

Sylvia Rimm

Clinical Professor, Case Western Reserve University School of Medicine

what's wrong with perfect? clinical perspectives on perfectionism and underachievement

Abstract

*Good, better, best.
Never let it rest,
'Til your good is better
And your better best.*

This familiar rhyme from generations past was used by parents and teachers to motivate children. Children may, in fact, internalize its message towards reasonable excellence, or may interpret it in a manner that causes them to never feel good enough unless they're "the best". Parents and teachers want children to strive for excellence. It is attainable and provides a sense of accomplishment. Excellence is advantageous whether it involves children's school grades, figure skating, music, art, gymnastics, written work, or almost any skill. Striving for perfection in an area of expertise can represent a healthy development of talent. However, when perfectionism becomes pervasive and compulsive, it goes beyond excellence. It leaves no room for error. It provides little satisfaction and much self-criticism because the results never feel good enough to the doer. Perfection is impossible for children who apply unrealizable high standards to too many activities, too frequently.

Definitions of Perfectionism

Most definitions of perfectionism involve a multidimensional description (Dixon, Lapsley, and Hanchon, 2004; Hamachek, 1978; Parker, 2000; Roedell, 1984; Ross, 2006; Schuler, 1999; Silverman, 1993), delineating it from the important healthy pursuit of excellence. Hamachek (1978) described perfectionism in two ways. He

called harmful perfectionism neurotic, but considered normal perfectionism desirable as a component of healthy achievement. While some researchers designate this normal achievement as healthy perfectionism, others prefer to consider all perfectionism unhealthy (Barrow and Moore, 1983; Pacht, 1984) and refer to healthy achievement motivation by another term such as "healthy excellence"

(Goldberg and Adderholdt-Elliot, 1999). Greenspon (2000) makes crystal clear his position as to the harm of perfectionism by referring to "healthy perfectionism" as an oxymoron.

The Pressures of Perfectionism

While the pressures of perfectionism may lead to high achievement motivation, they may also lead to underachievement. In important ways, perfectionism is very different from the motivation for excellence. That dissimilarity prevents perfectionistic children from ever feeling good enough about themselves unless they're the best and precludes their taking risks when they fear the results will not be perfect. They may procrastinate or feel anxious and fearful when they believe they cannot meet their high standards. They may experience stomachaches, headaches, and depression when they worry that they will make mistakes or perform less well than their perfect expectations. Sometimes they avoid accomplishing the most basic work and make excuses and blame others for their problems. They may even become defiant and rebellious to hide their feelings of failure.

Some children may only be specifically or partially perfectionistic. For example, some are perfectionistic about their grades and intellectual abilities; others may be perfectionistic about their clothes and their appearance; some are perfectionistic about their athletic prowess or their musical or artistic talent; some are perfectionistic about their room organization and cleanliness; and some children are perfectionistic in two or three areas, although there are some areas that apparently don't pressure or bother them at all. Those children who have not generalized perfectionism to all parts of their

lives are more likely to be healthy perfectionists.

How Perfectionism Affects Others

Unhealthy perfectionism not only affects the perfectionist, but also affects those around them. In their efforts to feel very good about themselves, perfectionists may unconsciously cause others to feel less good. Spouses, siblings, or friends of perfectionists may feel angry, oppositional and never good enough; although they may not understand their own irrational feelings. Sometimes family members feel depressed and inadequate because they can't ever measure up to the incredibly high standards of their family perfectionist. Often times, there is an underachiever in the family to balance out the perfectionist. The underachiever feels like they can never do as well as their perfect sibling so they say to themselves, "Why try?" (Rimm, 1995).

In order for perfectionists to maintain their perfect status, they may unconsciously put others down, and point out how imperfect they are, sometimes in a very "nice" way. For example, perfect sister Sally may say, "I don't understand why my brother isn't even trying to do his homework." Giving others continuous unsolicited advice seems to reassure perfectionists of how knowledgeable they are. They are so determined to be perfect that causing others to feel bad has an unconsciously confirming effect on their needy sense of self. The perfectionistic spouse, in his or her effort to feel best, may also cause his or her partner to feel inadequate or less good; the perfectionistic parent may make the other parent feel continuously inadequate in his or her parenting skill. It is almost as if there is a competition about who can be the "most good."

