The Development of Perfectionism: A Study of Daughters and Their Parents

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The major theme in theorizing about the development of perfectionism is that it is a product of perfectionistic and demanding parents. The two studies reported here represent the first attempt to test this assumption. In study 1, perfectionism was measured in both daughters and their parents. In study 2, perfectionism in both daughters and their parents, related parental characteristics, and levels of psychopathology among daughters were measured. The findings from both studies indicated that mothers' perfectionism, but not fathers', was associated with perfectionism among daughters. In addition, daughters' ratings of fathers' harshness, but not fathers' self-reported harshness, were associated with daughters' perfectionism. For mothers, daughters' ratings of mothers' harshness and mothers' self-reported harshness were associated with perfectionism among daughters. A combination of mothers' Overall Perfectionism and mothers' self-reported harshness accounted for 30% of the variance in daughters' Overall Perfectionism. Additional findings suggested that mothers' perfectionism was associated with greater symptoms of psychopathology among daughters, while fathers' perfectionism was associated with lower levels of symptomatology.

KEY WORDS: perfectionism; perfectionistic thinking; personal standards; self-evaluation.

Perfectionism has been associated with a wide variety of psychopathologies including eating disorders (Bruch, 1978; Garner, Garfinkel, & Bemis, 1982), depression (Hewitt & Flett, 1990a), suicide (Delisle, 1986), obsessive—compulsive personality disorder (American Psychiatric

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Association, 1987), sexual dysfunction (Quadland, 1980), and others (Pacht, 1984). Despite the range of associated psychopathologies, relatively little empirical research has been done on this construct. What research has been done has tended to support the claim that perfectionism is associated with various forms of psychopathology. Significant correlations have been found between various unidimensional measures of perfectionism and depression (Hewitt & Dyck, 1986; LaPointe & Crandell, 1980; Nelson, 1977; Pirot, 1986), anxiety (Deffenbacher, Zwemer, Whisman, Hill, & Sloan, 1986; Goldfried & Sobocinski, 1975; Trexler & Karst, 1973), and eating disorders (Katzman & Wolchik, 1984; Ordman & Kirschenbaum, 1986; Thompson, Berg, & Shatford, 19887; Toner, Garfinkel, & Garner, 1986).

Recently, Frost, Marten, Lahart, and Rosenblate (1990) emphasized the multidimensional nature of this construct and designed a scale to measure it. Five core dimensions (high personal standards, concern over mistakes, doubting of actions, perceived parental expectations, perceived parental criticism) and one related dimension (organization) were identified and measured by this scale. Certain of these dimensions were related to the frequency and intensity of psychopathological symptoms, while other dimensions were associated with positive achievement striving (Frost et al., 1990). In a related study using this scale, perfectionists were found to hold different beliefs about the importance of an evaluated task they were asked to perform, experienced more negative affect before and during the task when the evaluative component of the task was salient, reported the quality of their work should have been better, and had the quality of their work judged by independent reviewers as poorer than that of nonperfectionists (Frost & Marten, 1990). Based on this research, it would appear that perfectionism is a potentially important construct that deserves further study.

Among those who have theorized about perfectionism, there is considerable consensus about how it develops. The major theme in such theorizing is that perfectionism has as its roots in interactions with parents who are perfectionistic and demanding. Missildine (1963) suggests that perfectionistic parents not only belittle their own accomplishments, but find it difficult to accept and reward the efforts of their children. Rather than provide approval of their children's behavior, perfectionistic parents instead urge their children to do better. In this way the child is never allowed to feel satisfied, in that his or her behavior is never quite good enough for parental approval. Missildine further suggests that perfectionistic parents convey lack of approval in a subtle way by implying their disappointment with the child's performance and their eventual approval when the performance is improved. Thus, children of perfectionistic parents come to

belittle their own accomplishments, and to feel they have never quite lived up to their parents' expectations.

Similarly, Hamachek (1978) describes the environment that fosters perfectionism as characterized by nonapproval, inconsistent approval, or conditional approval. In the first two of these environments, children fail to develop a sense of what is a "good" performance. Because perfection is a clearer criterion, it becomes the definition of acceptable performance. Anything less is not good enough. When parental approval is contingent on performance, the message to the child is that to be approved of ("loved"), a certain level of performance is required. In this way performance becomes overvalued at the expense of self-acceptance. The child must continue to perform flawlessly in order to meet the demands and avoid the criticisms of perfectionistic parents. Hollender (1965) suggests that the perfectionist will continue to strive as long as he or she has some hope of gaining parental approval. According to Hollender, the perfectionist believes, "If I try a little harder, if I do a little better, if I become perfect, my parents will love me" (p. 98).

A somewhat similar analysis is provided by Burns (1980). He suggests that perfectionistic parents use love and approval as rewards for superior performance. When the child makes mistakes or fails, however, the perfectionistic parent responds with anxiety and disappointment. The child perceives this as rejection and strives to avoid it by being perfect. Mistakes and failure become things to fear and avoid. In this way the child comes to feel it necessary to perform perfectly and to avoid mistakes in order to be accepted and loved by his or her parents. Once established, this style of self-evaluation becomes self-perpetuating and results in perfectionism.

Consistent with these theorists, Barrow and Moore (1983) describe four conditions conducive to the development of perfectionistic thinking. The first occurs when parents are overtly critical and demanding. The second is one in which criticism is not direct but implied in the parents' expectations and standards of performance. The third condition is when standards are absent (à la Hamachek, 1978). The fourth condition, not mentioned by the other theorists, is one in which perfectionistic parents act as models for perfectionistic attitudes and behaviors. Numerous parental behaviors can provide clear models for the child of how perfect a performance must be, how many mistakes can be tolerated, how mistakes should be reacted to, and how performance evaluations fit into one's sense of self and self-esteem. Summarizing the views of these theorists, the combination of perfectionistic models and the excessive parental demands placed on a child by perfectionistic parents provides a fertile environment for the development of perfectionism.

