

Running Head: Perfectionism

PERFECTIONISM IN GIFTED STUDENTS: A NEED FOR AFFECTIVE SERVICES
IN GIFTED PROGRAMMING

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PERFECTIONISM IN GIFTED STUDENTS: A NEED FOR AFFECTIVE SERVICES
IN GIFTED PROGRAMMING

by

Kimberley A. Thoresen

Approved July 2009 by

Carol L. Tieso, Ph.D.

Chairperson of Master's Committee

Joyce VanTassel-Baska, Ed.D.

Kimberley Chandler, Ph.D.

Lori Bland, Ph.D.

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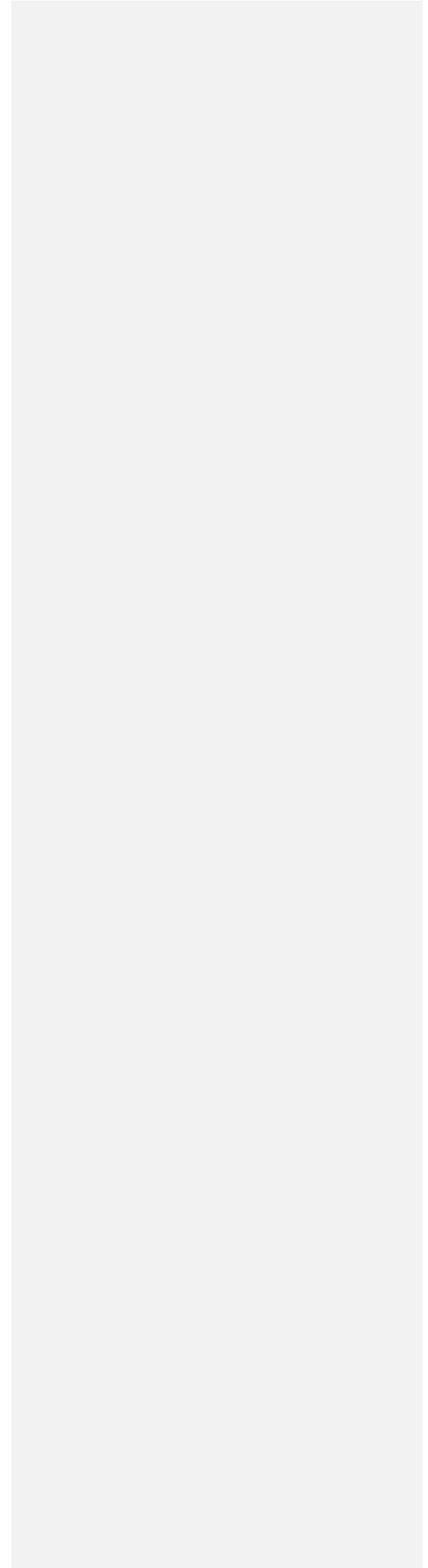
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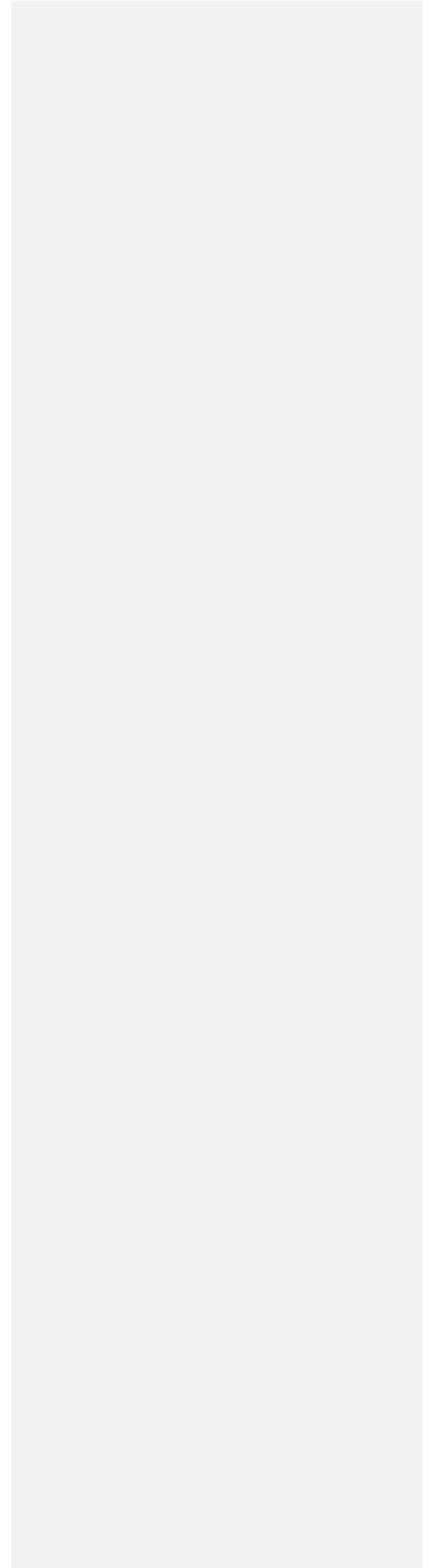
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Abstract

Perfectionism is a commonly identified trait of the gifted. This literature review examines the existing research on perfectionism within the gifted population. Most researchers have come to believe that perfectionism exists on a continuum with both healthy (normal) and unhealthy (neurotic) forms. With the possibility of students developing unhealthy perfectionistic tendencies, it remains crucial for educators and researchers to recognize the negative impact perfectionism can have on students' health. Due to the health impacts and negative coping strategies associated with perfectionism, it is imperative that researchers and educators work to implement services to target negative perfectionism while encouraging positive perfectionism. In addition to examining the current empirical research findings, this literature review also reveals various strategies that can be used to target perfectionism. These strategies include goal setting, bibliotherapy, biography studies, cinematherapy, discussion groups, and improvisational theater. Despite the intervention recommendations provided by educational theorists, there is a lack of empirical evidence supporting their use with perfectionism. Therefore, areas for future research and recommendations for parents and educators are suggested.

Chapter I

Introduction of topic

As early as the 1920s, with the work of Leta Stetter Hollingworth with highly gifted students, suggestions were made that gifted individuals are more at risk for social and emotional adjustment difficulties (Baldwin & Vialle, 1999). Hollingworth recognized the unique emotional needs of the gifted population. Still today, little has been done in the way of providing social and emotional support for gifted students in the public school setting. As a result, a plethora of emotional factors continue to put children at risk of becoming either highly stressed achieving gifted students or underachievers.

Perfectionism is one of the documented characteristics and risk factors that impacts gifted and academically talented students as well as their general cohort of peers. Many researchers see perfectionism as a negative attribute that impacts gifted individuals. One reason for this is that, with perfectionist tendencies, “it is not always easy to distinguish between a focused and committed striving toward excellence and the obsessive and destructive pursuit of a standard that does not exist” (Parker & Adkins, 1995).

Perfectionism has been cited as a major counseling focus for gifted children and adolescents (Adderholdt-Elliott & Eller, 1989; Kerr, 1994; Schuler, 2000; Silverman, 1999).

Statement of the problem/need

Perfection is a word that represents an unachievable ideal. It is a word that causes insurmountable problems for students throughout their education. Perfectionism, a daunting characteristic in the education field, stems from the efforts of students to reach perfection. The word *perfectionism* refers to having high standards, a desire to achieve,

conscientiousness, or high levels of responsibility (Parker & Mills, 1996). Perfectionism can become a problem when it “frustrates and inhibits achievement” (p. 194). With high stakes testing and competition driving students to reach the top of the mountain before anyone else in their class, it is evident that students face issues of stress associated with their success in school. Gifted students who receive high grades in unchallenging courses do not develop the abilities to set realistic and reachable goals; instead they focus on attaining perfect scores on assignments (Speirs Neumeister, 2004). Then, when the work becomes more challenging, students become obsessed with the outcome performance goals. They stress over scoring perfectly on a test or project; earning an A or receiving full points on an assignment begins to take precedent over the actual process of learning (Adderholdt & Goldberg, 1999). Without effective coping strategies in place, when challenged, students may begin to underachieve. They procrastinate and forgo putting effort into their project; they do not even attempt to succeed (Foster, 2007). Additionally, numerous researchers have cited studies that link perfectionism with various health problems (Dixon, Lapsley, & Hanchon, 2004; Flett & Hewitt, 2002; Greenspan, 2000; Leman, 2007; Mendaglio, 2007; Nugent, 2000; Parker, 2000; Parker & Adkins, 1995; Parker & Mills, 1996; Pyryt, 2004; Pyryt, 2007; Ramsey & Ramsey, 2007; Rimm, 2007; Silverman, 2007; Speirs Neumeister, 2004). Without the help of educators and counselors in working with students to prevent and counteract the problems created by their perfectionism, students are left to cope with their problems on their own.

Brief review of relevant literature

According to one estimate, half the population of America has perfectionist tendencies (Adderholdt-Elliot, 1987). “Perfectionism is a combination of thoughts and

behaviors associated with excessively high standards or expectations for one's own performance and is recognized as a common emotional trait of giftedness" (NAGC, 2008). According to Hess (1994) perfectionists are often very likely to be gifted individuals because they are accustomed to success and afraid of failure, largely due to their lack of experience with failure.

The good news is that not all perfectionism is considered negative and unhealthy by researchers. Some researchers in the field assert that children with perfectionistic qualities are faced with a double-edged sword that can manifest itself either in a healthy or unhealthy manner (Adelson, 2007). Many researchers view perfectionism as existing on a continuum from normal to neurotic (Schuler, 2000; Silverman, 1999). Schuler (2000) found that gifted adolescents exhibited various degrees of perfectionism and that the dimension of perfectionism displayed varied based on the continuum.

Healthy or normal perfectionism is considered to be a positive characteristic that helps drive individuals' efforts and accomplishments. The healthy manifestation of perfectionism is viewed as striving for excellence. Healthy perfectionism has a positive association with many admirable characteristics including high personal standards, high self-esteem, order and organization, and high grade point average (Parker, 2000). According to the National Association for Gifted Children (NAGC), since healthy perfectionists are organized and conscientious, they are able to excel at leadership in a group setting, complete more advanced coursework than their peers, and set goals for coursework and grades that aid in their future plans for college and careers (NAGC, 2008).

However, other researchers view perfectionism as negative by definition.

Greenspan (2000) suggests that the very idea of “healthy perfectionism” is an oxymoron. According to some researchers, like Greenspan, perfectionism is always negative because of its emotional and interpersonal effects. Some of the qualities of perfectionism exhibited in an unhealthy way may result in procrastination, avoidance, anxiety, a self-defeated attitude, and underachievement (Adelson, 2007).

The incidence of perfectionism in the gifted population is one topic that is continually debated, with some researchers revealing significant results indicating gifted students had more perfectionistic tendencies than their general education peers. Baker’s (1996) research found that gifted students are stressed by perfectionism more than others. However, other researchers have not found significant differences between gifted students and the general cohort (Parker & Mills, 1996; Pyryt, 2004).

According to NAGC (2008), three contributing factors to unhealthy perfectionism are the child’s desire to please others, the child facing easy success at a young age, and the child facing difficulty setting realistic goals. Many perfectionistic gifted adolescents are distressed by their own and others’ expectations. They set very high standards for themselves, and experience intense guilt and frustration when they make mistakes or fail to meet those self-imposed standards.

In 1989, Hostettler (as cited in Davis & Rimm, 2004) described the relationship between perfectionistic habits acquired in elementary school and high school underachievement. Hostettler concluded that the students’ “high grades coupled with superlative feedback led to perfectionistic self-expectations” (as cited in Davis & Rimm, 2004, p. 313). Parents may call their children, “genius,” “Einstein,” or “perfect” and

create pressure on their children to succeed in order to hear these praises (p. 434). Students then internalize these designations and begin to feel that it is an accurate self-definition. When students are then unable to perform perfectly, they feel guilty, frustrated, depressed, and have a lowered self concept (Davis & Rimm, 2004). Hostettler also found that these students had a late onset of underachievement because they do well when the curriculum is easy but become underachievers when the work becomes difficult, typically in secondary school (Davis & Rimm, 2004).