What Causes Perfectionism?

The pressures children feel to be perfect may originate from extreme praise they hear from the adults in their environment. The pressures may also come from watching their parents model perfectionistic characteristics, or they may simply stem from their own continuously successful experiences, which they then feel they must live up to. An easy curriculum for gifted students is often to blame for not providing opportunity for error or effort (Neumeister, 2005), thus perpetuating perfectionism (Rimm, 1995).

Some activities like ballet, gymnastics, figure skating, and music emphasize perfect performance, and children who engage in such activities strive to meet the high standards expected of them. This may be healthy, or children may generalize these expectations of perfection to other parts of their lives, and perfectionism may then become unhealthy and dissatisfying (Rimm and Rimm-Kaufman, 2001).

In the See Jane Win study of the childhoods of more than 1,000 successful women (Rimm, Rimm-Kaufman, and Rimm, 1999), the authors found that 30 % of the women viewed themselves as perfectionistic in high school. For the most part, they considered their perfectionism positive. Approximately half of the women acknowledged they felt pressured, but they typically liked feeling that pressure and considered it to be a personal pressure.

There were some exceptions. For example, television news anchor Donna Draves quit many childhood activities shortly after starting them. She would tell her parents that the activity was "boring". (That may sound familiar to educators) Donna admitted that she would drop out if

she was not "best" in the activity. She would never attempt activities like sports and math because she considered her brother "best" at those. Fortunately, she was "best" at speech, and she carried excellence in speech to her career. Donna's perfectionism even affected her eating habits. Although she was a size three, she continuously compared herself to two other girls in her class who were "skinnier" than she. She felt unattractive unless she was the thinnest. Donna is successful today, but the near pitfalls of perfectionism could have easily derailed her and prevented her from "making the mark" she so wished to make.

Gender Differences in Perfectionism

Perfectionism is usually considered more typical of girls than boys, but that conclusion seems to vary somewhat depending on the research. In a study of 5,400 middle school students 13% of third grade girls considered themselves perfectionistic and that percentage increased with each grade, so that by eighth grade 32% of the girls checked that description of themselves. For boys, percentages were much lower at each grade level and varied from 11% to only 17% by eighth grade, which was about half the percentage of the girls (Rimm, 2005). Bellamy (1993), Baker (1996) and Kline and Short (1991) also found more female perfectionists in their studies, but no gender differences were found by Schuler (1999) in her study of perfectionism among gifted, rural middle schoolers.

Parker (2000) found some components of perfectionism in middle school students were higher for boys than girls, while others, like organization, were higher for girls. Overall, differences in perfectionism between genders were not statistically significant.

Perfectionism Among Gifted Students

It has long been assumed that gifted students are at risk of dealing with the unhealthy kind of perfectionism (DeLisle, 1986; Dixon and Scheckel, 1996; Goldberg and Adderholdt-Elliott, 1999; Rimm, 1986, 1995; Sigel, 1987; Silverman, 1993; Whitmore, 1980) and thus require special support for this potential problem. Despite that assumption, there is very little or no data that support perfectionism as being more of a problem for gifted students.

The landmark longitudinal study conducted by Terman (1925) found gifted students to be mainly emotionally healthy. Other researchers confirmed those findings (Gallucci, 1988; Richardson and Benbow, 1990). Parker and Mills (1996) compared 600 identified gifted sixth grade students to 418 in the same school who were not identified as gifted and found slightly more unhealthy perfectionism among those not in gifted programming. Siegle and Schuler (2000) studied 391 students in gifted and talented programs and found mainly healthy perfectionism. Schuler (1999) found 87.5% of gifted adolescents in accelerated courses to have perfectionistic tendencies, but most of those characteristics were healthy. In the Rimm (2005) middle school study, 22% of students in gifted programs compared to 16% of regular program students indicated perfectionism. Twice the percentage of students who considered themselves far above average in intelligence considered themselves perfectionistic compared to those who described their intelligence as far below average (28% compared to 14%).