Despite the agreement among theorists about the role of parental perfectionism in the development of these tendencies, there is no empirical support for the hypothesis that perfectionism among parents is a predisposing factor for the development of perfectionism. Some anecdotal evidence might suggest such a relationship, however. Berlin (1985) found that among a group of women applying for treatment with complaints of excessive self-criticism, most linked their problem to perfectionistic standards of performance which they attributed to "demanding, perfectionistic parents" (p. 23). Still others have reported a high frequency of perfectionism among the parents of individuals with related characteristics such as obsessivecompulsive disorders (Hoover & Insel, 1984; Rachman, 1976; Rassmussen & Tsuang, 1986) and neurotic children (Lo, 1969). In addition, similar parental characteristics have been hypothesized to play a role in the development of self-critical depression (Blatt, Wein, Chevron, & Quinlan, 1979; McCranie & Bass, 1984), a depression subtype correlated with perfectionism (Frost et al., 1990) Although not direct support, these findings are consistent with the hypothesis that perfectionism among parents is associated with perfectionism among offspring. More empirical data are necessary in order to adequately test this hypothesis, however. The first study reported here represents an initial attempt to determine whether perfectionism among a group of young women is associated with perfectionism among their parents.

STUDY 1

Method

Subjects

Subject for study 1 were 41 undergraduate women and their parents. They were solicited from a small dormitory (80 students) to participate in the study. All subjects were informed that part of the study involved having their parents complete a questionnaire. Subjects were asked to list the names and addresses of their mothers and fathers if they lived with them for a significant amount of time while they were growing up. Subjects were asked to make the judgment regarding whether a parent lived with them for a "significant amount of time."

Forty-one students completed the Multidimensional Perfectionism Scale (MPS; Frost et al., 1990) and agreed to have the researchers contact their parents. All of the students listed a name and address for their mothers. Thirty-eight of the 41 students listed a name and address for their

fathers. Thirty-one of the 41 mothers contacted completed the MPS that was sent to them (76%). Twenty-five of the 38 fathers did so (66%).

Measure

The MPS is a 35-item questionnaire designed from various measures of perfectionism and related constructs to measure the major dimensions of perfectionism (Frost et al., 1990). Initial studies using this scale have shown it to have adequate reliability and validity. The dimensions of the MPS have been found to be correlated with predicted constructs and behaviors (Frost & Marten, 1990; Frost et al., 1990). In addition to an Overall Perfectionism score there are six subscales. The Concern over Mistakes subscale (9 items) reflects negative reactions to mistakes, a tendency to interpret mistakes as equivalent to failure, and a tendency to believe that one will lose the respect of others following failure (examples: "People will probably think less of me if I make a mistake". "I should be upset if I make a mistake.") Personal Standards (7 items) reflects the setting of very high standards and the excessive importance placed on these high standards for self-evaluation (examples: "If I do not set the highest standards for myself, I am likely to end up a second-rate person." "I hate being less than the best at things."). The tendency to believe that ones' parents set very high goals comprises the Parental Expectations subscale (5 items; examples: "My parents expected excellence from me." "My parents wanted me to be the best at everything."), and the perception that ones' parents are (or were) overly critical constitutes the Parental Criticism subscale (4 items; examples: "As a child I was punished for doing things less than perfect." "I never felt like I could meet my parents' standards.). Doubts About Actions (4 items) consists of items from the Maudsley Obsessive-Compulsive Inventory doubting subscale (Rachman & Hodgson, 1980) and reflects the extent to which people doubt their ability to accomplish tasks. Finally, excessive importance placed on order and Organization (6 items) composes the last subscale (examples: "Organization is very important to me." "I try to be a neat person."). The Organization subscale was included in the study but not used in the calculation of overall perfectionism scores (see Frost et al., 1990). The means, standard deviations, and reliability coefficients for Overall Perfectionism and each MPS subscale are displayed in Table I.

Results and Discussion

In order to determine whether perfectionism among daughters was associated with perfectionism among mothers and fathers, correlations

	Mean	Standard deviation	Alpha	
P	76.4	17.1	.91	
CM	19.7	7.1	.88	
PS	25.9	5.3	.84	
PE	14.7	4.5	.81	
PC	6.8	3.2	.78	
DA	9.4	3.0	.78	
0	23.2	5.6	.92	

Table I. Means, Standard Deviations, and Chronbach Alphas of the MPS Subscales for Study 1^a

between the MPS scores of daughters and mothers, and daughters and fathers, were calculated. These analyses revealed that daughters' Overall Perfectionism scores were significantly correlated with mothers' Overall Perfectionism scores, r(31) = .39, p < .05. Consistent with the hypothesis, daughters who had perfectionistic mothers were more perfectionistic themselves. The correlations among the separate dimensions of perfectionism for daughters and mothers are displayed in Table II. Mothers who perceived their own parents as having high expectations for them, and as being overly critical, had daughters who had higher levels of Overall Perfectionism. Mothers with high levels of Overall Perfectionism had daughters who were more concerned over mistakes and perceived their parents expectations of them to be higher. Mothers' and daughters' Parental Criticism were correlated also.

In contrast, daughters' Overall Perfectionism was not correlated with fathers' Overall Perfectionism, r(25) = -.04, p > .10. Furthermore, there were few significant correlations between the dimensions of daughters' perfectionism and those of the fathers. Only fathers' Personal Standards were significantly correlated with daughters' Personal Standards, r(25) = .42, p < .05, and with Organization, r(25) = .59, p < .01. Fathers with higher Personal Standards had daughters with higher Personal Standards and higher levels of Organization.