Despite the negative impact of perfectionism, it is important for parents and teachers to realize that perfectionism does not have to impact an individual in every aspect of ~~their~~her life. The perfectionistic tendencies may exist in specific areas; individuals may be perfectionistic about grades, clothes and appearances, room organization and cleanliness, athletic abilities, or music and artistic talent (Rimm, 2007). According to Rimm (2007), these specifically- or partially- perfectionistic students are more likely to be healthy perfectionists.

Despite the fact that healthy perfectionism has been linked to a striving toward excellence, perfectionism has been linked to a number of problems. According to Baker (1996), perfectionism is something to worry about in the clinical sense when it prohibits students from appreciating their abilities and the adequacy of their work. Hess (1994) discussed that perfectionism can lead the gifted child to procrastinate, to avoid new experiences, or to turn into workaholics. Additionally, various health issues have been connected to perfectionism. Some health problems researchers have linked with perfectionism include abdominal pain, alcoholism, depression, anorexia nervosa, bulimia,

obsessive-compulsive disorders, migraines, panic disorders, and even suicide (Baldwin & Vialle, 1999; Parker & Mills, 1996; Pyryt, 2004).

In order to help individuals understand and cope with their perfectionism, various strategies can be employed in the school setting and at home. Schuler (1999) and Pyryt (2004) suggest that in order to cope effectively with perfectionism, individuals must internalize new thought patterns about their achievements. Parents and teachers play a crucial role in helping students recognize irrational expectations, set realistic goals, plan and monitor a project, and enjoy extra-curricular interests (Pyryt, 2004). Parents and teachers must also help students overcome their fear of failure by allowing students to experience activities that they are not going to be the best at (Kerr, 1994).

As an educator, developing a safe classroom environment that encourages risk taking is essential. “Children who exhibit perfectionism must feel support within the classroom” (Adelson, 2007). Two curricular strategies that educators can employ in the classroom to combat the problem of perfectionism include a writing process that involves editing, revisions, and open-ended approaches to assignments and the use of bibliotherapy (Halsted, 2002; VanTassel-Baska, 2003). The use of videotherapy and discussion groups can also help children recognize and talk about the perfectionistic characteristics that they view in a movie character and within themselves (Milne & Reis, 2000; Peterson, Betts, & Bradley, 2009).

At times the strategies suggested for parents and teachers to use to help children cope with perfectionism may not be enough. Professional counselors and psychologists can also play a role in helping students cope with and move beyond their negative

perfectionistic tendencies. Ultimately, the extent of strategies and interventions required to help a student will depend on the individual student's needs.

Since schools play a major role in students' lives for both cognitive and affective development, it is imperative that children receive services that target their affective development. Teachers and school counselors need to help students understand their social and emotional characteristics that can impact their ability to learn.

Application of study to existing concepts and/or practices in gifted education

Currently, local and state legislation for gifted programming delineate the types of programming options offered to gifted students. The services tend to focus almost exclusively on academic services in the areas of language arts and mathematics. Few educational programming options include the necessary services that focus on the social and emotional development and needs of gifted learners. Without such a focus, many students struggle to understand and cope with their gifted characteristics. In an effort to address this shortcoming, the following literature review works to discuss the effects of perfectionism on students and the need for the teaching of effective coping strategies by parents, teachers, and school counselors.

Limitations of the study

There are some limitations of this study based on the existing research on perfectionism. The research on perfectionism in gifted populations is mixed, with some researchers adopting a negative viewpoint of all perfectionism, while others believe that some perfectionism is healthy. The mixed definitions of perfectionism can result in misinterpretations of the same manifestation of the characteristics across research studies where different definitions of perfectionism have been established.

One limitation of the literature available on perfectionism is that perfectionism is associated with giftedness primarily through clinical observations and qualitative studies. The literature is heavily reliant on case studies. With case studies focusing on one participant or subject, the findings cannot be generalized to the entire gifted population.

Additionally, most of the samples represented in the empirical studies were convenience or volunteer samples, and some of the studies do not specify how the sample was generated. These non-random sampling techniques impact the validity of the research. With convenience and volunteer samples the generalizability of the significant statistical results is limited. Limited information provided on the demographics of the sample and a lack of diversity in the samples based on age, socioeconomic status, race, and region within studies, makes it difficult to conclude the true extent that perfectionism plagues the gifted population.

Another limitation of the empirical studies is that perfectionism scales rely on self-report data. This could be a limitation since students may respond to the scale in a socially desirable way, thus impacting the prevalence of negative or neurotic perfectionists in the samples. Additionally, the way in which students comprehend the items on the self-report task can influence the data clusters.

A final limitation of the literature review was that empirical studies were not available that focused on the interventions and coping strategies for perfectionism. Empirical research that focuses on targeting perfectionism with various strategies needs to be conducted. Right now, educational theorists' books and articles include strategies and interventions for the social and emotional needs of students, but little empirical data supports the use of the strategies to address perfectionism.

Delimitations

A parameter set by the researcher that limits the scope of the literature review is that it focuses almost exclusively on perfectionism. Although other social and emotional risks and problems impact gifted learners, this study does not address research conducted and the coping mechanisms for those strategies. Therefore the information provided within this literature review focuses on the factor of perfectionism. Articles and resources consulted for the study included *perfectionism* and *gifted* as keywords within database searches of scholarly journals and library catalogues.

Definitions of Terms

Clinical bibliotherapy – occurs in a clinical setting with a trained mental health

professional serving as facilitator. Designed to address the emotional problems and bring about changes in attitude and behavior (Halsted, 2002).

Developmental bibliotherapy – involves ordinary people who are facing a normal life

stage or transitional period meeting in a community setting (school or library) to discuss books related to the issues that concern them. It is used preventively as an attempt to anticipate and meet needs before they become problems (Halsted, 2002).

Discussion group – free interchange of thoughts and ideas where every participant is an

equally important member of the group.

Gifted and talented – The definition used in the U.S. Department of Education's

Elementary and Secondary Education Act;

The term gifted and talented, when used with respect to students, children, or youth, means students, children, or youth who give evidence of high achievement

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capability in areas such as intellectual, creative, artistic, or leadership capacity, or in specific academic fields, and who need services or activities not ordinarily provided by the school in order to fully develop those capabilities. (Sec. 9101)

Healthy (normal or positive) perfectionism – striving for reasonable and realistic standards that lead to self-satisfaction and enhanced self-esteem; a positive characteristic that drives high effort and accomplishment (Flett & Hewitt, 2002)

Neurotic (dysfunctional or negative) perfectionism – a pervasive and compulsive striving for excellence; provides little self satisfaction and leads to high self-criticism

Perfectionism – having high standards, a desire to achieve, conscientiousness, or high levels of responsibility; “a style involving the need to appear perfect or avoid appearing imperfect to others” (Flett & Hewitt, 2002, p. 14)

Underachievement – “a discrepancy between the child’s school performance and some index of his or her actual ability, such as intelligence, achievement, or creativity scores or observational data” (Davis & Rimm, 2004, p. 306).

Chapter II: Review of Research

Introduction

The following literature review works to provide insight into the research that exists on perfectionism within the gifted population. In order to measure something, researchers first must define it. This literature review works to provide a comprehensive review of the definitions of perfectionism used by various researchers, the types of self-report scales they used to identify perfectionism in students, the contributing factors for perfectionism, the prevalence in gifted students, differences in the types of perfectionism due to gender and birth order, health implications tied to perfectionism, and various strategies suggested by educators and counselors to use to decrease the negative impact of perfectionism.

Types of Perfectionism

Although perfectionism is recognized as a common characteristic of the gifted, a lack of consensus exists within the literature concerning the nature, definition, and types of perfectionism. Some view perfectionism as dichotomous, others see it solely as negative, while still others view it as existing on a continuum. With the mixed definitions of perfectionism, individuals working to help address the social and emotional needs of gifted students must be provided with characteristics of perfectionism and empirical findings. It is imperative that parents and teachers understand what types of perfectionism exist, help students recognize both the positive and negative qualities of perfectionism, and provide them with strategies to cope with the negative aspects of perfectionism.

Researchers like Hamachek believe that there are two types of perfectionism, normal and neurotic (Mendaglio, 2007; Parker & Mills, 1996). “Perfectionism has one

face with the potential for propelling an individual toward unparalleled greatness and the other with the power to immobilize” (Silverman, 2007, p. 234). Normal perfectionism is a desirable trait that is a healthy component of the need for achievement. It helps drive individuals’ effort and accomplishments and involves a realistic striving for excellence (Chan, 2007b).

The healthy manifestation of perfectionism is viewed as a striving for excellence. Healthy perfectionism has positive associations with many admirable characteristics including high personal standards, high self-esteem, order and organization, and high grade point averages (Schuler, 2000). According to Schuler (1999) students categorized as healthy perfectionists based on the Goal and Work Habits Survey (1994), have a strong need for order and organization; accept mistakes; enjoy the fact that their parents hold high expectations for them; and view effort as an important part of their perfectionism. Normal perfectionists are those who derive pleasure from striving for excellence but recognize their limitations (Nugent, 2000). They wish to do their best but do not have to be absolutely perfect. The “impeccable dresser,” “backpack organizer” and “persistent worker” are three categories used to describe fifth graders who exhibit positive perfectionistic tendencies (Pruett, 2004, p. 56). Healthy perfectionists are organized and conscientious, they are able to excel at leadership positions in a group setting, complete more advanced coursework than their peers, and set goals for coursework that aid in their future plans for college and careers (NAGC, 2008).

On the other hand, neurotic perfectionism is exhibited by individuals who are unable to experience pleasure as a result of their efforts because they never feel their work is good enough (Parker & Mills, 1996). Neurotic perfectionists are tense, confused,

anxious, and emotionally drained before beginning a new task (Schuler, 2000). The dichotomous relationship of normal and neurotic perfectionism leads some researchers in the field to assert that children with perfectionistic qualities are faced with a “double-edged sword” that can manifest itself either in a healthy or unhealthy manner (Adelson, 2007).

However, other researchers view perfectionism as completely negative by definition. Greenspan (2000) suggests that the very idea of “healthy perfectionism” is an oxymoron. According to some researchers, like Greenspan, perfectionism is always negative because of its emotional and interpersonal effects. Pacht and Burns (as cited in Mendaglio, 2007; Parker & Mills, 1996) both view perfectionism as a destructive pursuit of unattainable goals which creates and reinforces emotional turmoil within an individual. Perfectionists face a “no-win scenario” because their goals are set too high (Mendaglio, 2007, p. 223). They are unable to derive satisfaction from their efforts and focus their attention on their deficiencies (Mendaglio, 2007). Their self esteem is linked to accomplishments, the end results, and not on the process of doing the work itself (Piirto, 1999). Perfectionists do not believe in their own abilities and “fear being exposed as frauds or imposters” (Adderholdt & Goldberg, 1999, p. 4).

Many researchers view perfectionism as existing on a continuum from normal to neurotic. Schuler (2000) found that gifted adolescents exhibited various degrees of perfectionism and that the degree of perfectionism displayed existed on a continuum from normal to neurotic rather than a single dimension. Researchers have now come to believe that perfectionism is represented by a continuum of behaviors and thoughts and has positive or healthy and negative or unhealthy aspects (Schuler, 2000; Silverman, 1999).

