Anxiety, OCD and Perfectionism

Roz Shafran

UCL Great Ormond Street Institute of Child Health

RCPsych Eating Disorders Conference
4 November 2016
The problem of comorbidity
The problem of comorbidity

Perfectionism as a potential solution
The problem of comorbidity

Perfectionism as a potential solution

Understanding and treatment of perfectionism
The problem of comorbidity
The problem of comorbidity

Perfectionism as a potential solution
• Eating disorders are characterized by high-level perfectionism which endures after recovery
• Perfectionism appears to have a predispositional significance for the development of eating disorders
• Some evidence of specificity and perfectionism is elevated in eating disordered individuals with high levels of psychiatric comorbidity.

Anna Bardone-Cone et al., 2007
Association of two types of perfectionism with eating disorders: wanting to achieve high personal standards (PS) and the degree of concern and self-criticism generated when it is perceived that standards are not met.

“Those whose standards are high beyond reach or reason, people who strain compulsively and unremittingly toward impossible goals and who measure their own worth entirely in terms of productivity and accomplishment”
Normal vs. neurotic
Functional vs. dysfunctional
Healthy vs. unhealthy

Unhealthy and Healthy

Domain in which perfectionism expressed
Importance of achievement to self-evaluation
Healthy striving for excellence

- High standards but
- Learn from mistakes
- Tolerate uncertainty
- Judge achievements objectively
- Achievable
Healthy striving for excellence

- High standards but
- Learn from mistakes
- Tolerate uncertainty
- Judge achievements objectively
- Achievable

“I’VE BEEN CALLED MANY NAMES LIKE PERFECTIONIST, DIFFICULT AND OBSESSIVE. I THINK IT TAKES OBSESSION, TAKES SEARCHING FOR THE DETAILS FOR ANY ARTIST TO BE GOOD.”

BARBRA STREISAND

© Lifehack Quotes
Healthy striving for excellence

- High standards but
- Learn from mistakes
- Tolerate uncertainty
- Judge achievements objectively
- Achievable

Unhealthy perfectionism

- Same high standards but
- Likely to be unrealistic
- React to mistakes in catastrophic manner
- Uncertainty highly aversive
- Constant perception failure
- Self-esteem overly dependent on striving and achievement
Driven Academic Achiever who must achieve 110%
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Risk Evader with the all-or-nothing approach who lacks the confidence to try new things
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Controlling Image Manager who wants to be perfect and be regarded as perfect

NEGATIVE IMPACT

Relationships  (Habke & Flyn, 2002)

Physical health  (Fry & Debats, 2009; Molnar et al., 2006)

Academic performance  (Hewitt, Flett, Mikail, 2016)
• Risk factor for development of eating disorders and depression (Fairburn et al., 1999; Hewitt, Flett, Ediger, 1996)

• Associated with multiple psychopathologies including suicidal ideation (Egan, Shafran & Wade, 2011)

• Some data (but mixed) regarding poor prognostic factor for successful treatment of Axis 1 disorders (Blatt et al., 1995; Mitchell et al., 2013; Kyrios et al., 2015; Wilhelm et al., 2015)
The problem of comorbidity

Perfectionism as a potential solution

Understanding and treatment of perfectionism
A cognitive-behavioural approach

Personally demanding standards pursued rigidly and persistently

Attention to failure at expense of success; discounting of success

Counter-productive behaviour such as over-thoroughness, checking, procrastination and avoidance

Anxiety, low mood, distress; self-defeating

Self evaluation dependent on striving and achievement

Shafran, Cooper & Fairburn, 2002
A cognitive-behavioural approach

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Anxiety, low mood, distress; Self-defeating – few (if any) pleasurable activities

Shafran, Cooper & Fairburn, 2002
Construes clinical perfectionism as a dysfunctional scheme for self-evaluation

Core Psychopathology: the overdependence of self-evaluation on the determined pursuit of personally demanding, self-imposed standards in at least one highly salient domain, despite adverse consequences
Personal standards and evaluative concerns dimensions of “clinical” perfectionism: A reply to Shafran et al. (2002, 2003) and Hewitt et al. (2003)