The findings of this study support the hypothesis that perfectionism in mothers is associated with perfectionism in daughters. This is in line with what has been theorized about the development of perfectionism (Missildine, 1963). There is no evidence, however, that fathers' perfectionism is associated with daughters' perfectionism. There may be some relationship between fathers' Personal Standards and daughters' Personal

^a Note: N = 42. MPS = Multidimensional Perfectionism Scale. P = Overall Perfectionism, CM = Concern over Mistakes, PS = Personal Standards, PE = Parental Expectations, PC = Parental Criticism, DA = Doubts about Actions, O = Organization.

Daughters'	Mothers' MPS						
MPS scores	P	СМ	PS	PE	PC	DA	0
P	.393 ^b	.234	.109	.399 ^b	.604 ^c	.031	062
CM	.202	.147	104	.275	.544 ^c	103	037
PS	.198	.004	.092	.260	.474	028	.039
PE	.497 ^c	.399 ^b	.234	.334	.297	.326	163
PC	.359 ^b	.195	.233	$.400^{b}$.371 ^b	016	100
DA	.246	.153	.045	.216	.516	056	.038
О	.143	.017	.212	.056	.274	071	.244

Table II. Correlations Among MPS Scores of Daughters and Mothers in Study 1^a

Standards and Organization, however. It should be noted that because of the exploratory nature of this study, a relatively large number of correlations were examined. As a result, some of the significant correlations may have been due to chance. For this reason, and the fact that a limited number of subjects was used in this study, a replication and extension of these findings was warranted. Therefore a second study was undertaken.

STUDY 2

On the basis of study 1 it was hypothesized that daughters' Overall Perfectionism would be correlated with mothers', but not fathers', Overall Perfectionism. For fathers, the only expected relationships were between fathers' Personal Standards and daughters' Personal Standards and Organization.

In addition to providing a replication of study 1 the present study was also an attempt to explore other parental characteristics thought to be associated with the development of perfectionism. In outlining the dimensions of perfectionism, Frost et al. (1990) included two perceived parental characteristics as part of the construct of perfectionism: the perception of high parental expectations, and the perception of high levels of criticism from parents. These are part of the constellation of parental behaviors suggested to be important in the development of perfectionism, along with several additional parental characteristics. These additional characteristics include tendencies to being overly demanding, guilt-inducing, less affectionate, less supportive, and less permissive.

^a Note: N = 31. MPS = Multidimensional Perfectionism Scale. P = Overall Perfectionism, CM = Concern over Mistakes, PS = Personal Standards, PE = Parental Expectations, PC = Parental Criticism, DA = Doubts about Actions, O = Organization. $^bp < .05$.

 $^{^{}c}p < .01.$

Interestingly, these descriptions are similar to those of parents with offspring who have obsessive-compulsive disorder, especially compulsive checkers (Rachman, 1976; Steketee, Grayson, & Foa, 1987). Study 2 represents an attempt to determine whether any of these additional parental characteristics are associated with the development of perfectionism. A related purpose is to determine whether these characteristics in fathers, mothers, or both are related to perfectionism among daughters. Although theorists have not suggested any such difference, there may be reason to suspect the relationship may differ for mothers and fathers. In study 1, only mothers perfectionism was associated with daughters' perfectionism. Perhaps mothers' behavior is more salient with respect to the development of perfectionistic characteristics. In studying a related phenomenon, Steketee, Grayson, and Foa (1985, 1987) asked subjects to rate each of their parents on a set of descriptors reflecting the above-mentioned characteristics. They found that obsessive-compulsives described their mothers as overly demanding to a greater extent than nonobsessives, but not their fathers. It is possible that a similar phenomenon exists for perfectionists. For this reason it was important to examine the perception of mother and father characteristics separately.

Although the perceptions of parental characteristics are important in understanding the phenomenon of perfectionism, they may not be accurate portrayals of parental characteristics. They may be distorted by memory biases or by lack of relevant information. Independent assessments of parental characteristics are necessary in order to provide a frame of reference for interpreting the perception of parental characteristics. Although parents' descriptions of themselves may also be biased by a number of factors, they provide an additional source of information that will have some bearing on the interpretation of their children's reports. In order to further examine the nature of parental characteristics associated with perfectionism among offspring, parents in study 2 were asked to judge the extent to which each of the above-mentioned descriptors was characteristic of them. This provided an additional source of information regarding the relationship between parental characteristics and perfectionism among their children.

A theme reiterated in conjunction with the overly critical and demanding parenting style among perfectionists is the negative effect these parent-child interactions have on children. Several studies have suggested that having perfectionistic parents predisposes children to develop psychological problems. Perfectionistic parents have been blamed for the development of overly self-critical individuals (Berlin, 1985), obsessive-compulsive disorders (Hoover & Insel, 1984; Rachman, 1976; Rasmussen & Tsuang, 1986) and neurotic children (Lo, 1969). Unfortunately, however,

in each case, the data are anecdotal, based on subjects' perceptions of their parents, or based on informal judgments of perfectionism. The final purpose of this study was to provide a preliminary examination of the association between perfectionism of parents and psychopathological symptoms among their offspring.

Method

Subjects

Seventy-two female students from a small private women's college enrolled in an introductory psychology class completed a perfectionism scale (Frost et al., 1990) and a series of measures hypothesized to be related to perfectionism. Of these subjects 63 had at least one parent in the continental United States and agreed to have one or both of their parents contacted for the study. Fifty mothers (out of the 60 contacted — 83%) and forty-three fathers (out of the 60 contacted — 72%) completed and returned the questionnaires sent to them.²

Student Questionnaire

Perfectionism Scale. Subjects completed the 35-item Multidimensional Perfectionism Scale used in study 1 (Frost et al., 1990).