Students who scored in the healthy/normal/adaptive perfectionistic range on the Multidimensional Scale and the Goals and Work Habits Survey (Schuler, 1994) typically displayed higher personal standards and greater organization than their nonperfectionistic and neurotic perfectionistic peers (Parker, 1997; Parker, 2000; Schuler, 2000; Siegle & Schuler, 2000). Healthy or normal perfectionists strive to achieve their personal best and use their organizational skills to avoid feeling stress (Schuler, 2000). Students scoring in the neurotic perfectionistic range tended to have a greater concern over mistakes, more doubts over actions, and a greater sense of discrepancy (Parker, 1997; Parker, 2000; Schuler, 2000). Based on Schuler's Goal and Work Habits Survey, dysfunctional perfectionists are anxious about making mistakes; hold extremely high standards for themselves; perceive others as having excessive expectations; question their own judgments; and exhibit a constant need for approval (Silverman, 2007). Dysfunctional perfectionists possess unrealistic expectations and are never satisfied with their performance (Nugent, 2007). Becoming fixated on not making mistakes, wishful thinking, replaying events in their minds, and dwelling on memories were some of the unhealthy strategies used by the neurotic perfectionists (Schuler, 2000). Perfectionists "remember past failures in explicit detail: a spelling word missed in second grade, or a comment made by a singing teacher in fourth grade" (Piiro, 1999, p. 485). Neurotic perfectionistic students also perceived parental expectations and parental criticism to be higher than did students in the other categories (Schuler, 2000).

The multidimensional construct of perfectionism recognized by many researchers focuses on the interpersonal and intrapersonal aspects of perfectionism. These dimensions include self-orientation (intrapersonal), other-orientation (interpersonal), and

socially prescribed (interpersonal) perfectionism (Flett & Hewitt, 2002; Prueitt, 2004). All of these forms are viewed as maladjustments and negative perfectionistic tendencies. Self-oriented perfectionists have high standards for themselves and evaluate their performance against these high personal standards (Speirs Neumeister, 2007). Self-oriented perfectionists exhibit strong motivations to be perfect, set and strive for unrealistic self-standards, and focus on flaws. They are characterized by their strong motivation to be perfect, setting and striving for unrealistic self-standards, and focusing on flaws (Siegle & Schuler, 2000). Other-oriented perfectionism involves similar behaviors that are directed toward others. Other-oriented perfectionists impose excessively high standards on others in their lives. They believe that their friends, parents, teachers, and siblings ought to be perfect (Adderholdt & Goldberg, 1999). Socially prescribed perfectionism entails the belief that others have perfectionistic expectations and motives for oneself. Socially prescribed perfectionists think that “significant others in their lives hold excessively high standards for them” (Speirs Neumeister, 2007, p. 260).

Parker (2007) identified three types of perfectionists using the Multidimensional Perfectionism Scale (Frost et al., 1990): dysfunctional perfectionists, healthy perfectionists, and nonperfectionists. Based on the personality inventories administered in the study, dysfunctional perfectionists tended to be socially detached, anxious, moody, hostile, and overly competitive (Parker, 2007). Healthy perfectionists were goal-oriented, socially at ease, well adjusted, agreeable and conscientious, while nonperfectionists showed narcissistic tendencies, were disorganized, undisciplined, and easily distracted (Parker, 2007).

Categories of perfectionism determined for a self-contained gifted classroom of fourth graders include a variety of manifestations of negative perfectionism (Adelson, 2007). These categories include the academic achiever; the risk evader; the aggravated accuracy assessor; the controlling image manager; and the procrastinating perfectionist (Adelson, 2007). The academic achiever is not satisfied with anything less than 100% correct, is never satisfied with the achievements and grades earned, and is rarely satisfied with his or her performance (Adelson, 2007). Risk evaders exhibit an “all or nothing” attitude, they are “plagued by the impact of asynchronous development or physical limitations” on their pursuits and will consequently avoid allowing their weaknesses to be exposed (Adelson, 2007, p. 16). The “aggravated accuracy assessor” focuses on the need for precision and exactness in their work (Adelson, 2007, p. 16). They will continuously redo the work, recopying pages of writing due to minute errors or redrawing a picture because some aspect does not meet their expectations (Adelson, 2007). Controlling image managers want others to regard them as perfect. If they think that they cannot meet the challenges in front of them, they will intentionally give up. This allows them to say that they “could have won” without having to admit that they did not (Adelson, 2007, p. 17). The final type of perfectionist defined by Adelson (2007) was the procrastinating perfectionist. These perfectionists become excited about a project and about sharing their ideas, but they are not as excited with actually getting started on the project. The fear of the project will not turn out in the way they have imagined it, and as a result they procrastinate. If they never do the project, they do not have to be disappointed that the final project did not turn out like they wanted it to (Adelson, 2007).

Perfectionism versus Striving for Excellence

Some researchers and theorists see perfectionism as a negative attribute. These individuals separate perfectionism from a healthy attitude of striving for excellence. They believe that there definite differences between the two groups.

Individuals who are perfectionistic chase perfection and are always reaching beyond their grasp; they set impossible goals. Perfectionists base their personal value on their accomplishments, their mentality is “they have to produce or else” (Leman, 1998, p. 118). They perceive that winning determines their self worth; resulting in the fact that winning is their only ambition. They often will throw up their hands in total defeat rather than try something if they cannot be perfect. Perfectionists “remember their mistakes and chew on them the way a dog gnaws on a bone” (Leman, 1998, p. 119). They fear and hate criticism and will either avoid it or ignore it in order to preserve their own self-image and self-concept. Perfectionists are “relentlessly driven toward impossible goals by their fear of failure and feelings of worthlessness” (Ramsey & Ramsey, 2007, p. 281).

Perfectionists are those who overwork, never feel confident, procrastinate, feel like failures when they do not get a perfect score, work alone because they do not trust anyone will do as good a job, avoid new experiences because they are afraid of making mistakes, and are resentful if their work is improved (Adderholdt & Goldberg, 1999). To a perfectionist, failure is an ultimate evil and it devastates them.

On the other hand, those who pursue excellence work hard, are confident, feel good with a score of 96, are willing to try new things, take risks, and learn from their experiences and mistakes (Adderholdt & Goldberg, 1999). An individual who is striving for excellence works to set achievable goals according to their high standards. They value

themselves for who they are as an individual, not for what they produce. Excellence seekers do not give up due to a setback or disappointment; they learn from their mistakes and keep moving toward their goals (Leman, 1998). They are happy with themselves, even if they do not win, as long as they know they have tried hard. Although they do not enjoy criticism, excellence seekers welcome it because it may help them improve.

Problems with perfectionism

Perfectionism becomes a problem when unattainable goals are set and the individual imposes unrealistic standards of superiority (Nugent, 2000). Many concerns and problems arise due to the characteristics of perfectionism. Some of the qualities of perfectionism exhibited in an unhealthy way may result in procrastination, avoidance, anxiety, a self-defeated attitude, and underachievement (Adelson, 2007). Loss of self-esteem, procrastination, underachievement, career indecisiveness, and emotional turmoil are all associated with perfectionism (Nugent, 2000). Some of the detrimental effects of perfectionism include burnout, having a need for control, not always enjoying what is happening, being critical of others, and being overwhelmed by time constraints.

Perfectionists live in constant anxiety about doing something incorrectly (Ramsey & Ramsey, 2007, p. 281). Perfectionistic tendencies make gifted individuals more vulnerable to underachievement because students fail to turn in assignments when they view their work as less than perfect (Pyryt, 2004). Since the students fail to turn in their work, they receive poor and even failing marks. Declining to do potentially challenging assignments and coursework or failing to complete projects by procrastinating are two protection mechanisms that perfectionists use to protect themselves from possible failure (Ramsey & Ramsey, 2007). Perfectionists put off even trying because they might fail.

“Then when they do the project at the last minute, they excuse the quality of the project, saying that if they had had more time, they would have done a better job” (Piirto, 1999, p. 485). Perfectionists often avoid projects that will require them to learn new skills and they will “avoid working with other people even though this might provide a rich learning environment” (Ramsey & Ramsey, 2007, p. 283). Another risk-avoidance strategy is chronic indecision. Because perfectionists worry about making the wrong decision, they tend to toss around all the options they have and ultimately are left “paralyzed by indecision” (Ramsey & Ramsey, 2007, p. 281).

Procrastination in beginning work that will be graded, long delays in task completion, and repeatedly feeling the need to start over are just a few of the symptoms associated with perfectionism (Foster, 2007). All of these behaviors lead to low productivity and can translate into low participation in classroom activities. This can compromise their learning because students are not able to learn from their mistakes (Foster, 2007). “Slobs and poor students are usually discouraged perfectionists who have given up trying because it hurts too much to fail” (Leman, 1998, p. 272).

“Telescopic thinking” is often used by perfectionists; they view unmet goals through the magnifying end making them appear larger than they really are. They use the minimizing end to view met goals, making their achievements appear insignificant (Adderholdt & Goldberg, 1999). Perfectionistic thinking leads to an individual focusing on unmet goals and challenges. The extreme focus on the hurdles that still exist prevent perfectionists from being able to savor successes (Pyryt, 2007).

Hamacheck (date) identified some overlapping behaviors associated with perfectionism that describe both normal and neurotic perfectionists include: depression, a

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nagging “I should feeling,” shame and guilt feelings, face-saving behavior, shyness and procrastination, and self-deprecation (Neihart, Reis, Robinson & Moon, 2002; Schuler, 2000). In terms of emotional stress, perfectionism has been linked to causing feelings of worthlessness and depression when gifted individuals fail to live up to the unrealistic expectations they have set (Pyryt, 2004).

Five characteristics that Adderholdt-Elliott (as cited in Davis & Rimm, 2004, p. 313) named as contributions to underachievement include procrastination, fear of failure, workaholicism, paralyzed perfectionism, and an all or nothing mindset. The all or nothing mindset leads students to believe that they are failures even for receiving just one B. The paralyzed perfectionism means that if there is some risk of failure, the student will not even attempt to do the activity (Adderholdt & Goldberg, 1999). Finally, perfectionists who are workaholics face the risk of burnout, depression, and a lost balance among school, friends, and family.

Because of their fear of appearing foolish or inadequate, perfectionists may have a disclosure phobia that causes them to resist sharing their inner thoughts and feelings (Burns, 1980). They often view love as conditional and dependent on performance level; consequently, they fear that error will lead to a loss of love (Peterson, 2008).

According to Leman (1998), budding perfectionists exhibit many characteristics that are easy to spot. They are the students who do not pass in completed assignments because they are not sure if it is done exactly right. They are the children who start a lot of projects and activities but never finish them. They are children who do not ever start a project or task because they are afraid of it. Additionally, according to Leman, they are often the children who have controlling, critical, or pushy parents.

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For a perfectionist, nothing is ever good enough and the task is never quite finished. These individuals face the constant cycle of perfectionism (Leman, 1998). They exhibit an “all or nothing” attitude toward their endeavors (Leman, 1998, p. 102). If a perfectionist is going to complete a task, then he or she is going to put all of his or her effort into ensuring it is completed to the best of his or her ability. Perfectionists believe that they can take on more than they actually can do, which leads to a downward spiral of panic over the obstacles that exist. As they begin to become overwhelmed by all of the tasks they have to complete, they still attempt to maximize successes and minimize failures. When failures occur, perfectionists internalize them and are not satisfied with something being done correctly, because they believe “It could have been better” (Leman, 1998, p. 103). If a perfectionist encounters too much pressure, they may quit the project and turn it in with an excuse that they did not have sufficient time (Leman, 1998).

Although not all gifted students exhibit negative or neurotic perfectionism, there is a risk that these children may regress to unhealthy perfectionism when the curriculum becomes more challenging or when faced with greater competition (Rimm, 2007). With the possibility of students developing unhealthy perfectionistic tendencies it is important that students receive services to address any negative or dysfunctional perfectionistic tendencies.

Measuring Perfectionism with Self-Report Scales

The definition of perfectionism has evolved over time and continues to be debated, and consequently so too have the instruments to measure it. According to Parker (1997), “constructs are often defined by the instruments used to measure them in empirical research” (p. 547). Most of the recent perfectionism scales were created for

Comment [CT3]: I would recommend adding a table that summarizes the instruments available for studying perfectionism.

college students and adults, so researchers have had to verify the appropriateness and reliability of their chosen instrument with sample populations. Most of the scales support the notion that perfectionism is a multidimensional construct with positive and negative aspects.

The Burns Perfectionism Scale (Burns, 1980) was used throughout the 1980s. It is unidimensional and focuses on maladaptive perfectionism. Specifically it focuses on self-defeating attitudes due to personal standards and concern over mistakes. It consists of 10 statements in which each participant is asked to indicate the degree to which he or she agrees or disagrees with a statement on a 5-point scale (Flett & Hewitt, 2002). The scale has reasonable internal consistency ($\alpha = .70$) and 2 month retest reliability of ($r = .63$).