David M. Dunkley\textsuperscript{a,b,*}, Kirk R. Blankstein\textsuperscript{c}, Robin M. Masheb\textsuperscript{d}, Carlos M. Grilo\textsuperscript{d}

The Clinical Perfectionism Questionnaire: Further evidence for two factors capturing perfectionistic strivings and concerns

Joachim Stoeber\textsuperscript{a,*}, Lavinia E. Damian\textsuperscript{b}

\textsuperscript{a} School of Psychology, University of KwaZulu Natal, Durban, South Africa
\textsuperscript{b} Department of Psychology, Babes-Bolyai University, Romania
The aim was to define and understand a specific clinical concept in order to advance the understanding and treatment of certain psychiatric problems…the most important test is its clinical utility

Shafran et al., 2003

Patients needed help
Qualitative Evidence

- 21 participants – 15 with clinical perfectionism
- 14 female
- The mean age was 32.7 (SD: 11.6; range 18-56 years)

Self-evaluation

“I think probably, if I haven’t got something right, then, I’m not-I’m a bit of a worthless person. Or that I’m not good enough, sort of thing.”

“It would just be a total loss of security if I fell from this standard... I suppose it is a fear of... knowing that I would feel insecure inside myself.”
Striving

“There's always that little fear that if I ever stop, if I ever stop trying or ever stop working then it's all just going to fall down, and I won't have this kind of construct in my life, which supports everything I do.”

“It's like something you've just got to keep ticking over all the time, and you have to have that continual drive.”
Personally demanding standards

“...people would say, you’ve done really well, won’t you just cheer up? And I’d say but I didn’t do quite as well as I could have, and it’s not everybody else’s, it’s my own standards that are important...”

If I win a skating competition, then well, no, I’m not happy if I didn’t skate well.”
“...I got quite ill and I was thin, and pale, and exhausted, and yet I still drove myself to do all these things.”

“I was working ridiculously long hours, and put in every minute of effort into it I'd got, and that was stressful.”
“I avoided talking to my PhD supervisor for four years, because I was frightened he’d say forget it, just forget it, you’ve failed, so I just analysed and analysed my results…”

“I’m a compulsive maker of lists! I have lists of things that have to be there [in my essays]. It’s like, if I put these things in then I’ll have precluded all mistakes.”
The first pilot RCT

- $N = 20$ participants; high scorers on the *Clinical Perfectionism Examination* and the *Clinical Perfectionism Questionnaire*
- CBT treatment vs. a wait-list control condition
- Treatment $= 10$ sessions of individual CBT over 8 wks
- Treatment gains were maintained at 8- and 16-week follow-up
- Ten participants met criteria for an anxiety disorder or major depressive episode immediately prior to treatment, reducing to four participants at 16-week follow up

Meta-analysis of Intervention studies (n=8)

‘It is possible to significantly reduce aspects of perfectionism using a cognitive behavioural approach with short interventions in adults with perfectionism as a primary problem or in addition to psychiatric diagnoses’ p.705

Impact on treatment

• **Anorexia Nervosa (n=73):** Inpatient treatment for AN

• **Bulimia Nervosa (n=87):** Using guided self help

  **But**

• **Bulimia Nervosa:** Outcome for bulimia nervosa not predicted by pre-treatment levels of perfectionism

  Mussell et al., (2000); Sutandar-Pinnock et al. (2003); Steele, Bergin & Wade (2011)
Eating Disorders: In-patients

• n=61; adding an intervention for perfectionism did not enhance treatment outcome

But

• N=21 (completers); significant reductions in perfectionism

Prevention

688 Year 8-10 boys & girls across 4 schools who completed baseline
• 67.9% girls
• mean age 14.90 years, SD=1.01; range 11.82-18.02
• Control (N=367)
• Intervention (N=321)

4 waves of assessment
• Baseline
• Post-intervention
• 6-month follow-up
• 12-month follow-up