Father/Mother Trait Scales. Subjects completed two questionnaires describing parental characteristics, one for their father and one for their mother. The items were descriptors expanded from the Steketee et al. (1985) list of 13 parental descriptors. Subjects were to indicate on a 7-point Likert scale the extent to which each of 15 descriptors was characteristic of each parent. The descriptors included four having to do with order and organization (very clean, meticulous, disorganized, and orderly). Although these have not been as closely linked with the development of perfectionism, they may have some relevance for the Organization dimension. Ten items had to do with various aspects of interpersonal behavior reflecting a harsh parenting style. These included strict, guilt-inducing, withdrawn, easygoing, affectionate, permissive, overprotective, demanding, critical, and supportive. The remaining descriptor was "religious." The four order items

²It is possible that bias may have been introduced because some potential subjects did not give permission to contact their parents or their parents did not respond. There is little indication of any such bias, however. For instance, there were no significant differences In MPS scores between those subjects whose parents completed the questionnaires and those who did not.

were combined into a single measure of order. The 10 items having to do with overly harsh parenting style were combined into a measure of harshness. The internal consistencies of the four measures generated by this procedure were adequate (mother-order alpha = .85; mother-harshness alpha = .80; father-order alpha = .86; father-harshness alpha = .78).

Brief Symptom Inventory. In order to measure general psychopathology and psychiatric symptoms, subjects were asked to complete a shortened version of the SCL-90R, the Brief Symptom Inventory (BSI; Derogatis & Melisaratos, 1983). On this measure subjects indicate how much each of a set of symptoms has bothered or distressed them during the past week. A 5-point scale from not at all to extremely is used. Three global indices of distress were used to assess symptomatology, General Symptom Index (GSI), Positive Symptom Total (PST), and a measure of symptom intensity (Positive Symptom Distress Index, PSDI). GSI is the sum of the individual item ratings, PST is the total number of symptoms rated 2 (a little bit) or higher. PSDI is the average rating of items which were rated 2 or higher.

Parent Questionnaire

Perfectionism. Parents were asked to complete the same measure of perfectionism as the students.

Trait Scale. Parents were asked to complete a self-descriptive questionnaire. The descriptors for this questionnaire were identical to the descriptors used in the student's Father/Mother Trait Scale. Parents were asked to indicate the extent to which each descriptor was characteristic of them. As with the students' measures, the four order items were combined into a single measure of order. The 10 items having to do with overly harsh parenting style were combined into a measure of harshness. The internal consistencies of the four measures generated by this procedure were somewhat lower than those for the daughters' measures (mother-order alpha = .85; mother-harshness alpha = .47; father-order alpha = .67; father-harshness alpha = .63). This might reflect differences in the perceptual reference of actors and observers. Daughters might be prone to see these characteristics as having a common core, while parents may tend to discriminate more carefully because the focus is on them.

Procedures

Subjects completed the student questionnaires in small groups and received course credit for their participation. Before participating, all

Daughters'	Mothers' MPS						
MPS scores	P	СМ	PS	PE	PC	DA	0
P	.414 ^b	.341 ^c	.400 ^b	.285 ^c	.139	.165	.117
CM	.436 ^b	$.427^{b}$.386 ^b	.252	.097	.192	.090
PS	.233	.216	.341 ^c	.082	.052	.014	.329 ^c
PE	.403 ^b	$.290^{c}$	$.413^{b}$.351 ^c	.080	.137	.213
PC	.265	.189	.194	.301 ^b	.081	.134	043
DA	014	089	086	027	.200	.076	334 ^c
0	128	130	.077	035	110	~.204	.189

Table III. Correlations Among MPS Scores of Daughters and Mothers in Study 2^a

subjects were asked to provide the names and addresses of their parents, and to grant permission to the experimenters to contact them. Parents located within the continental United States were sent a packet containing two brief questionnaires and asked to complete and return them in the envelope provided. After 3 weeks a followup letter was sent to those who had not yet returned the questionnaires.

Results

The correlations between daughters' and mothers' perfectionism are shown in Table III. As in study 1, mothers high in Overall Perfectionism had daughters who were high in Overall Perfectionism, r(50) = .414, p < .01. In addition, mothers' Concern over Mistakes, Personal Standards, and Parental Expectations were correlated with daughters' Overall Perfectionism. Mothers' Parental Criticism, which was correlated with daughters' Overall Perfectionism in study 1, was not correlated with daughters' Overall Perfectionism here.

Several of the daughters' MPS subscales were correlated with mothers' MPS subscales. Daughters' Concern over Mistakes and Parental Expectations subscales were correlated with mothers' Overall Perfectionism, Concern over Mistakes, and Personal Standards. Daughters' Personal Standards was correlated with mothers' Personal Standards and Organization, while Doubts about Actions among daughters was negatively correlated with mothers' Organization. Parental Criticism in daughters was correlated with mothers' Parental Expectations.

^a Note: N = 50. MPS = Multidimensional Perfectionism Scale. P = Overall Perfectionism, CM = Concern over Mistakes, PS = Personal Standards, PE = Parental Expectations, PC = Parental Criticism, DA = Doubts about Actions, O = Organization.

 $^{^{}b}p < .01.$

cp < .05.

Daughter's perfectionism scores	Father		Mother		
	Daughter's report	Self-report	Daughter's report	Self-report	
P	.60 ^b	.12	.42 ^b	.30 ^c	
CM	.45 ^b	.02	.28 ^c	.29 ^c	
PS	.28 ^c	.22	.12	.23	
PE	$.40^{b}$	03	.41 ^b	.11	
PC	.63 ^b	.10	.46 ^b	.21	
DA	$.32^{b}$.11	.20	.11	
0	02	.09	.05	07	
	n = 72	n = 43	n = 72	n = 50	

Table IV. Correlations Between Daughters' Perfectionism and Daughters' Reports of Parents' Harshness, and Parents' Self-Reports of Their Own Harshness^a

Daughters' Overall Perfectionism was not correlated with fathers', r(43) = .014, p > .10. Furthermore, there were no significant correlations between any of the daughters' perfectionism scores and fathers' perfectionism scores. One of the predicted relationships, that between fathers' Personal Standards and daughters' Organization, was marginally significant (p < .10, two-tailed). With this exception, there was no evidence that fathers' perfectionism was related to daughters' perfectionism.