There are two great fallacies in concluding that perfectionism is not a problem for gifted children from research based on students who are identified as

gifted. The first is that children with unhealthy perfectionism are often eliminated from gifted programming because of their underachievement problems. Perfectionism interferes dramatically with motivation, and unmotivated gifted students are often assumed not to be gifted. The second problem with such a conclusion is that children with apparently healthy perfectionistic tendencies are at risk of regressing to unhealthy perfectionism when the curriculum becomes more challenging or when faced with greater competition.

Samples of children who attend a psychologist's clinic are also biased in that children are referred by parents and teachers who identify problems. While clinical examples cannot be used to quantify the extent to which gifted children suffer from unhealthy perfectionism, these case studies can be used to verify that perfectionism causes great problems for many gifted students and should be addressed.

Case Study Examples of Prevention and Correction of Perfectionism from the Family Achievement Clinic

The first two case studies represent students where perfectionism was addressed early and apparently successfully. In the latter two, perfectionism was discovered later and was much more difficult to address.

Preschooler

Gifted preschooler Charles read at the fourth grade level and did math at second grade level, but struggled with printing, cutting, coloring and fine motor skills. His quick temper, when frustrated at home, captured his parents' attention and resulted in power

struggles. At school, his frustrations were expressed in frequent tearfulness. In the clinician's office, Charles demonstrated his perfectionism when asked to draw a picture of his family. He executed it quickly and carefully and discovered that he had run out of space without putting his sister in the picture. His response was an angry crinkling of his drawing and the beginnings of tears until the psychologist suggested he continue his family on a second piece of paper, which he then happily completed.

The background for Charles' perfectionism was that he was a long-awaited first child and first grandchild surrounded by adults who praised him frequently for his brilliance. He learned everything quickly except for small-muscle coordination tasks, so he avoided them. His entrance to school was paired with the arrival of his new sister. In school, little attention was paid to his intellectual strengths, but his problem areas received many corrections. At home, his busy parents had less time to listen to his reading and math facts, and he had to share attention with an adorable new baby.

The treatment of his problem involved curriculum adjustment for reading in school by permitting him to spend some time reading to the other children. Praise words at home were modified and directed to process, so instead of brilliant, he was told he was a good thinker and problem solver. Parents learned to make comments about his persistence when he worked hard, demonstrated patience and persisted. They spent some time alone with him drawing, completing dot-to-dot pictures, coloring and doing mazes together to help him with his coordination skills. His parents encouraged him to solve his own problems, instead of coming to his rescue and this assisted him in feeling he could learn from his mistakes. He

showed rapid improvement.

Kindergartener

Another example of preventing perfectionism in a gifted child was Robert. Robert's profoundly gifted IQ test score encouraged the psychologist to arrange for a grade skip from kindergarten to second grade. First grade is rarely considered a good grade to skip and as usual, the principal was fearful that Robert wouldn't adjust socially. The psychologist was able to convince the principal, based on Robert's extraordinarily high IQ and achievement test scores. The purpose of encouraging the grade skip was to provide reasonable challenge to prevent perfectionism. Robert's parents followed other suggestions related to not overpraising, providing opportunities to develop other talents and skills, encouraging normal play and sports involvement and to teaching competition skills. Robert made an excellent adjustment to second grade and beyond. When Robert entered middle school, his mother contacted the clinic because he was experiencing stomachaches. The psychologist met with him, and he expressed anxiety about traveling between classes and being on time. Otherwise, he seemed reasonably happy, both academically and socially. Later that year, the television program *20/20* asked the clinic to put together a program on perfectionism. The host, John Stoessel, interviewed Robert and asked about his stomachaches. Robert surprised all by explaining that he was a little worried about his grades, which had fallen from the typical 99's and 100's to occasional 96's or 97's.

After a few additional sessions with Robert, his stomachaches disappeared. Ten years later, *20/20* chose Family Achievement Clinic to do another show on the

perfectionism. They searched for Robert and discovered that he was a pre-medical student at the University of Wisconsin-Madison. When John Stoessel interviewed him this time, he asked if he remembered his perfectionism problems and if his therapy had helped him. Robert said he thought the therapy had helped him and that he recalled his parents getting him involved in sports where he was only an average player. Thus, he learned to participate in skills where he wasn't as proficient. Robert concluded his interview by saying that because he was a pre-medical student, perfectionism was actually a handy habit to have.