Nehmy & Wade, 2015
8-lesson intervention

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<tr>
<th>#</th>
<th>Lesson outline</th>
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<tbody>
<tr>
<td>1</td>
<td>Introduction, ground rules, motivational exercise; introduction to perfectionism; costs of unhelpful perfectionism; finding benefits in mistakes and failures</td>
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<tr>
<td>2</td>
<td>How thoughts affect feelings; identifying thinking errors associated with perfectionism; flexible thinking</td>
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<td>3</td>
<td>Media literacy with respect to perfectionism</td>
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<td>4</td>
<td>Learning about emotions</td>
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<td>5</td>
<td>Learning Helpful Thinking</td>
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<td>6</td>
<td>Dealing with procrastination, over commitment, and negative thinking biases; Perfectionism vs. ‘Optimalism’; Gratitude letters; gratitude journal</td>
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<td>7</td>
<td>Stress and self-criticism; self-compassion exercises</td>
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<td>8</td>
<td>Personal values; summary; motivational exercise (‘letter from the future’) &amp; review.</td>
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4 waves of assessment
- Baseline
- Post-intervention
- 6-month follow-up
- 12-month follow-up

Nehmy & Wade, 2015
125 children (47% female) across 3 schools who completed first assessment

- mean age 11.60 years (SD=0.82), 9.91-13.91 years
- Control (N=68)
- Intervention (N=57)

3 waves of assessment
- Baseline
- post-intervention
- 4-week follow-up

Study 2 Fairweather-Schmidt & Wade, 2015
# 2-lesson intervention

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<tr>
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<th>Activity example</th>
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<tr>
<td>1</td>
<td>Introduction &amp; ground rules, definition and description of perfectionism,</td>
<td>Look at Lisa Simpson trying to be perfect – discuss how this makes her feel, and how it impacts on her relationships.</td>
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<td></td>
<td>value of mistakes and persistence of experimentation</td>
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<td>2</td>
<td>Differentiating being perfect and ‘trying your best’; coping with disappointment;</td>
<td>The discovery of penicillin as an example of:</td>
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<td></td>
<td>coping with success; separating identity from achievement</td>
<td>People learn by taking risks and ‘having a go’ and sometimes learn accidentally when they least expect it, through mistakes or trial and error</td>
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Perfectionism: Striving

- Baseline: Intervention (d=0.47)
- Post-intervention: Control (d=0.40)
Other Interventions

• A new short-term psychodynamic/interpersonal group intervention for perfectionism based on a ‘comprehensive conceptualization’

• 71 participants were randomly assigned to the group treatment or a waitlist control.

• The intervention showed promise in terms of reducing various components of perfectionism at the end of treatment and at 4-month follow-up.

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<td>1. Understanding perfectionism</td>
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<td>2. Your Perfectionism Cycle</td>
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<td>3. Surveys and Experiments</td>
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<td>4. New Ways of Thinking</td>
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<td>5. Useful Skills for Managing Unhelpful Perfectionism</td>
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<td>6. Self-criticism or Self-compassion</td>
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<td>7. Re-examining the way we Examine our Self-worth</td>
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<td>8. Staying Well – Managing Unhelpful Perfectionism in the Long-term</td>
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Role of beliefs about effort and performance
Contains Video

Cognitive-Behavior Therapy for Compulsive Checking in OCD

Adam S. Radomsky, Concordia University
Roz Shafran, A. E. Coughtrey, University of Reading
S. Rachman, University of British Columbia
RULES!

1. You SHALL!
2. You WILL!
3. You MUST!
Future directions

Specificity

Targeting

Children and Young People
Conclusion

‘The greatest mistake you can make in life is to be continually afraid you will make one…’

Elbert Hubbard (1856 - 1915)

Or run over time…
‘Thank You’

Tracey Wade, Sarah Egan, Hannah Allcott-Watson, Tracey Wade, Lauren Robinson, Jovita Leung, Gerhard Andersson, George ‘Speedy’ Vlaescu, Julia Bowen, Sophie Cripps, Jean Stafford, Harriet Clarkson, Tuhina Bhattacharyya, Martha von Werthern, Chloe Yu Shu, Sarah Egan, Alexander Örtenholm, Stina Roos, Elisabet Thelander, Linnéa Trosell, Malin Skoglund, Andreas Landström, Matt Gittleson, Anna Gittleson