://doi.org/10.1016/s0018-506x(02)00037-5)
- Anderson, C., Hildreth, J. A. D., & Howland, L. (2015). Is the desire for status a fundamental human motive? A review of the empirical literature. *Psychological Bulletin*, *141*(3), 574–601. <https://doi.org/10.1037/a0038781>
- Anderson, C., Hildreth, J. A. D., & Sharps, D. L. (2020). The Possession of High Status Strengthens the Status Motive. *Personality and Social Psychology Bulletin*, *46*(12), 1712–1723. <https://doi.org/10.1177/0146167220937544>
- Anderson, C., Kraus, M. W., Galinsky, A. D., & Keltner, D. (2012a). The Local-Ladder Effect. *Psychological Science*, *23*(7), 764–771. <https://doi.org/10.1177/0956797611434537>
- Anderson, C., Willer, R., Kilduff, G. J., & Brown, C. E. (2012b). The origins of deference: When do people prefer lower status? *Journal of Personality and Social Psychology*, *102*(5), 1077–1088. <https://doi.org/10.1037/a0027409>
- Bakker, A. B., & Demerouti, E. (2007). The Job Demands-Resources model: state of the art. *Journal of Managerial Psychology*, *22*(3), 309–328. <https://doi.org/10.1108/02683940710733115>
- Beausaert, S., Froehlich, D. E., Devos, C., & Riley, P. (2016). Effects of support on stress and burnout in school principals. *Educational Research*, *58*(4), 347–365. <https://doi.org/10.1080/00131881.2016.1220810>
- Björkqvist, K. (2001). Social defeat as a stressor in humans. *Physiology & Behavior*, *73*(3), 435–442. [https://doi.org/10.1016/s0031-9384\(01\)00490-5](https://doi.org/10.1016/s0031-9384(01)00490-5)

- Chichinadze, K., & Chichinadze, N. (2008). Stress-induced increase of testosterone: Contributions of social status and sympathetic reactivity. *Physiology & Behavior*, *94*(4), 595–603. <https://doi.org/10.1016/j.physbeh.2008.03.020>
- Childs, J. H., & Stoeber, J. (2012). Do you want me to be perfect? Two longitudinal studies on socially prescribed perfectionism, stress and burnout in the workplace. *Work & Stress*, *26*(4), 347–364. <https://doi.org/10.1080/02678373.2012.737547>
- DuongTran, Q., Lee, S., & Khoi, S. (1996). Ethnic and gender differences in parental expectations and life stress. *Child & Adolescent Social Work Journal*, *13*(6), 515–526. <https://doi.org/10.1007/bf01874304>
- Field, A. (2018). *Discovering Statistics Using IBM SPSS Statistics* (5th edition). SAGE Publications.
- Gallie, D. (2005). Work Pressure in Europe 1996–2001: Trends and Determinants. *British Journal of Industrial Relations*, *43*(3), 351–375. <https://doi.org/10.1111/j.1467-8543.2005.00360.x>
- Gallo, L. C., Shivpuri, S., Gonzalez, P., Fortmann, A. L., De Los Monteros, K. E., Roesch, S. C., Talavera, G. A., & Matthews, K. A. (2012). Socioeconomic status and stress in Mexican–American women: a multi-method perspective. *Journal of Behavioral Medicine*, *36*(4), 379–388. <https://doi.org/10.1007/s10865-012-9432-2>
- Gesquiere, L. R., Learn, N. H., Simao, M. C. M., Onyango, P. O., Alberts, S. C., & Altmann, J. (2011). Life at the Top: Rank and Stress in Wild Male Baboons. *Science*, *333*(6040), 357–360. <https://doi.org/10.1126/science.1207120>
- Goldstein, D. S. (1995). *Stress, Catecholamines, and Cardiovascular Disease* (1st ed.). Oxford University Press.
- Hammen, C. L. (2015). Stress and depression: old questions, new approaches. *Current Opinion in Psychology*, *4*, 80–85. <https://doi.org/10.1016/j.copsyc.2014.12.024>