High School Senior

Rebecca came to the clinic after her junior year in high school. Her school history showed her to be a perfect A student throughout elementary school. In middle school she earned her first few B's. She ended her freshman year in high school with a 3.7 average. During her sophomore year, she studied less and occasionally missed assignments. Her grade point average decreased further. Her second semester junior grade point average was .3. With F's on her report card, a four-year college might not be an option for Rebecca. Rebecca's peer group had changed from students who were planning to attend college to those who might never attend. Rebecca had earned an A for a make-up, summer-school math class just before she came to the clinic.

Rebecca's perfectionism at home had caused problems for many years. A first child, first grandchild, and first niece, she was initially the designated "queen." Rebecca was not happy about the eventual addition of three brothers whom she bossed mercilessly. Temper tantrums were common when plans didn't work as Rebecca wanted

them to, and her tantrums were effective for many years in giving her control of the household. She manipulated her father against her mother, causing her mother to feel powerless as Rebecca and her dad blamed Mother for being too controlling.

Rebecca did not want to see a therapist, was angry, oppositional and not forthcoming in answers about her dilemma. When asked whether her concern that she couldn't get A's had caused her to stop doing her work, she admitted that had happened in her sophomore year, but denied it was continuing to affect her now. She claimed she was confident that she could again earn grades to get her into college; although she had no idea about what she'd like to do as a career. She told the therapist that she'd like most to be "a good person" and that was her only important goal. She was furious at her parents and her brothers for just about everything and angry at her teachers as well. She claimed she didn't do her schoolwork because she "just didn't feel like it." She denied use of alcohol or drugs, but she did not make eye contact with the therapist as she voiced that denial. When asked what she might wish for if her therapist were a fairy godmother and could grant her three wishes, her first wish was to be able to control all people, her second for a million dollars and her third for a guaranteed successful career.

While Rebecca's struggle with perfectionism is clear from a few of her hints, if she's already become involved with alcohol and drugs, the likelihood for turn around diminishes. If she's only experimented and can be motivated to raise her grades for college admission, there may be a chance of motivating her to achieve again. Once she's successful, she's even likely to enjoy her family more. The therapist will probably work with her parents at first because Rebecca is so oppositional. When

Rebecca starts to feel successful, she may be willing to talk with some insight about her perfectionism—how it controls her life and how she can use it, moderate it and again achieve. Finding an interest in which she can become truly engaged is an important part of the solution as are her peer relationships.

College Dropout

A final case example is a college student whose perfectionism was not as extreme or obvious at home or school until college. As a profoundly gifted child, he was accelerated several times and was indeed viewed by most as a wonder child. He only received A's on his report card, was responsible, although somewhat disorganized, and was definitely not perfectionistic about organization. His perfectionism showed itself to a small degree in his habit of arguing until he won and never asking for help, but even those characteristics were possible to live with. He had a good family life and entered into a highly competitive, small college. He maintained reasonable, but not perfect, grades in college through two and a half years. In the second semester of his junior year, he stopped attending a class, which he would have to make up or fail. Everything fell apart in his senior year, although he told his parents nothing about his disaster. They had planned to attend graduation only to find that he had lied to them and wasn't graduating. His inability to ask for help from anyone was at the root of his perfectionism. When you're expected to be a wonder child, how can you admit to having problems? Presently, the young man is working to earn the money to pay his tuition, room and board because he hopes he'll eventually be able to complete his degree. In his case, it's likely he'll succeed, and he is getting psychological help in order to deal with his perfectionism.

Perfectionism and Underachievement

Perfectionism is so closely tied to excellence, and high achievement is so tied to underachievement that it is difficult to determine when the healthy achievement will become underachievement and the healthy excellence, neurotic perfectionism. Because students always measure their accomplishments compared to those of other students, learning to cope with competition is extremely important for accomplishment. "Perfect" to many young people means the best comparative performance, instead of the best they can accomplish. Without that comparative success, they don't feel successful at all, become depressed, feel physical symptoms, underachieve or give up entirely on productive work. Although it is difficult to estimate with quantitative accuracy of the number of perfectionists that require help, it is absolutely clear that perfectionism is a serious issue for many gifted students.

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