Examination of the correlations between daughters' perfectionism and their descriptions of their parents indicated that orderliness was not related to daughters' perfectionism for either parent. In contrast, daughters' reports of harshness of both mothers and fathers were related to daughters' perfectionism (see Table IV). In addition, several of the MPS subscales were related to daughters' reports of parental harshness. As would be expected because of the similarly among items, daughters' Parental Expectations and Parental Criticism subscales of the MPS were associated with more harsh parental characteristics for both fathers and mothers. Concern over Mistakes was also correlated with-daughters' reports of both mothers' and fathers' harshness. Daughters' reports of fathers' harshness were correlated with Doubts about Actions and Personal Standards, but not Organization. Daughters' reports of mothers' harshness were not correlated with Doubts about Actions, Personal Standards, or Organization.

Based on the findings from daughters' reports, it would appear that the parents of perfectionists are perceived as displaying a relatively more harsh parenting style. Examination of the correlations between subjects'

^a Note: P = Overall Perfectionism, CM = Concern over Mistakes, PS = Personal Standards, PE = Parental Expectations, PC = Parental Criticism, DA = Doubts about Actions, O = Organization.

 $^{^{}b}p < .01.$

cp < .05.

perfectionism scores and the self-descriptions of their parents reveals a less clear relationship, however (see Table IV). Daughters' Overall Perfectionism was not correlated with fathers' self-reported orderliness or harshness. Daughters' Overall Perfectionism was not correlated with mothers' self-reported orderliness, but it was correlated with mothers' self-reported harshness, r(50) = .30, p < .05. Mothers' self-reported harshness correlated with only one subscale of the daughters' MPS, Concern over Mistakes, and mothers' self-reported orderliness correlated with one of the daughters' MPS subscales, Personal Standards. Fathers' self-reported harshness did not correlate with any MPS subscales.

While there is no way to validate the accuracy of daughters' perceptions or parents' self-reports, the present data allowed for a comparison of these variables. Specifically, these data allowed for an examination of (1) the extent to which these ratings covaried, and (2) whether there were any differences between what parents think they display and what daughters say they display. There was a significant correlation between daughters' description of mothers' orderliness and mothers' self-descriptions regarding this characteristic, r(50) = .64, p < .01. There was no difference between daughters' and mothers' ratings of this variable, t(49) = 1.08, p > .05. There was also a significant, though smaller, correlation between daughters' report and mothers' self-description of harshness, r(50) = .29, p < .05. There was no difference between daughters' and mothers' ratings on this variable either, t(49) < 1, p > .05. There was no correlation between daughters' and fathers' ratings of fathers' orderliness, r(43) = .02, p > .05, and no difference between them, t(40) < 1, p > .05. There was a significant correlation between daughters' and fathers' ratings of harshness, r(42) = .43, p < .01. There was also a significant difference between daughters' reports of fathers' harshness and fathers' self-report of harshness, t(41) = 3.38, p < .01. Fathers rated themselves higher on harshness (M = 36.0) than daughters' rated them (M = 31.2).

In order to determine the extent to which the relationship between mothers' perfectionism and daughters' perfectionism was distinct from the relationship between mothers' self-reported harshness and daughters' perfectionism, a hierarchical regression analysis was conducted. Mothers' Overall Perfectionism was entered first and accounted for a significant amount of variance in daughters' Overall Perfection, adjusted $R^2 = .15$, F(1, 48) = 9.95, p < .01. Mothers' self-reported harshness was entered second and resulted in a significant increase in the variance accounted for, F(1, 47) = 10.78, p < .01. The final equation accounted for 30% (adjusted R^2) of the variance in daughters' Overall Perfectionism scores. As further evidence for the distinct contribution these variables had, when mothers' self-reported harshness was entered into the regression equation

	S	ymptomat	ology			
	N	Mothers' p	erfectioni	sm(N = 5)	0)	
P	СМ	PS	PE	PC	DA	0
.187	.119 024	.136	.151 .042	.295 ^b	.007 077	176 129
.378 ^c	.320 ^b	.274	.238	.362 ^c	.100	154
	1	Fathers' p	erfectionis	m (N = 43)	3)	
P	СМ	PS	PE	PC	DA	0
186 091 271	116 049 183	080 018 118	372 ^b 274406 ^c	333 ^b 271 397 ^c	072 034 164	.129 .184 .090
	.187 .031 .378c P 186 091	P CM .187 .119 .031024 .378c .320b P CM 186116091049	Mothers' p P CM PS .187 .119 .136 .031024 .028 .378c .320b .274 Fathers' p P CM PS 186116080091049018	P CM PS PE .187 .119 .136 .151 .031024 .028 .042 .378c .320b .274 .238 Fathers' perfectionis P CM PS PE 186116080372b091049018274	Mothers' perfectionism (N = 5) P CM PS PE PC .187 .119 .136 .151 .295 ^b .031024 .028 .042 .213 .378 ^c .320 ^b .274 .238 .362 ^c Fathers' perfectionism (N = 43) P CM PS PE PC 186116080372 ^b 333 ^b 091049018274271	Mothers' perfectionism $(N = 50)$ P CM PS PE PC DA .187 .119 .136 .151 .295b .007 .031 024 .028 .042 .213 077 .378c .320b .274 .238 .362c .100 Fathers' perfectionism $(N = 43)$ P CM PS PE PC DA 186 116 080 372b 333b 072 091 049 018 274 271 034

Table V. Correlations Between Mothers' and Fathers' Perfectionism and Daughters'
Symptomatology^a

first, the addition of mothers' Overall Perfectionism accounted for a significant increase in variance accounted for, F(1, 47) = 6.80, p < .05. Using fathers' responses as predictor variables, no significant equation was created.