Orange (1997) used a 30-item Perfectionism Quiz (Raudsepp, 1988) with a sample of 109 high school students who participated in a workshop on perfectionism at an honors conference in southwest Texas. The internal reliability for the Perfectionism Quiz is .85 (alpha). Scores on the quiz are categorized into four categories, from “easily adapts to new situations” to “obsessive-compulsive patterns are a problem,” with higher scores indicating a higher propensity toward obsessive-compulsive perfectionistic behavior (Orange, 1997).

The Multidimensional Perfectionism Scale (MPS) developed by Hewitt and Flett (1991) includes 45 self-report items using a 7-point Likert-type scale in which individuals indicate to what extent they agree with statements associated with perfectionism. It examines the interpersonal aspects of perfectionism and is designed to assess three types of perfectionism: socially prescribed perfectionism (“I feel that people are too demanding of me”); self-oriented perfectionism (“I must work to my full potential at all times”); and

other oriented perfectionism (“Everything that others do must be of top notch quality”) (Mendaglio, 2007, p. 227). Self-oriented perfectionism involves holding the self to perfectionistic standards, socially prescribed perfectionism involves the perception that others are demanding perfection of the self, and other-oriented perfectionism involves holding others to exaggerated and unrealistic standards (Dixon, Lapsley, & Hanchon, 2004). Hewitt and Flett (1991) demonstrated the internal consistency of the subscales to be moderately high ($\alpha = .86$ for self-oriented, $\alpha = .82$ for other-oriented perfectionism and $\alpha = .87$ for socially prescribed). Speirs Neumeister (2004) used the scale to find college students who were socially prescribed perfectionists and self-oriented perfectionists; she then determined the developmental themes that contributed to the students’ perfectionism. Speirs Neumeister and Finch (2006) used the scale in their study on the relationship between parenting style and attachment and its influences on achievement motivation in socially prescribed and self-oriented perfectionists.

Another scale, also called the Multidimensional Perfectionism Scale (FMPS) (Frost et al., 1990) is widely used in both psychology and gifted education (Dixon, Lapsley, & Hanchon, 2004; Mendaglio, 2007; Tsui & Mazzocco, 2007). In a study of 820 academically talented sixth graders, Parker (1997) utilized the FMPS as the primary instrument to measure perfectionism. The FMPS consists of 35 Likert-type items using a five-point scale, ranging from strongly disagree to strongly agree (Mendaglio, 2007). It examines the intrapersonal nature of perfectionism (Schuler, 2000). It includes six dimensions of perfectionism: concern over mistakes (“If I fail at work or school I am a failure as a person”); high personal standards (“If I do not set the highest standards for myself, I am likely to end up a second-rate person”); the perception of high parental

criticism (“As a child, I was punished for doing things less than perfect”); doubting the quality of one’s actions (“Even when I do things very carefully, I often feel that it is not quite right”); the perception of high parental expectations (“My parents set high standards for me”); and a high preference for order and organization (“Organization is very important to me”) (Mendaglio, 2007, p. 226). Frost et al. (1990) reported an internal reliability of .90 for the total score with college students, whereas Parker and Stumpf (1995) found a total score internal reliability of .87 with sixth graders, with the subscale reliability ranging from .67 to .90 (as cited in Parker, 2000).

The degrees of perfectionism identified by this scale include nonperfectionist, normal or healthy perfectionist, and neurotic or dysfunctional perfectionist (Schuler, 2000). The healthy or normal perfectionist typically has low concern over making mistakes, low doubts about actions, low levels of perceived parental criticism, the highest amount of organization, and a moderate total perfectionism score. The nonperfectionist has low scores on organization, personal standards, perceived parental expectations, and the total score. The dysfunctional or neurotic perfectionist scores the highest on concern over making mistakes, personal standards, parental expectations, doubts about actions, perceived parental criticism and the total score for perfectionism (Schuler, 2000). Dixon, Lapsley, and Hanchon (2004) utilized this scale in their research on the relationship between perfectionism and psychiatric symptomatology, adjustment, self-esteem, and coping of academically talented adolescents.

Schuler (2000) and Siegle and Schuler (2000) utilized the Goals and Work Habits Survey (Schuler, 1994), a 35-item adaptation of the FMPS to measure the factors that contribute to perfectionism in middle school students. The self-report survey has six

subareas identified by the scale which include concern over mistakes, organization, doubts about actions, personal standards, parental criticism, and parental expectations (Siegle & Schuler, 2000). An overall internal reliability of .90 for the total score with subtest reliability ranging from .67 to .90 was established (Parker, 2000). Based on the instrument, healthy and dysfunctional perfectionist categories emerged. Healthy perfectionists scored high on order and organization, while neurotic perfectionists scored high on the concern over making mistakes subscale (Schuler, 2000).

LoCicero and Ashby (2000) used the Almost Perfect Scale – Revised (APSR) (Stanley et al., 1996) in their study of 195 middle schools from states in the rural southeast. Vandiver and Worrell (2002) also used the Almost Perfect Scale – Revised in their study of 342 academically talented middle school students participating in a summer program at a research university. The scale contains 23 self-report items designed to measure adaptive and maladaptive components of perfectionism using a 7-point Likert scale (Mendaglio, 2007). Its three subscales measure personal standards (“I have high expectations for myself”); discrepancy between performance and standards (“I am not satisfied even when I know I have done my best”); and orderliness (“I am an orderly person”) (Mendaglio, 2007, p. 228). Internal consistency estimates for the subscale scores were in the high range across two independent samples: .83 and .85 for standards, .84 and .86 for order, and .92 for discrepancy (Vandiver & Worrell, 2002).

Chan (2009) used a 12-item Positive and Negative Perfectionism Scale with a study of 315 primary and secondary Chinese students. Six questions were written for positive perfectionism, with 3 self-oriented items and 3 other-oriented items. Six questions were written for negative perfectionism, with 3 self-oriented items and 3 other

Comment [CT4]: Subscales??? If so, capitalize each subscale title.

oriented items. Using a 5 point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree), students identified to what extent an item described themselves (Chan, 2007a). The scale had moderately high internal consistency for both the positive and negative perfectionism scales ($\alpha = .72$) (Chan, 2009).

These scales involve a self-report of characteristics associated with perfectionism, so researchers must be wary of the biases that can be introduced by these types of studies. Students may underrepresent their negative perfectionistic tendencies in order to appear healthier to the researchers. This is why it is important for parents and teachers to understand the various characteristics of perfectionism, that way they are able to recognize problems that may exist and help students seek help to address their problems.

Incidence in Gifted

Debate in the field of gifted education focuses on the incidence rate of perfectionism in the gifted population. Although perfectionism is recognized as a characteristic that impacts gifted students, research is mixed as to whether gifted students are more perfectionistic than non-gifted same-age peers.

The gifted sample in Terman's longitudinal study shared more perfectionistic tendencies than nongifted agemates (as cited in Siegle & Schuler, 2000). In Schuler's (1999) study of 112 gifted adolescents in 7th and 8th grade, 87.5% of the students showed strong tendencies toward perfectionism. Schuler's (2000) study of 112 rural 7th and 8th grade students from a Mid-Atlantic state who participated in accelerated math, science, and English courses, found that 87.5% of the students ($n=98$) had scores in the perfectionistic clusters, healthy and neurotic perfectionists, on the Goals and Work Habits Survey with 65 classified as normal perfectionists and 33 as neurotic perfectionists.

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Research by Roberts and Lovett found higher levels of perfectionism among gifted junior high school students than among nongifted academic achievers and nongifted students (Neumeister, 2007; Silverman, 2007). Kramer found greater degrees of perfectionism in gifted than in nongifted teens and Baker (1996) found higher levels of perfectionism in exceptionally gifted ninth grade girls than in girls of average ability (as cited in Silverman, 2007).

Additionally, research using the Almost Perfect Scale-Revised (Stanley et al., 1995) with 195 middle school students found no statistical difference between the gifted and general cohort by age and gender using *t*-tests (LoCicero & Ashby, 2000). However, two one-way analyses of variance were used to analyze the subscales of standards and discrepancy with gifted status. Gifted students had significantly higher scores on the standards scale and significantly lower scores on the discrepancy scale than the general cohort (LoCicero & Ashby, 2000). LoCicero and Ashby (2000) concluded that gifted students are more perfectionistic in adaptive ways (setting higher personal standards), while the general cohort are more perfectionistic in maladaptive ways (distress resulting from discrepancy). LoCicero and Ashby (2000) found that high-ability males were more prone to perfectionistic tendencies than average ability males. Their findings suggest that gifted students may be more perfectionistic in adaptive ways, with higher personal standards, than their general cohort peers (LoCicero & Ashby, 2000).

A study focused on perfectionism and goal orientations among Chinese students in Hong Kong revealed that the 315 primary and secondary students in the sample tended to endorse positive perfectionism more than negative perfectionism (Chan, 2009). Additionally, these students scored highly on learning and social goals (Chan, 2009).

Parker (1997) found that normal and neurotic perfectionism exists among academically talented sixth graders. The majority of the sample had scores in the two perfectionistic clusters, with 42% in the healthy perfectionist cluster and 27.8% in the dysfunctional perfectionistic cluster.

However, in a nationally gathered sample of sixth grade students of similar socioeconomic status, little difference was found between the gifted students and the general cohort using the Multidimensional Perfectionism Scale (Parker & Mills, 1996). Parker and Mills (1996) did not have statistically significant differences in the frequency of perfectionistic types between gifted students and the general cohort. Parker (2000) concluded that gifted students are no more likely to be perfectionistic than their nongifted peers and that the high standards that are associated with gifted students reflect healthy perfectionism.

According to Pyryt (2004), recent research suggests that the relationship between perfectionism and giftedness is not as strong as the gifted community believes. "Few differences were found between academic talent search participants and average-ability comparison groups" (Pyryt, 2004, p. 1).

Although debate exists regarding the extent to which perfectionism exists in the gifted population in comparison to the general population, the fact remains that perfectionism impacts both groups. Since unhealthy perfectionism often results in underachievement problems, it could be that the children who exhibit negative or dysfunctional perfectionism were not identified for gifted programming due to the underachievement. It is also difficult to access the true differences in incidences of

perfectionism between gifted and nongifted populations because many of the studies of gifted perfectionism do not incorporate a nongifted comparison group.

Gender Differences

In order to understand perfectionism and its manifestations in different populations, numerous researchers have also explored the possibility of gender-related differences in perfectionism. Perfectionism is usually considered more typical of girls than boys, but that conclusion seems to vary depending on the research.

Parker and Mills (1996) found statistically significant results based on gender, with females being more likely than males to be healthy perfectionists and males being more likely than females to be non-perfectionists. Parker and Mills (1996) found that some components of perfectionism in gifted middle school students were higher for boys than for girls. Boys scored higher on the concern over mistakes subscale, while girls scored higher on organization (Parker and Mills, 1996). Baker (1996) found that gifted females reported higher levels of perfectionism than gifted males.

Rimm's study (as cited in Rimm, 2007) of 5,400 gifted middle school students, 13% of third grade girls considered themselves perfectionistic and by eighth grade, 32% of the girls checked that description of themselves (p. 248). Whereas, for boys the percentages were much lower at each grade level and varied from 11% in third grade to 17% by eighth grade (as cited in Rimm, 2007).

A cluster analysis of the gifted 7th and 8th grade students' responses to the Goals and Work Habits Survey (Schuler, 1994) used by Schuler (2000) detected differences in the degree of perfectionism by gender. A greater percentage of males (64%) than females (36%) were categorized in the nonperfectionistic cluster. A greater percentage of females

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(68%) than males (32%) were in the normal perfectionistic cluster. Males (48%) and females (52%) were represented more equally in the neurotic perfectionistic cluster.