- Hewitt, P. L., & Flett, G. L. (1991). Perfectionism in the self and social contexts: Conceptualization, assessment, and association with psychopathology. *Journal of Personality and Social Psychology*, *60*(3), 456–470. <https://doi.org/10.1037/0022-3514.60.3.456>
- Knight, E. L., & Mehta, P. H. (2017). Hierarchy stability moderates the effect of status on stress and performance in humans. *Proceedings of the National Academy of Sciences*, *114*(1), 78–83. <https://doi.org/10.1073/pnas.1609811114>
- Leary, M. R., Jongman-Sereno, K. P., & Diebels, K. J. (2014). The pursuit of status: A self-presentational perspective on the quest for social value. In J. T. Cheng, J. L. Tracy, & C. Anderson (Eds.), *The psychology of social status* (pp. 159–178). New York, NY: Springer.
- MacDonald, W. (2003). The impact of job demands and workload on stress and fatigue. *Australian Psychologist*, *38*(2), 102–117. <https://doi.org/10.1080/00050060310001707107>
- Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, *50*(4), 370–396. <https://doi.org/10.1037/h0054346>
- McGrath, J. G. (1976). Stress and behavior in organizations. In M. D. Dunette (Ed.), *Handbook of Industrial and Organizational Psychology*. Chicago: Rand McNally.
- Meijman, T.F., and Mulder, G. (1998), “Psychological aspects of workload”, in Drenth, P.J., Thierry, H. and de Wolff, C.J. (Eds), *Handbook of Work and Organizational Psychology*, (pp. 5-33). Erlbaum, Hove.
- Pacák, K., & Palkovits, M. (2001). Stressor Specificity of Central Neuroendocrine Responses: Implications for Stress-Related Disorders. *Endocrine Reviews*, *22*(4), 502–548. <https://doi.org/10.1210/edrv.22.4.0436>
- Pettit, N. C., Yong, K., & Spataro, S. E. (2010). Holding your place: Reactions to the prospect of status gains and losses. *Journal of Experimental Social Psychology*, *46*(2), 396–401. <https://doi.org/10.1016/j.jesp.2009.12.007>
- Ridgeway, C. L. (1984). Dominance, performance, and status in groups: A theoretical analysis.

- In E. J. Lawler (Ed.), *Advances in group processes* (pp. 59–93). Greenwich, CT: JAI Press.
- Rueden, C. (2014). The roots and fruits of social status in small-scale human societies. In J. T. Cheng, J. L. Tracy, & C. Anderson (Eds.), *The psychology of social status* (pp. 179–200). New York, NY: Springer
- Sachser, N., Dürschlag, M., & Hirzel, D. (1998). SOCIAL RELATIONSHIPS AND THE MANAGEMENT OF STRESS. *Psychoneuroendocrinology*, *23*(8), 891–904.  
[https://doi.org/10.1016/s0306-4530\(98\)00059-6](https://doi.org/10.1016/s0306-4530(98)00059-6)
- Sapolsky, R. M. (2005). The Influence of Social Hierarchy on Primate Health. *Science*, *308*(5722), 648–652. <https://doi.org/10.1126/science.1106477>
- Selye, H. (1956). *The Stress of Life*. McGraw-Hill Education.
- Smith, M. M., Speth, T. A., Sherry, S. B., Saklofske, D. H., Stewart, S. H., & Glowacka, M. (2017). Is socially prescribed perfectionism veridical? A new take on the stressfulness of perfectionism. *Personality and Individual Differences*, *110*, 115–118.  
<https://doi.org/10.1016/j.paid.2017.01.031>
- Smith, T. D., DeJoy, D. M., Dyal, M. A. A., & Huang, G. (2019). Impact of work pressure, work stress and work–family conflict on firefighter burnout. *Archives of Environmental & Occupational Health*, *74*(4), 215–222.  
<https://doi.org/10.1080/19338244.2017.1395789>
- Stoeber, J. (2014). How Other-Oriented Perfectionism Differs from Self-Oriented and Socially Prescribed Perfectionism. *Journal of Psychopathology and Behavioral Assessment*, *36*(2), 329–338. <https://doi.org/10.1007/s10862-013-9397-7>
- Tracey, J. B., & Hinkin, T. R. (2006). The costs of employee turnover: When the devil is in the details. *CHR Reports*, *6*(15).
- Vrijkotte, T. G. M., Van Doornen, L. J. P., & De Geus, E. J. C. (2000). Effects of Work Stress on Ambulatory Blood Pressure, Heart Rate, and Heart Rate Variability. *Hypertension*, *35*(4), 880–886. <https://doi.org/10.1161/01.hyp.35.4.880>

Wang, Z., Jetten, J., & Steffens, N. K. (2020). The more you have, the more you want?

Higher social class predicts a greater desire for wealth and status. *European Journal of Social Psychology*, *50*(2), 360–375. <https://doi.org/10.1002/ejsp.2620>

Wingfield, J. C., & Sapolsky, R. M. (2003). Reproduction and Resistance to Stress: When and How. *Journal of Neuroendocrinology*, *15*(8), 711–724. <https://doi.org/10.1046/j.1365-2826.2003.01033.x>