Regarding the relationship between parents' perfectionism and symptoms of psychopathology in their daughters, the findings show different and unexpected trends for mothers and fathers. Perfectionism among mothers was associated with greater symptom intensity among daughters (see Table V). Mothers higher in Overall Perfectionism, Concern over Mistakes, and Parental Criticism had daughters with greater symptom intensity scores. Also, mothers' Parental Criticism was significantly and positively correlated with the General Symptom Index.

In contrast, among fathers the relationship between perfectionism and daughters' symptoms was negative. Fathers' Parental Expectations and Parental Criticism scales were negatively and significantly correlated with GSI and symptom intensity.

It appears that mothers' perfectionism is associated with increased symptoms of psychopathology among daughters, while fathers' perfectionism is associated with decreased symptomatology. Examination of the pattern of correlations in Table V further supports this conclusion. Excluding the Organization scale, 16 of the 18 possible correlations between daughters' symptom scores and mothers' perfectionism scores were positive, while

^a Note: P = Overall Perfectionism, CM = Concern over Mistakes, PS = Personal Standards, PE = Parental Expectations, PC = Parental Criticism, DA = Doubts about Actions, O = Organization. BSI = Brief Symptom Inventory; GSI = General Symptom Index, PST = Positive Symptom Total, PSDI = Positive Symptom Distress Index.

 $^{^{}b}p < .05.$

 $^{^{}c}p$ < .01.

all 18 comparable correlations using fathers' perfectionism scores were negative.

GENERAL DISCUSSION

Most of the theorizing about the relationship between perfectionism in parents and perfectionism in children is based on clinical observations and recollections of patients about their parents. The present findings provide the first empirical evidence of an association between mothers' and daughters' perfectionism, and the first time these were independently measured. Although this finding is consistent with the hypothesis that perfectionistic mothers produce perfectionistic daughters, there are several reasons for being cautious regarding the support these studies provide for that hypothesis. First, these findings are based on currently assessed characteristics. Mothers may have been different during the years their daughters were at home. Second, the data are correlational in nature and cannot be used to determine causality. It is possible that mothers may have developed their perfectionism as a result of interacting with perfectionistic daughters, or that both mothers and daughters developed perfectionism at the same time.

Despite these limitations, the findings are consistent with the hypothesis that parents' perfectionism is associated with perfectionism in daughters. In both of the present studies, perfectionism among mothers was correlated with perfectionism among daughters. In contrast, perfectionism among fathers was not associated with perfectionism among daughters in either study. Because of this discrepancy between parents, some modification in the theorizing is suggested by these findings. Specifically, if these findings are a reflection of the modeling of parental perfectionism by daughters, as suggested by Barrow and Moore (1983), the gender of the parent appears to play an important role in the process. There are several possible explanations for this phenomenon. It may be that mothers in these studies were better models because they spent more time with their daughters than did their fathers, and/or they may have been more involved in their daughters' upbringing. Their perfectionistic beliefs and behaviors may have been more available for observation than were fathers'. There was some indication in these data that daughters were more familiar with their mothers. Daughters' and mothers' ratings of mothers' orderliness were highly correlated, while daughters' and fathers' ratings of fathers' orderliness were not correlated. Also, although daughters' and fathers' reports of fathers' harshness were correlated, fathers rated themselves as more harsh than their daughters rated them on this dimension.

Alternatively, it may be that these findings are due to same-sex modeling. In line with this, it would be useful to know if these findings would generalize to sons. If the results are due to mothers spending more time with their daughters, a similar finding might be expected for sons, to the extent that mothers play a dominant role in parenting. If, however, the findings are due to same-sex modeling, the opposite might be expected. That is, fathers' but not mothers' perfectionism should be associated with sons' perfectionism. Additional work involving sons as well as daughters, and including measures of the amount of time spent with each parent, is warranted.

In addition to modeling as a mode of transmission of perfectionism from parents to offspring, theorists have suggested that specific types of behaviors parents engage in lead to perfectionism in offspring (Barrow & Moore, 1983; Burns, 1980; Hamachek, 1978; Hollender, 1965). Perfectionistic parents are thought to be overly critical, demanding, and generally less supportive. Consistent with this notion, perfectionistic daughters in study 2 described both their parents as being more harsh than less perfectionistic daughters. The relationship between perfectionism and daughters' reports of parental harshness may be inflated due to overlapping content with the Parental Criticism subscale of the MPS. There were, however, significant correlations between perceived harshness and several of the nonoverlapping subscales of perfectionism. This is consistent with what has been theorized about the parents of perfectionists (Barrow & Moore, 1983; Missildine, 1963). Such theorizing has been based on what perfectionists say about their parents. Thus, these findings substantiate these descriptions, and they support the hypothesis that perfectionism is associated with parents who are relatively harsh. It is not clear how specific this relationship is, however. It is possible that perfectionistic daughters would describe their parents has having other negative characteristics as well. It would be interesting to know whether perfectionistic daughters also perceive their parents as being perfectionistic.

Beyond the issue of parents' perfectionism regarding themselves is the issue of the extent to which they apply their standards to their children. Implied in the literature on perfectionism is the notion that directing perfectionistic standards toward children results in the development of perfectionism. In the present studies, although mothers' perfectionism was associated with perfectionism in daughters, the extent to which perfectionistic parents actually set high standards and expectations for their daughters was not measured directly. It may be possible, for instance, that perfectionistic parents are perfectionistic about their own performance, but they do not apply the same standards and concerns to their daughters. Consistent with this notion, Hewitt and Flett (1990b) have suggested a

separate dimension (Other-Oriented Perfectionism) that represents the tendency to set unrealistic expectations of others and to evaluate them harshly.