In Siegle and Schuler's study of 391 students in gifted and talented programs, females expressed more concern than males about organization, while males reported stronger parental expectations (2000). "It appears that parents place higher expectations on their sons than they do on their daughters" (Siegle & Schuler, 2000, p. 43).

In Chan's (2009) study, gender emerged as a significant predictor for negative perfectionists, suggesting that boys were more likely to be negative perfectionists, but the evidence for gender differences was relatively weak. Chan (2007b) found an overall gender main effect for perfectionism with girls having significantly higher ratings than boys on positive perfectionism.

Gender differences were not found in all studies. No gender differences were found by Schuler (1999) in her study of gifted rural middle schoolers. Additionally, in Chan (2007a) significant main effects on the perfectionism scale due to gender of the Chinese students did not emerge.

Gender expectations can impact how perfectionism plays out. ⁴⁴Traditionally, perfectionism in girls and young women could be seen in their striving for perfection in their appearance and in their relationships with family and friends. Perfectionism in boys and young men frequently has been linked to performance in school, the workplace, and athletics.²² (Adderholdt & Goldberg, 1999, p. 69): Parents and teachers need to ensure that they are encouraging students of both genders to set challenging goals for themselves. Girls receive mixed messages from society; they are encouraged to excel academically

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and athletically, but if they are too successful they may pay a penalty socially (Adderholdt & Goldberg, 1999).

Although research does not indicate that gifted girls are more likely than gifted boys to be negative perfectionists, it remains important for students to be given opportunities to learn about perfectionism and understand their social and emotional characteristics.

Birth Order

Beyond gender differences, researchers have also explored the possibility that birth order may be associated with the manifestation of perfectionism. According to Dr. Kevin Leman, psychologist and author of *The Birth Order Book: Why you are the way you are*, first born and only children are more prone to be perfectionists. These children receive extra attention or “overparenting” from their mothers and fathers, and the individualized attention allows them to walk and talk earlier than any other birth order (Leman, 1998, p. 273). They develop a larger vocabulary and are obedient precocious “little adults” who work to please their parents. Firstborn children spend more time around adults than children who come later; they learn adult vocabulary and “measure themselves according to adult standards of achievement” (Adderholdt & Goldberg, 1999, p. 9).

In the list of strengths and weaknesses of first borns, Leman identified perfectionism as both a strength and weakness (1998). One strength he identified based on perfectionistic traits was that individuals “always do things right and leave no stone unturned to do a thorough job” (Leman, 1998, p. 95). However, as a weakness, the perfectionism trait rears its ugly head because the first borns criticize themselves and

others too much; are never satisfied; and they procrastinate because they fear they cannot do a “good enough job” (p. 95).

Only children want things to be “just so” and when things do not go their way, they get “frustrated, antsy, and even angry” (Leman, 1998, p. 136). They can become impatient with or intolerant of people who do not live up to their high standards. They often fit the “discouraged perfectionist” personality type, in which the person thinks that he or she has to be perfect (Leman, 1998, p. 137). They are very structured, and set high standards for themselves and others.

Siegle and Schuler (2000) found that first born adolescents reported higher parental criticism and expectations than youngest children on two dimensions of the Multidimensional Perfectionism Scale. First born children were more likely to be identified as gifted and as healthy perfectionists in a study by Schuler (as cited in Siegle & Schuler, 2000). Parker (1997) found that first born and only children were more likely to be healthy perfectionists, while youngest children were disproportionately nonperfectionists and least likely to be dysfunctional perfectionists.

Of course, birth order is not a definite determining factor that perfectionism will develop. Other factors play a role in the development of perfectionist traits.

Contributing Factors

It is difficult to list the possible causes of unhealthy perfectionism since individuals react differently to the same conditions. However there are various contributing factors that can influence the development of unhealthy perfectionism. Family pressure, self-pressure, social pressure, media pressure, and unrealistic role models combine as contributing factors that propel some people into a lifetime of

working too hard toward unreachable goals and feeling guilty about not reaching the high expectations (Adderholdt & Goldberg, 1999). Other contributing factors include the individual's desire to please others, encountering easy successes at a young age, and having difficulty setting goals (NAGC, 2008).

With success coming easily to students at a young age, gifted students often have not encountered challenge and therefore do not learn how to bounce back when they face problems. Speirs Neumeister (2007) found that both self-oriented and socially prescribed perfectionists attributed a lack of challenge in their early academic environment as contributing to their later perfectionism. Schuler (2000) found that except for accelerated courses, 80% of the participants did not feel they were intellectually challenged in school.

As a consequence, most of the students spent time making the easy work perfect

(Schuler, 2000). Some of the participants in Speirs Neumeister's (2004) study "said they never experienced challenges in school until they reached their AP courses nearing the end of high school" (p. 267).

Davis and Rimm (2004) noted that gifted students may have pressures that arise from their family, their peers, or themselves for "perfect" work. For many, perfectionism is a learned behavior influenced by critical parents and teachers. Adults who verbalize comments such as "That's nice, what happened to the other 10%?" when a child does not achieve a perfect score impact children's self concept (Pyryt, 2004). Often times, well-meaning parents and friends will give advice to the perfectionists. Comments like "lighten up" and "just do your best" are meant to be encouraging, but to a perfectionist these comments can mean striving for an impossible "best" (Ramsey & Ramsey, 2007, p. 282). Comments like "don't be so hard on yourself" and "be happy with 90%" can be

Comment [CT7]: In what ways did this impact their perfectionism?

devastating to perfectionists who hold a strong set of beliefs focused on doing things perfectly (Ramsey & Ramsey, 2007, p. 283). “Telling a perfectionist not to be so hard on him- or herself may make logical sense; what he or she is likely to hear, however, is a criticism that he or she has not been a good enough perfectionist” (Greenspan, 2000, p. 11).

Parents play a major role in impacting the development of perfectionistic tendencies in their children. Parents of the gifted are often accused of “hothousing” their children so their children will achieve at exceptional levels at early ages (Neihart et al., 2002). They attempt to “give their children’s development a head start by providing them with extra stimulation and opportunities for learning skills ahead of other children” (Adderholdt & Goldberg, 1999, p. 10). Unrealistic parental expectations create pressure and foster performance anxiety in children (Parker, 2000). Parents who have a **learning goal orientation** encourage their children to understand the material, enjoy learning, and seek challenges, while parents who have performance goal orientations emphasize external indicators of success, such as grades and test scores (Parker, 2000). Students who exhibit strong desires to please others may become dependent on external motivators such as praises, prizes, and grades rather than on the pleasure and fulfillment of the job (NAGC, 2008).

According to Pruett (2004), the strongest influence of perfectionism for the fifth grade students surveyed was that of parental expectations. Research has shown that the authoritarian parenting style is seen more with neurotic perfectionism (Leman, 1998). Authoritarian parents are those who set rules for their children to follow and enforce

Comment [CT8]: If you’re going to discuss learning and performance goal orientation, you’ll need to introduce Dweck’s work.

these rules. These parents are seen as restrictive, punitive, and over-controlling (Flett, Hewitt, & Singer, 1995).

Perfectionistic parents may contribute to their children developing perfectionism when the students cannot measure up to the demands their parents have placed on them. Research by Schuler (2000) found that normal perfectionists perceived themselves to be more perfectionistic than their parents, while neurotic perfectionists perceived their parents as more perfectionistic. Rice, Ashby, and Preusser (1996) found that neurotic perfectionists viewed their parents as less encouraging, more demanding, and more critical than normal perfectionists.

A study of first year gifted college students in the honors program of a large southeastern university found that parental perfectionism and an authoritarian parenting style influenced the development of socially prescribed perfectionism (Speirs Neumeister, 2004). A link was also found between socially prescribed perfectionism in male college students and the authoritarian parenting style (Flett, Hewitt, & Singer, 1995). The authoritarian parenting style included “emphasizing obedience, trying to control their children’s behaviors with punitive threats, and restricting communication of love and support” (Speirs Neumeister, 2004, p. 263). These students perceived stringent expectations from their parents, had self-worth tied to achievement, and a fear of disappointing others (Speirs Neumeister, 2004). The belief that others held strong expectations for them led the students to fear disappointing others, which led them to strive for perfection to preserve their self worth (Speirs Neumeister, 2004).

Self-oriented perfectionism developed due to various factors including mastery of early academic experiences without effort and modeling of parental perfectionism (Speirs

Neumeister, 2004). The development of self-oriented perfectionism was attributed to early successes in school, modeling of perfectionistic behaviors by parents, and high self-standards (Speirs Neumeister, 2004). Self-oriented perfectionism was related to authoritative parenting for female college students in the same study (Flett, Hewitt, & Singer, 1995). Parents of self-oriented perfectionists demonstrated authoritative parenting, which involved parents setting realistic expectations, developing open lines of communication, and providing support when their children experienced failure (Speirs Neumeister, 2004). These parents often worried about their children's self-inflicted pressure and wanted to soothe their children's frustration (Speirs Neumeister, 2004).

“Although some perfectionistic parents may ‘infect’ their children, I believe that most of the time perfectionism in gifted children begins with a predisposition for fastidiousness, coupled with a learned fear of failure” (Kerr, 1994, p. 247). Silverman and Kerr both maintain that perfectionism is inborn in some individuals, and that the pressure of high standards comes from within the child (Neihart et al., 2002).

As a consequence of the unchallenging tasks from their earliest years, students become failure-avoidant (Neihart et al., 2002; Kerr, 1994).

Fear of failure is the result of lack of experience with failure. Many gifted children who have been unchallenged in school become addicted to the A's that come so easily. As the years go by with the straight A's piling up, many gifted children become more and more personally invested in maintaining these grades, which have become a part of their identity. These children will eventually avoid taking any course or participation in any activity in which they can't shine. (Kerr, 1994, p. 248)

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Additionally, the asynchronous or uneven development associated with gifted students impacts their perfectionistic tendencies. Gifted students set their standards according to their mental age, leading to incidences when they do not have the motor coordination or physical capabilities needed to meet their goals (Silverman, 2007). The uneven development often becomes a source of stress because these children lack the necessary social and emotional skills to accomplish some tasks (Orange, 1997).

Perfectionism has many contributing factors, including the influence of parents, teachers, and peers on the development of academic and social skills. In order for students to receive help in coping with their perfectionistic tendencies, parents and teachers need to help students understand the contributing factors.

Health Problems

Perfectionists drive themselves through stressful conditions in an attempt to maximize their performance; some forgo sleep and deny themselves leisure periods (Adderholdt & Goldberg, 1999; Ramsey & Ramsey, 2007). Due to these dramatic tendencies it would be unreasonable to talk about the impact of perfectionism on people without mentioning the various health problems that have been linked to perfectionistic tendencies.

The negative form of perfectionism is considered to be a pathology and is listed in the *Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV)* (American Psychiatric Association, 2000). Perfectionism is listed as a symptom of the obsessive compulsive personality disorder. It is the second of eight criteria for diagnosis of the disorder. In order to diagnose perfectionism, an individual shows “perfectionism that interferes with task completion (e.g., is unable to complete a project because his or

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her own overly strict standards are not met)” (American Psychiatric Association, 2000, p. 729). The perfectionism and high standards cause significant dysfunction and distress in the individuals. According to the DSM-IV, these individuals “may become so involved in making every detail of a project absolutely perfect that the project is never finished” (p. 725).

The perfectionist appears to be “vulnerable to a number of potentially serious mood disorders, including depression, performance anxiety, test anxiety, social anxiety, writer’s block, and obsessive-compulsive illness” (Burns, 1980, p. 34). Perfectionists may experience stomachaches, headaches, and depression “when they worry that they will make mistakes or perform less well than their perfect expectations” (Rimm, 2007, p. 247). “They are the worriers of life, the ones who develop colitis, ulcers, facial tics, and cluster headaches” (Leman, 2007, p. 115). Numerous articles cite studies that link perfectionism to abdominal pain, alcoholism, depression, anorexia nervosa, bulimia, obsessive-compulsive personality disorders, irritable bowel syndrome, ulcerative colitis, Type A coronary-prone behavior, insomnia, migraines, psychosomatic disorders, panic disorders, and suicide (Chan, 2007b; Parker, 2000; Parker & Adkins, 1995; Parker & Mills, 1996; Pyryt, 2005; 2007).

In a review of the literature, Pacht (as cited in Mendaglio, 2007, p. 224) extracted a lengthy list of side effects linked to perfectionism including “alcoholism, erectile dysfunction, Munchausen syndrome, irritable bowel syndrome, depression in children and adults, anorexia, obsessive compulsive personality disorders, abdominal pain in children, dysmorphobia, writer’s block, ulcerative colitis, chronic olfactory paranoid syndromes, and Type A coronary-prone behavior...” Mendaglio (2007) listed numerous

research studies that found links between perfectionism and other health problems, including anxiety disorders, eating disorders, suicide, and depression. Silverman (2007) lists the following health related issues as having been implicated with perfectionism: “stress-related ailments, anxiety, depression, anorexia, bulimia, workaholicism, sexual compulsions and dysfunctions, chemical abuse, Type A coronary-prone behavior, migraines, excessive cosmetic surgeries, suicide, psychosomatic disorders, obsessive-compulsive personality disorder, and a host of other disorders” (p. 235).

The type of perfectionism that a person exhibits may result in different health issues. Researchers have found correlations between self-oriented perfectionism and hypomania, depression, anxiety, and Type A personality (Spears Neumeister, 2004). Socially prescribed perfectionism has been found to relate to anxiety and dysthymia, learned helplessness, and Type A personality (Spears Neumeister, 2004).

Dixon, Lapsley, and Hanchon (2004) found that pervasive perfectionists and mixed-maladaptive perfectionists, those who have strong doubts about their abilities, respond negatively to mistakes, and have excessively critical parents with high expectations reported somatic complaints, obsessive-compulsive tendencies, depression, and anxiety. Constant hand-washing, house-cleaning, and mess straightening are examples of obsessive-compulsive tendencies (Dixon, Lapsley & Hanchon, 2004).

Eating disorders in some people may represent a perfectionistic attempt to make their body perfect by refusing to eat, by bulimic behavior, compulsive eating, or by using steroids (Adderholdt & Goldberg, 1999; Greenspan, 2000; Piirto, 1999). Eating disorders are common in academically talented youth who are interested in a field where their looks matter, such as dance, entertainment, and athletics (Adderholdt & Goldberg, 1999;

Piirto, 1999). The pursuits of a perfect diet, perfect exercise regime, perfect body shape, or perfect weight lead individuals to develop eating disorders (Flett & Hewitt, 2002). “Anorexia and bulimia have difficult and dangerous side effects, including hypothermia, dehydration, insomnia, constipation, hair loss, and unclear thinking” (Adderholdt & Goldberg, 1999, p. 37).

Recent studies on perfectionism in gifted students conclude that while many gifted students are perfectionists, they tend to have adaptive or healthy forms of perfectionism that stimulate high achievement, rather than the maladaptive forms associated with depression and suicide (Parker, 2000; Parker & Mills; Schuler, 2000). However, it remains important for educators to recognize the potential health problems that could develop as a result of perfectionistic tendencies that overwhelm a seemingly successful student.

Strategies to Cope

Although teachers are not able to diagnose the various disorders associated with perfectionism, some of their work in the classroom can help students understand and cope with perfectionism. Although empirical research has not been conducted to determine the effectiveness of the interventions used with perfectionists, numerous educational theorists have proposed strategies to address the negative aspects of perfectionism.

Chan (2007a) utilized a 16-item Chinese Ways of Coping Questionnaire to understand how students use four coping strategies: seeking support and ventilation, resigned distancing, rational problem solving, and passive wishful thinking. Active coping approaches include seeking support and ventilation and rational problem solving, while passive coping approaches include resigned distancing and passive wishful

thinking (Chan, 2007a). Students rated themselves on the 16-item questionnaire using a five-point scale based on the extent to which they used each coping strategy or activity. “Positive perfectionism was related more to active coping whereas negative perfectionism was more related to passive coping” (Chan, 2007a, p. 296).

With this in mind, it is important for children to work on easing up on themselves. Coping with perfectionism involves changing one’s thinking by internalizing new thoughts about achievements. Perfectionists fail to understand the pleasure of competition and of trying to do one’s own personal best. They need help setting goals that focus on striving for a standard based on personal performance, rather than on competition against others (Adelson, 2007).

Pyryt (2004) provides a variety of suggestions for parents to use to help students internalize healthy beliefs. The first suggestion is “Do not take it personally; grades and evaluations do not indicate a child’s self-worth (Pyryt, 2004p.). Students need help learning that the evaluation reflects the extent to which their work matches the criteria used for grading. The second suggestion is that students need help in deciding when to quit (Pyryt, 2004). This refers to recognizing limitations and working to monitor progress on an endeavor so that students are able to work through the steps of a project and complete it within the expected parameters. The third suggestion is to ensure that the time commitment to a task matches the value of the assignment (Pyryt, 2004). Parents can help students understand the weighting of assignments. This prioritization of focus will ensure that the most effort is put into the parts of assignments that count the most. The fourth suggestion is to set goals and focus on improvement (Pyryt, 2004). Parents can help students create goals, determine the steps needed to accomplish the goals, develop a plan

of action, and monitor the attainment of the goal. Pyryt (2004; 2007) uses the acronym SMART (Specific, Measurable, Achievable, Realistic, and Timeframe-provided) to assist in the goal setting process. The fifth suggestion provided by Pyryt (2004) involves studying the lives of eminent people, because gifted students can learn many lessons about the lives of eminent people through biography and autobiographies. The study of eminent individuals can help students realize that the path to success is not linear or easy, it involves effort and refinement, and failures that occur can lead to constructive development. Students can learn about the resiliency of eminent people, their ability to invest a great deal of effort, the revision/refinement process involved in their development, and their failures that allowed them to learn and continue in their field (Pyryt, 2007, p. 277). The final suggestion involves enjoying the journey of life, parents can help their children accomplish goals and savor the achievements. Hobbies, extra-curricular interests, and activities can also help students enjoy their life (Pyryt, 2004). “Whether it’s jogging or Tai Chi, playing bridge or solitaire, watching symphonies or rock bands, the active engagement in such pursuits can be psychologically and physically rewarding” (Pyryt, 2007, p. 278).

Burns (1980) suggests a step-by-step attitude retraining program when dealing with perfectionism. Listing the advantages and disadvantages of trying to be perfect is the first step in the program. Using a “Pleasure-Predicting Sheet,” individuals also assess how much enjoyment they think they will get out of the various activities they participate in throughout the day (Burns, 1980, p. 40). Many find that the activities that aren’t in their strength areas and do not result in perfect completion, result in greater pleasure. Another strategy that Burns suggests is to have perfectionists keep a daily written record

of their self-critical thoughts, this diary allows the individual to realize how often they make critical thoughts and provide reasons for why that thought was not appropriate.

Other strategies suggested by Adderholdt and Goldberg (1999) include relaxation therapy, reality therapy, group counseling, self-talk, and the use of mental imagery as ways to cope with perfectionism. They also suggest meditation, yoga, cooking, walking, listening to soothing music, and reading for pleasure as ways to reduce stress associated with perfectionism (Adderholdt & Goldberg, 1999). Foster (2007) recommends using metacognitive strategies to increase awareness and understanding of the characteristics associated with perfectionism. Through “reflection, involving such process as planning, self-monitoring, and self-assessment” students and adults are enabled to make changes (Foster, 2007, p. 268).

Parents and teachers can help perfectionists in a variety of ways. They can work to help students enjoy or at least tolerate imperfection by modeling humorous, tolerant responses to their own and others’ mistakes and messes; encouraging the perfectionist to be a slob once in awhile; and teaching the perfectionist compassion for those who could not possibly attain perfection even if they wanted to (Kerr, 1994). Adderholdt and Goldberg (1999) focus on the importance of using laughter to help relieve stress due to perfectionism. Additionally, Adderholdt and Goldberg suggest individuals get up and get out. Becoming active and finding activities that allow individuals to do something physical that sounds fun to them and allows them to relax and be themselves is another way to help alleviate stress associated with perfectionism (Adderholdt & Goldberg, 1999). Parents and teachers can also help perfectionists overcome fear of failure by allowing opportunities for the perfectionists to fail, or at least not be the best. “This may

mean encouraging art, music, or sports activities –whatever doesn't guarantee an A" (Kerr, 1994, p. 248).

Parents need to remember that they are role models, not their child's "sergeant or supervisor" (Leman, 1998, p. 285). Children need to have parents who understand the consequences of perfectionistic tendencies and who instill in their children that no one is perfect. Children need to see their parents make mistakes, so parents are encouraged by psychologist Dr. Kevin Leman to flaunt imperfections (Leman, 1998).

One thing parents can do is take the word *perfect* out of their vocabulary at home and at school. Telling a student that they completed the task *perfectly* or that they are *perfect* only works to reinforce the pressure toward perfectionism. Parents may believe that referring to their children's work as being perfect is a compliment; however, students often internalize the statement as an expectation that results in impossible pressure. Parents need to use modified praise words at home that are directed toward the process, rather than saying the child is "brilliant" or a "genius," parents should comment on how their child is a "good thinker" and "problem solver" (Rimm, 2007, p. 250).

Teachers and parents need to exhibit active listening techniques to encourage students to verbalize their concerns, show understanding for their concerns, and plan steps to address the issue (Nugent, 2000). Students need practice being good to themselves, accepting praise from others, and praising themselves. Adderholdt and Goldberg (1999) suggest students list major accomplishments they've made in their life, not including grade, awards, and recognitions. Then students should list the events in their life that give them the most pleasure (Adderholdt & Goldberg, 1999). "The events

we remember most clearly and fondly are often those that didn't take much time or effort" (Adderholdt & Goldberg, 1999, p. 96).

Parents and teachers can assist children in changing their achievement motivation from a fear of failure to a need for achievement (Speirs Neumeister & Finch, 2006). Teachers might provide students with opportunities to develop mastery goals by allowing them to work on interest-based projects (Speirs Neumeister & Finch, 2006). Evaluating a student based on progress rather than on a product is also a formidable option (Speirs Neumeister & Finch, 2006). Increasing the challenge level of classroom material can also help eliminate the development of perfectionism (Speirs Neumeister, 2007). Using curriculum compacting and differentiated instruction, teachers are able to help maintain a high level of challenge for their students. The "consistent use of rubrics is one way that teachers and parents can help children use evaluations as indicators of academic skills rather than threats to their self-worth" (Pyryt, 2007, p. 276). When students have an understanding of the criteria to be evaluated, some of their fear of failure may be alleviated (Nugent, 2000).

When working with perfectionists who have become procrastinators, it is important that parents and teachers help students create a plan for the task that breaks it into smaller segments with identified goals (Adelson, 2007). This provides students with a process to focus on and standards to meet along the way. Children need help setting specific short term goals (Foster, 2007).

Five steps to complete a project

1. Choose your focus.
2. Gather all the materials you need to get the job done.

3. Get organized.
4. Divide and conquer.
5. Do not stop until you have completed the first draft, the first run-through, the first read through. (Adderholdt & Goldberg, 1999, p. 83)

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In order to address gifted underachievement, some schools have established separate programs that target their abilities to achieve (Silverman, 2000). Suggested interventions for this gifted underachievers, who may be perfectionists avoiding failure, include: one-on-one counseling, conducting activities to build self esteem, analyzing major strengths and arranging participation in activities that build on them, helping the student set goals and initiate follow-through action, offering learning opportunities focused solely on interest, providing college and career guidance, providing real-world experiences in an area of potential career interest, setting up tutorials in areas of the curriculum where the students need assistance.²² (Silverman, 2000, p. 203):

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Adderholdt and Goldberg (1999) added 10 tips for procrastinators: ~~included in Adderholdt & Goldberg (1999):~~

1. Allow more time than you think a project will take.
2. Set realistic goals, but do not set them in stone. Stay flexible.
3. Break down big, intimidating projects into smaller, more manageable steps.
4. Start something right now instead of waiting until you feel thoroughly prepared.
5. Make a conscious effort to realize that your paper, project, or whatever cannot be perfect.
6. Begin your day with your most difficult task or the one you enjoy least.