There was some consistency across studies in the relationships between mothers' and daughters' dimensions of perfectionism. A number of relationships were significant in both of these studies. Mothers who were perfectionistic were perceived by their daughters as setting very high expectations for their daughters, and as being very critical of their daughters. Mothers who were very concerned over mistakes and failure were perceived by their daughters as setting very high standards for them. Also, mothers who perceived their parents as having set very high standards for them were in turn perceived by their daughters as setting very high standards and as being very critical of their daughters. Daughters' Personal Standards, the MPS subscale associated with the more positive aspects of perfectionism (see Frost et al., 1990), was correlated with mothers' tendency to set high standards for themselves, and their tendency to see themselves as wellorganized. The major inconsistency between studies involved the mothers' Parental Criticism subscale, which was correlated with four daughter's MPS subscales in study 1, but with none in study 2. Because of this inconsistency, it cannot be concluded that mothers' perceptions of their parents' criticalness is related to perfectionism in daughters.

Certain dimensions of perfectionism (Personal Standards and Organization) have been found to be associated with positive achievement striving and other "healthy" characteristics (Frost et al., 1990). When displayed in parents, these positive aspects of perfectionism might be expected to be related to positive aspects of perfectionism in daughters. There were several findings in the present study that were consistent with this notion. In study 2, both mothers' Personal Standards and Organization were correlated with daughters' Personal Standards, while mothers' Organization was negatively correlated with Doubts about Actions in daughters. Also, fathers' Personal Standards was correlated with daughters' Personal Standards and Organization in study 1 and with daughters' Organization in study 2. However, in study 2 mothers' Personal Standards was correlated with daughters' Concern over Mistakes and Parental Expectations also. This might be expected, given that in previous research Personal Standards has been found to have both positive and negative features (Frost et al., 1990). The importance and influence of these positive features of perfectionism need further clarification.

Perfectionism among daughters was not associated with either parent being perceived as more orderly. Orderliness and organization are commonly association with perfectionism (Hollender, 1965), although they have not been described in theorizing about the development of perfectionism beyond a set of behaviors to be modeled. Based on these findings, it cannot be concluded that perfectionism is associated with perceived orderliness in parents.

The parents' self-descriptions revealed a somewhat different pattern of results. Fathers' self-reported orderliness and harshness were not correlated with daughters' perfectionism. Mothers' self-reported orderliness was correlated with daughters' Personal Standards. In addition, mothers' selfreported harshness was correlated with daughters' Overall Perfectionism and Concern over Mistakes. Thus the parents' self-descriptions provide some support for the hypothesis that perfectionism is associated with relatively harsh parental characteristics. However, this support is again limited to mothers' self-descriptions and suggests some modification to the theorizing about how these parental behaviors relate to daughters' perfectionism. Perhaps mothers' harshness is more influential because they spend more time with their daughters. The daughters of harsh mothers may be exposed to a higher level of criticism and a lower level of nurturance as a result. It might also be that daughters do not recognize the magnitude of fathers' harshness as easily as they do mothers'. Daughters reported a lower magnitude of fathers' harshness than fathers themselves did.

The regression analyses predicting daughters' perfectionism indicated that fathers' perfectionism and self-descriptions did not predict daughters' perfectionism. In contrast, mothers' perfectionism plus mothers' self-described harshness predicted 30% of the variance in daughters' Overall Perfectionism. Thus the contribution of mothers' perfectionism in explaining daughters' perfectionism is distinct from the contribution of mothers' harshness. This is consistent with Barrow and Moore's (1983) suggestion that there are several different aspects of parental behavior that lead to perfectionism in offspring. In this case, the contributors were perfectionistic behaviors to model and relatively harsh parenting style.

The findings of this study also suggest several things about the relationship between perfectionism in parents and the development of psychopathology in their daughters. Mothers high in perfectionism tend to have daughters who report greater intensity of psychological symptoms, while fathers high in perfectionism tend to have daughters who report less intense psychological symptoms. The observed correlations were most apparent in the intensity, rather than frequency, of symptoms. The reasons for the different trends for mothers and fathers are unclear. Perhaps, as has been suggested, perfectionistic fathers are not as involved in the daily routines of their daughters as are perfectionistic mothers. At high levels of involvement with a perfectionistic parent, the Concern over Mistakes and critical aspects of perfectionism may be more salient aspects of a relationship. Such interactions may convey rejection, disappointment, etc., and lead to greater

psychopathology. At lower levels of involvement with a perfectionistic parent, high standards may be more salient. Interactions with such a parent may convey high expectations, confidence, etc., and lead to lower levels of psychopathology. Alternatively, perfectionism in mothers may violate sexrole norms regarding nurturance. Thus, perfectionism in mothers may be related to psychopathology in daughters because of nonconformity to culturally defined sex-roles rather than because of the perfectionistic behavior. It should be noted here again that the observed relationships are correlational in nature and causality cannot be determined from them. It is possible, for instance, that mothers respond to a daughter with psychological symptoms by becoming more perfectionistic, while fathers do the opposite. Given the exploratory nature of this portion of the study, these findings are in need of replication.

It would appear that mothers' characteristics and fathers' characteristics are not related to daughters' perfectionism and psychopathology in the same way. A constellation of characteristics of mothers were related to daughters' perfectionism (harshness as perceived by daughters, mothers' perfectionism, and mothers' self-reported harshness). Only one characteristic of fathers was associated with daughters' perfectionism (daughters' reports of fathers' harshness). Mothers' perfectionism was associated with greater symptomatology, while fathers' perfectionism was associated with less symptomatology. There are a host of possible reasons for these differences, including same-sex modeling effects, differences in the amount of time spent with each parent, authority structure in the home, and more. Additional research to elucidate the reasons for these differences would be useful.

Although high levels of perfectionism appear to be associated with symptoms of distress (Frost et al., 1990), it is possible that the low end of perfectionism may also be related to certain kinds of problems as well. Low Personal Standards and Concern over Mistakes (both personally and in parents) might be associated with motivational deficits and difficulties in interacting with others. Consistent with this notion, Pacht (1984) has observed that prison inmates display low levels of perfectionism. Studies of perfectionism among such populations are needed to further clarify the relationship of perfectionism to psychopathology.

REFERENCES

American Psychiatric Association. (1987). Diagnostic and statistical manual of mental disorders (3rd ed., rev.). Washington, DC: Author.