7. Plan to have fun without feeling guilty.
8. Keep a diary of your progress.
9. Remove distractions from your workspace.
10. Keep a list of backup projects that you can do when you have time. (p. 26)

The following table lists the various classroom strategies and interventions to use in the classroom with various perfectionist categories.

Table 1

Encouraging Healthy Perfectionism in the Classroom

Type of Perfectionist	Action to Take in the Classroom
Academic Achievers	<ul style="list-style-type: none"> • Praise their efforts, emphasizing hard work rather than grades • Guide students in taking pride in the process and their efforts and using mistakes as learning experiences
Risk Evaders	<ul style="list-style-type: none"> • Develop a safe environment that encourages risk-taking • Emphasize process and revisions rather than end products • Encourage students to try experiences that are new, different, and challenging • Encourage students to view challenges as exciting
Aggravated Accuracy Assessors	<ul style="list-style-type: none"> • Recognize their standards as valuable and acceptable • Read and discuss stories of people who revised their works multiple times • Give students opportunities to critique another's work • Have students create "sloppy copies" and give them

opportunities to revise and produce finished products

Table 1 (continued).

Type of Perfectionist	Action to Take in the Classroom
Controlling Image	<ul style="list-style-type: none"> • Role-play so children understand others' feelings
Managers	<ul style="list-style-type: none"> • Read about and discuss losses in competitive situations • Have students set personal goals based on their own performance before a competition
Procrastinating Perfectionists	<ul style="list-style-type: none"> • Help students break larger tasks into smaller segments and goals • Have students develop a schedule with buffer time • Help students prioritize and recognize that they cannot be perfect at everything at every moment

Note. Adapted from Adelson, J. L. (2007). A 'perfect' case study: Perfectionism in academically talented fourth graders. *Gifted Child Today*, 30(4), 14-20.

In order to end the constant cycle of perfectionism, individuals can try these tips to avoid burnout. The tips for avoiding burnout include:

1. Learn how to say no. Give yourself permission to stop doing something you do only to please someone else.
2. Learn when to say yes. Not to more work, not to another competition, but to something personally rewarding.

3. Start prioritizing your activities. Space them out more efficiently. Make a list of your activities and try to eliminate the activities with the lowest priorities.

(Adderholdt & Goldberg, 1999, pp. 76-77)

Schuler (1999) itemized the following list as suggestions for teachers and counselors in helping gifted students. Teachers and counselors can:

- Learn how perfectionism affects the social and emotional traits of gifted students;
- Recognize stressful perfectionism (e.g. inability to tolerate mistakes; impatience with others' lack of perfectionism; delays in starting work; refusal to turn in less-than-perfect work);
- Expect excellence, not perfection;
- Discuss how high standards motivated good work;
- Encourage the flexible and creative principle dare to dream. Reward creativity;
- Offer choices. Encourage perfectionist students to explore areas in which they are not guaranteed success and perfection;
- Provide an environment that is safe for trying new experiences, taking risks, and perhaps failing;
- Use humor to lighten the atmosphere. Create a "humor bulletin board." Laugh at yourself;
- Learn techniques that are beneficial for gifted learners (curriculum compacting, ability grouping, and acceleration options;

- Use educational therapy techniques to address social and emotional issues: bibliotherapy, biography, journal writing, art, music, film, simulations, role playing, inquiry based class, and small group discussions. (p. 75)

Improvitational Drama

One strategy that incorporates humor and targets the social and emotional development of students is the use of improvisational drama. The use of improvisational theater with perfectionists is one way to help perfectionists become more open to uncertainty and possible failure (Ramsey & Ramsey, 2007). Because there is no script for improvisational theater, the players must rely on innovation and on their feet thinking in order to create the dramatic scene. The entire process involves coping with situations as they change on stage. Failure in improvisational theater is expected and celebrated as a normal part of the process, but ultimately flexibility and responsiveness is what makes the experience successful.

Writing Process

According to Joyce VanTassel-Baska (2003), a curricular strategy that can combat the problem of perfectionism is the use of a writing process that includes editing, revising, and using open-ended approaches to assignments. With the use of the writing process, gifted learners begin to realize that creating quality products requires reflection and revision. "Students should have opportunities to critique one another's work, pointing out aspects that they admire and offering constructive suggestions for improvement" (Adelson, 2007, p. 17). This allows students to learn to examine their own work and identify strength areas in addition to their weaknesses.

“Perhaps because of the nature of the written word, it is easier to conceptualize writing as a product-oriented subject than as a process” (VanTassel-Baska, Buckingham, & Baska, 2009, p. 241). Emphasizing the end product can exacerbate problems with perfectionism or unrealistically high self-expectations. The process approach to writing shifts the concern from an end-position and spreads it throughout all writing phases. With the writing process students are able to proceed at their own pace, choose their own topics, use their own vocabulary, and be as creative as they choose (VanTassel-Baska, Buckingham, & Baska, 2009).

Bibliotherapy and Biography Studies

In the 1920s, Hollingworth infused biographical studies into the curriculum of the Speyer School for highly gifted students in New York City (Hébert, 2009). Today, the use of bibliotherapy and the study of eminent individuals through biographies allow students to recognize and understand their personality characteristics, including perfectionism. Adderholdt and Goldberg (1999) suggest that reading for pleasure as a reward to oneself for work well done is one way to manage perfectionism. Adderholdt-Elliott and Eller (1989) name bibliotherapy as a tool to reduce maladaptive perfectionism. “Although gifted students may be intellectually ahead of their peers, they are likely to be at the same level as their agemates socially or emotionally and they need help coping with situations they cannot solve through intellectualization” (Adderholdt-Elliott & Eller, 1989, p. 27).

Bibliotherapy or the use of books to help learners reach understandings about themselves and others is an essential strategy to use with gifted students (VanTassel-Baska, 2003). Providing students with novels and biographies that allow them to engage

in discussions regarding the characteristic of perfectionism within the text, gives students with the opportunity to make connections with their own lives and even discover ways to cope with their perfectionism through reading about another person with the same problems.

The process of bibliotherapy requires careful and thoughtful planning (Adderholdt-Elliott & Eller, 1989). Teachers must be aware of the individual needs of their students when selecting books and discussing the texts. Bibliotherapy is not simply handing a child a book about a problem he or she is facing. “A book is not a pill that will cure if administered at the proper time; it is a starting point” (Adderholdt-Elliott & Eller, 1989, p. 27).

Developmental bibliotherapy focuses on helping young people in their normal emotional healthy and development (Hébert, 2009). Three elements of the bibliotherapeutic process are identification, catharsis, and insight (Halsted, 2002). Identification requires the reader to identify with the book’s character. Catharsis implies bringing fears or anxieties to a conscious level, and insight comes when the reader is able to connect his or her own situation to that of the character.

Many researchers and theorists recommend reading about famous individuals who encountered similar perfectionistic problems. “Books have the ability to reduce the delusion of uniqueness and remind readers they are not alone” (Maxwell, 2007, p. 216). Reading and discussing people who have revised their work multiple times can help students realize that success is not always easy. Guiding students through discussions of high-quality biographical materials has the potential to help students reach self-

understanding and discover ways to address challenges similar to their own (Hébert, 2009).

In the annotated bibliography included in *Some of my Best Friends are Books*, Halsted (2002) provides a list titles that include the topic of perfectionism. The following table includes the titles of books suggested by Halsted.

Table 2

Suggested Texts Dealing with Perfectionism

Age/Grade Level	Title and Author of Text
Four Year Olds	<i>The Empty Pot</i> by Demi
Kindergarten to Second Grade	<i>Daniel's Duck</i> by Clyde Robert Bulla
Third Grade to Fifth Grade	<i>The Iron Ring</i> by Lloyd Alexander <i>Don't Feed the Monster on Tuesdays</i> by Adolph Moser
Middle School	<i>The Midwife's Apprentice</i> by Karen Cushman <i>The View from Saturday</i> by E. L. Konigsburg
Middle & High School	<i>Perfectionism: What's Bad about Being Too Good?</i> by Miriam Adderholdt and Jan Goldberg <i>A Gifted Kids Survival Guide: A Teen Handbook</i> by Judy Galbraith and Jim Delisle
High School	<i>The Misanthrope</i> by Jean Baptiste Poquelin Moliere <i>Guiding the Gifted Child</i> by James T. Webb, Elizabeth A. Meckstroth, and Stephanie S. Tolan.

Additionally, NAGC also provides a list of books for young people that address the different aspects of perfectionism. The books are geared toward elementary age children and include the following titles: *Be a perfect person in just three days* by S. Manes, *Tales for the perfect child* by F. Heide, *The best of friends* by M. Rostkowski, *Nobody is perfect* by B. Waber, and *Mistakes are great* by D. Zadra (NAGC, 2008).

Videotherapy

Similar to bibliotherapy, the use of movies, also known as videotherapy or cinematherapy, to address the social and emotional needs of gifted children is becoming a popular and useful option for teachers, parents, and counselors. Films can be just as challenging as books and can provide a different medium for addressing issues and needs of gifted students (Milne & Reis, 2000). “Extroverted students may respond better to the group viewing atmosphere of a movie than to the individual experience of reading a book, and teachers may find it easier to ensure that all students are familiar with the material in this setting.” (VanTassel-Baska, Buckingham, & Baska, 2009).

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An entire film or clips can be shown and discussed; the choice depends on the objectives of the session, the maturity of the film content, the nature of the resources, and the copyright permissions (Milne & Reis, 2000). Choosing a movie for videotherapy involves parents and teachers being aware of the stereotypes that gifted children are exposed to by the movie (Cox, 2000). “If students solely see images of individuals succeeding and overcoming seemingly insurmountable odds, their fear of failure may be increased and their self-concept may even be lowered” (Maxwell, 2007, p. 216). When viewing a film, viewers may be asked to record key points and reactions to the film in a

personal journal. After, adults can help children understand and cope with the stereotypes of gifted students and the issue of perfectionism through discussion of the films.

Discussion Groups

Discussion groups are an essential component of a curriculum focused on the social and emotional needs and development of gifted students. Small-group discussions can “move gifted students out of a potentially competitive, evaluative environment and into an atmosphere where no one dominates, no grades are given, and no one judges them” (Peterson, Betts, & Bradley, 2009, p. 290). A gifted program that includes affective curriculum through small-group format recognizes and “sends a message that gifted students have developmental needs and concerns beyond just academic challenge” (p. 292).

Small groups offer a safe noncompetitive environment for open dialogue, no grades are given and everyone is a participant (Peterson, 2008). Small group discussions also offer a safe place to talk about experiences. For some topics addressed in group discussions, including perfectionism, providing five to ten minutes of information can help set the groundwork for discussion. The information prompts can help serve as catalysts for discussion (Silverman, 2000).

The size, session length, and schedule for the discussion group can have an impact on its success. Peterson, Betts, and Bradley (2009) suggest that primary level groups be limited to three students, intermediate-level groups might have five, and middle and high school groups should have no more than eight students. The small group size allows for students to develop trust and feelings of safety with their group. The length of group meetings are often determined by the class schedules, with meetings

lasting no longer than an hour for secondary students. Some facilitators schedule weekly meetings for a specific time period, others meet for a semester or school year, and still others try to schedule sessions during the lunch hour or study hall periods (Peterson, Betts, & Bradley, 2009).

Discussion groups provide students with an opportunity to explore and share their social and emotional concerns. When discussing the topic of perfectionism, Peterson, Betts, and Bradley suggest the following questions as guides for the facilitator: “What is it? What’s bad about being so good? What fears are connected to perfectionism? How can perfectionism be harnessed as an asset, rather than letting it be in control?” (2009). A lesson plan focused on perfectionism, included in the book *The Essential Guide to Talking with Gifted Teens*, includes a variety of objectives (Peterson, 2008). These objectives include having teens consider whether perfectionism affects them, identify what might contribute to perfectionism, articulate their feelings and thoughts about perfectionism, explore strategies for combating perfectionism, and consider their attitudes about making mistakes (Peterson, 2008).