Barrow, J. C., & Moore, C. A. (1983). Group interventions with perfectionist thinking. Personnel and Guidance Journal, 61, 612-615.

- Berlin, S.(1985). Maintaining reduced levels of self-criticism through relapse prevention treatment. Social Work Research and Abstracts, 21, 21-33.
- Blatt, S. J., Wein, S. J., Chevron, E., & Quinlan, D. M. (1979). Parental representations and depression in normal young adults. *Journal of Abnormal Psychology*, 88, 388-397.
- Bruch, H. (1978). The golden cage. Cambridge, MA: Harvard University Press.
- Burns, D. D. (1980, November). The perfectionist's script for self-defeat. *Psychology Today*, 34-51.
- Deffenbacher, J. L., Zwemer, W. A., Whisman, M. A., Hill, R. A., & Sloan, R. D. (1986). Irrational beliefs and anxiety. *Cognitive Therapy and Research*, 10, 281-292.
- Delisle, J. (1986). Death with honors: Suicide among gifted adolescents. *Journal of Counseling and Development*, 64, 558-560.
- Derogatis, L. R., & Melisaratos, N. (1983). The Brief Symptom Inventory: An introductory report. *Psychological Medicine*, 13, 595-605.
- Frost, R. O., & Marten, P. (1990). Perfectionism and evaluative threat. Cognitive Therapy and Research, 14, 559-572.
- Frost, R. O., Marten, P., Lahart, C., & Rosenblate, R. (1990). The dimensions of perfectionism. Cognitive Therapy and Research, 14, 449-468.
- Garner, D., Garfinkel, P., & Bemis, K. (1982). A multidimensional psychotherapy for anorexia nervosa. *International Journal of Eating Disorder*, 1, 3-64.
- Goldfried, M. R., & Sobocinski, D. (1975). Effect of irrational beliefs on emotional arousal. Journal of Consulting and Clinical Psychology, 43, 504-510.
- Hamachek, D. E. (1978). Psychodynamics of normal and neurotic perfectionism. *Psychology*, 15, 27-33.
- Hewitt, P. L., & Dyck, D. (1986). Perfectionism, stress, and vulnerability to depression. Cognitive Therapy and Research, 10, 137-142.
- Hewitt, P. L., & Flett, G. L. (1990a). Perfectionism and depression: A multidimensional analysis. *Journal of Social Behavior and Personality*, 5, 423-438.
- Hewitt, P. L., & Flett, G. L. (1990b). Perfectionism in the self and social contexts: Conceptualization, assessment, and association with psychopathology. *Journal of Personality and Social Psychology*, 60, 456-470.
- Hollender, M. H. (1965). Perfectionism. Comprehensive Psychiatry, 6, 94-103.
- Hoover, C. F., & Insel, T. R. (1984). Families of origin in obsessive-compulsive disorder. Journal of Nervous and Mental Disease, 172, 207-215.
- Katzman, M., & Wolchik, S. (1984). Bulimia and binge eating in college women: A comparison of personality and behavioral characteristics. *Journal of Consulting and Clinical Psychology*, 52, 423-428.
- LaPointe, K.., & Crandell, C. (1980). Relationship of irrational beliefs to self-reported depression. Cognitive Therapy and Research, 4, 247-250.
- Lo, W. (1969). Aetiological factors in childhood neurosis. British Journal of Psychiatry, 115, 889-894.
- McCranie, E. W., & Bass, J. D. (1984). Childhood family antecedents of dependency and self-criticism: Implications for depression. *Journal of Abnormal Psychology*, 93, 3-8.
- Missildine, W. H. (1963). Your inner child of the past. New York: Simon & Schuster.
- Nelson, R. E. (1977). Irrational beliefs in depression. *Journal of Consulting and Clinical Psychology*, 45, 1190-1191.
- Ordman, A., & Kirschenbaum, D. (1986). Bulimia: Assessment of eating, psychological adjustment, and familial characteristics. *International Journal of Eating Disorders*, 5, 865-878.
- Pacht, A. R. (1984). Reflections on perfection. American Psychologist, 39, 386-390.
- Pirot, M. (1986).. The pathological thought and dynamics of the perfectionist. *Individual Psychology: Journal of Adlerian Theory, Research and Practice, 42, 51-58.*
- Quadland, M. C. (1980). Private self-consciousness, attribution of responsibility, and perfectionistic thinking in secondary erectile dysfunction. *Journal of Sexual and Marital Therapy*, 6, 47-55.
- Rachman, S. J. (1976). Obsessional-compulsive checking. Behaviour Research and Therapy, 14, 269-277.

Rachman, S. J., & Hodgson, R. J. (1980). Obsessions and compulsions, Englewood Cliffs, NJ: Prentice-Hall.

- Rasmussen, S. A., & Tsuang, M. T. (1986). Clinical characteristics and family history in DSM-III obsessive-compulsive disorder. *American Journal of Psychiatry*, 143, 317-322.
- Steketee, G., Grayson, J., & Foa, E. (1985). Obsessive-compulsive disorder: Differences between washers and checkers. *Behaviour Research and Therapy*, 23, 197-201.
- Steketee, G., Grayson, J., & Foa, E. (1987). A comparison of characteristics of obsessive-compulsive disorder and other anxiety disorders. *Journal of Anxiety Disorders*, 1, 325-335.
- Thompson, D. A., Berg, K. M., & Shatford, L. A. (1987). The heterogeneity of bulimic symptomatology: Cognitive and behavioral dimensions. *International Journal of Eating Disorders*, 6, 215-234.
- Toner, B., Garfinkel, P., & Garner, D. (1986). Long-term follow-up of anorexia nervosa. *Psychosomatic Medicine*, 48, 520-529.
- Trexler, L. D., & Karst, T. O. (1973). Further validation for a new measure of irrational cognitions. *Journal of Personality Assessment*, 37, 150-155.