Having students “catastrophize” in a discussion group by asking “What’s the worst thing that could happen if you didn’t _____ perfectly?” allows students to elaborate on their fears (Peterson, 2008, p. 49). Peterson (2008) also suggests students brainstorm strategies for combating perfectionism. Some strategies suggested are having students be average for a day, do activities that are not graded, focus on the process of learning, take a risk, give oneself permission to make mistakes, plan less compulsively, share a weakness with a friend, savor past accomplishments, and laugh at oneself (Peterson, 2008).

In a group setting, participants may be able to identify elements of their own thought patterns as they are mentioned by others, receive positive reinforcement and support from other group members, and recognize alternative responses to situations (Nugent, 2000). Encouraging discussion of various topics that impact the social and emotional well-being of students in the school and home setting will allow students to realize that their concerns matter and that other people also face similar struggles.

Summary of Research

The literature review on perfectionism revealed mixed results within the gifted population. Some researchers indicated higher incidences of perfectionism in gifted students than in the nongifted peers, while others did not find differences in the two populations. Regardless of the mixed findings for prevalence in the gifted and gender differences, there are huge implications associated with perfectionism. A startling finding in the research is the number of health problems that have been linked to perfectionism. Due to the health impacts and negative coping associated with perfectionism, schools need to implement prevention and intervention services within their curriculum.

Chapter III: Summary/Conclusion/Recommendations

Summary and Conclusions

“Striving for excellence is unhealthy when the goals are unrealistically high. However, when dealing with the gifted, it is much more difficult to determine when the goals are unrealistic” (Parker, 2000, p. 175). Adults need to be cautious about identifying perfectionism as completely unhealthy, because wanting to achieve, having a drive to excel, and enjoying order and organization are all positive attributes (Neihart et al., 2002; Silverman, 2007). Most researchers have come to believe that perfectionism exists on a continuum, with some characteristics recognized as healthy and adaptive and other characteristics categorized as neurotic and maladaptive (Adelson, 2007; Nugent, 2000; Parker & Mills, 2000; Schuler, 1999; Silverman, 1999). However, some researchers maintain that there is a distinct difference between a healthy striving for excellence and the measures in which perfectionists attempt to attain impossible goals (Adderholdt & Goldberg, 1999; Leman, 1998; Ramsey & Ramsey, 2007).

Regardless of the definition used to measure perfectionism, researchers are in agreement that there are definite problems that result due to perfectionism.

Perfectionistic tendencies place gifted students at risk for failing or dropping out of school, developing eating disorders, abusing drugs or alcohol, committing suicide, and other self-defeating behaviors. Consequently, it is important to counsel perfectionistic children as early as possible to avert these negative outcomes. (Adderholdt-Elliott & Eller, 1989, p. 29)

Perfectionism can lead to workaholism, procrastination, avoidance and indecision, anxiety, low self-esteem, burnout, depression, underachievement, and telescopic thinking

(Adelson, 2007; Adderholdt & Goldberg, 1999; Neihart et al., 2002; Nugent, 2000; Ramsey & Ramsey, 2007; Schuler, 2000). Additionally, the health implications that have been associated with perfectionism create a definite need for prevention and intervention programs within the schools. Perfectionism has been associated with mood disorders, depression, performance anxiety, obsessive-compulsive illness, stomachaches, irritable bowel syndrome, headaches, ulcers, colitis, facial tics, eating disorders, insomnia, and panic disorders (Adderholdt & Goldberg, 1999; Burns, 1980; Chan, 2007b; Leman, 2007; Mendaglio, 2007; Parker, 2000; Parker & Adkins, 1995; Parker & Mills, 1996; Pyryt, 2005; Ramsey & Ramsey, 2007; Rimm, 2007; Speirs Neumeister, 2004). In the case of perfectionism with gifted individuals, “Sometimes counselors fail to recognize that blessings can become a curse for these individuals, and without essential guidance and support, gifted students are at risk to underachieve, overextend, and succumb to personal and societal pressures” (Maxwell, 2007, p. 55). Understanding perfectionism and addressing the negative aspects of perfectionism through various interventions may help reduce student underachievement, avoidance, and stress in the future.

Research studies that focused on identifying perfectionism in gifted students have used a variety of self-report scales. These scales include the Burns Perfectionism Scale (1980), Perfectionism Quiz (Raudsepp, 1988), Multidimensional Perfectionism Scale (Hewitt & Flett, 1991), Multidimensional Perfectionism Scale (Frost et al., 1990), Goals and Work Habits Survey (Schuler, 1994), Almost Perfect Scale-Revised (Stanley et al., 1996), and the Positive and Negative Perfectionism Scale (Chan, 2007a).

Studies utilizing the above perfectionism scales reveal mixed results. At times, researchers have found greater incidences of perfectionism in the gifted population than

in nongifted students (Baker, 1996; LoCicero & Ashby, 2000; Speirs Neumeister, 2007; Silverman, 2007). However, Parker and Mills (1996) and Parker (2000) did not find significant differences using the Multidimensional Perfectionism Scale between the gifted and nongifted students. With varied results, the only definite conclusion that can be drawn is that perfectionism impacts students, gifted or not, and therefore schools should be working to prevent and/or intervene to ensure that the students' perfectionistic tendencies do not become unhealthy.

In addition to the study of perfectionism in gifted and nongifted students, researchers have also explored the possibility of gender differences and birth order differences in perfectionism. Parker and Mills (1996) found statistical differences based on gender, with gifted females more likely than gifted males to be healthy perfectionists. Baker (1996) found gifted females reported higher levels of perfectionism than gifted males. Rimm (2007) found that gifted girls were more likely to consider themselves perfectionistic than males. Chan (2009) found that gifted boys were more likely to be negative perfectionists than gifted girls. Significant gender differences were not found in studies by Schuler (1999), Chan (2007a), and Parker (2000). With the mixed results, it remains clear that perfectionism can afflict both males and females. Research on birth order has revealed significant results for perfectionism. First born children and only children are more likely to be perfectionists than later children (Adderholdt & Goldberg, 1999; Leman, 1998; Parker, 1997; Siegle & Schuler, 2000). With this information, parents and counselors can identify at-risk children for prevention services before any problems develop.

Researchers' studies on perfectionism work to understand the contributing factors. Various factors were identified including easy success at a young age, a mismatch between the student's abilities and the curriculum provided at school, parental pressures for success, parent modeling of perfectionistic tendencies, asynchronous development, and self-pressure (Adderholdt & Goldberg, 1999; Flett, Hewitt, & Singer, 1995; Leman, 1998; Orange, 1997; Rice, Ashby, & Preusser, 1996; Schuler, 2000; Speirs Neumeister, 2004, 2007). The variety of contributing factors, as well as negative health impacts linked to perfectionism, make prevention and intervention services for schools a necessity.

One frightening result of research by Schuler on perfectionism in gifted students was that almost all of the participants' teachers did not indicate that any of the students might be in distress due to their perfectionism, while many of the students fell into the dysfunctional maladaptive category for perfectionism (2000). Additionally, only a few of the participants had any contact with school counselors (Schuler, 2000).

Parents and educators alike may mistakenly presume that these students will excel in life based on their talents alone. In schools especially, nonacademic needs receive only nominal attention, and this population is likely to be ill-served or underserved in counseling contexts. (Maxwell, 2007, p. 55)

With this information it is obvious that teachers need to be provided with more training on the emotional and social needs of gifted students.

Recommendations

Each student has unique needs and it is important for teachers and parents to realize that one pre-determined strategy or plan may not serve his or her needs. In order for students to receive interventions on their perfectionism, researchers need to conduct empirical research that works to establish proven strategies to address perfectionism.

Although many suggestions of interventions have been made within the literature, there is a lack of research on how students respond to the different types of interventions for perfectionism (Speirs Neumeister, 2007). Studies need to be conducted in order to examine the effects of different techniques of interventions. Parker and Adkins (1995) challenged the field to study how gifted perfectionistic students respond to interventions. They wrote “While there have been many studies on educational interventions for the gifted; little has been studied in the area of differential interventions for perfectionistic and nonperfectionistic gifted children and hence, little is known” (p. 175). The statement remains true, over a decade later.

Research on the effectiveness of the various interventions and coping strategies will help determine which methods are most useful for dealing with perfectionism. Longitudinal studies that follow cohorts of students throughout their school experience may help researchers truly understand how and when perfectionistic tendencies develop (Parker, 2000; Vandiver & Worrell, 2002). Additionally, Vandiver and Worrell support looking at perfectionism in groups of students who are not experiencing success in school, such as underachievers, because these students may be exhibiting symptoms caused by perfectionism.

In the meantime, educational theorists provide a variety of strategies and interventions that can be used to target social and emotional needs of students. Being aware of the characteristics of perfectionism is not enough to elicit change. The process of changing takes time. “To use perfectionism productively, the student must learn how to set priorities” (Silverman, 2000, p. 59). Setting priorities, taking time to reflect on the value of mistakes and relaxation, and pursuing one’s passion will reduce the stress that

results from unhealthy perfectionism. These strategies can be implemented at home and in the classroom to help students cope with their perfectionism.

Teaching students how to cope with experiences of failure is also needed in order to ensure that these students develop strategies that do not hinder their development. Working to process through their feelings and develop plans for improving their learning process in the future will allow students to reinterpret their disappointments or failures as learning experiences.

Early academic success often **fuelsee** increased expectations by perfectionists and by other's closely associated with the individual. Ensuring that students experience challenging curriculum throughout their school experience will help students develop healthier attitudes and motivation patterns of achievement (Speirs Neumeister, 2007). Rather than expecting perfection from themselves, they can work to set realistic goals. Educators need to ensure that they are providing differentiated curriculum to their gifted students, whether within an inclusive classroom environment or in self-contained gifted classrooms, these students need to have instruction that provides challenge and rigor to the child's school experience (Speirs Neumeister, 2007). Some classroom interventions suggested for addressing perfection include the use of discussion groups, improvisational drama, a writing process focused on revisions and edits, bibliotherapy and biography studies, and videotherapy (Adderholdt & Goldberg, 1999; Adderholdt-Elliot & Eller, 1989; Halsted, 2002; Hébert, 2009; Maxwell, 2007; Milne & Reis, 2000; Peterson, 2008; Peterson, Betts & Bradley, 2009; Ramsey & Ramsey, 2007; VanTassel-Baska, 2003; VanTassel-Baska, Buckingham & Baska, 2009). In addition to these strategies, parents

Comment [CT13]: This chapter should be written in present tense.

and teachers can help students set realistic goals, recognize their limitations, plan their time, and participate in activities that bring them joy (Adelson, 2007; Pyryt, 2004).

It is important to remember that teachers are not trained counselors. They may not be prepared for all that students may disclose when the curriculum addresses the affective domain (Nugent, 2000). Luckily, professional guidance counselors and psychologists are available when the teacher cannot meet the needs of the students. Additionally, these “counselors have an opportunity to consult with teachers in suggesting books and other curricular materials and to educate them about the distinct traits and vulnerabilities of gifted” (Maxwell, 2007, p. 217).

“Increased counseling services for some gifted students could mean the difference between achievement and underachievement, between peace and despair, between friendship and loneliness, between life and death” (Silverman, 2000, p. 106). Parents and teachers need to be aware of the various techniques that can be used to help reduce negative perfectionism and underachievement while encouraging healthy and adaptive perfectionism. Perfection is an unattainable goal, and students need help understanding and coping with the fact that no one is perfect. By recognizing the unhealthy perfectionistic behaviors exhibited in the classroom and at home, parents and teachers can help mitigate the negative impact of perfectionism and ultimately harness the positive features to encourage a well balanced student who seeks success, not perfection, now and in the future.

Suggested Reference Resources

Note: The following list of books is suggested for use by parents and professionals in order to learn about gifted children and perfectionism (Distin, 2006; Peterson, 2008).

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Galbraith, J. (1999). *The gifted kids' survival guide: for ages 10 and under*. Minneapolis, MN: Free Spirit Publishing.

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