Suicide on Campus and the Pressure of Perfection

By JULIE SCELFo  JULY 27, 2015

Kathryn DeWitt conquered high school like a gold-medal decathlete. She ran track, represented her school at a statewide girls’ leadership program and took eight Advanced Placement tests, including one for which she independently prepared, forgoing the class.

Expectations were high. Every day at 5 p.m. test scores and updated grades were posted online. Her mother would be the first to comment should her grade go down. “I would get home from track and she would say, ‘I see your grade dropped.’ I would say, ‘Mom, I think it’s a mistake.’ And she would say, ‘That’s what I thought.’” (The reason turned out to be typing errors. Ms. DeWitt graduated with straight A’s.)

In her first two weeks on the University of Pennsylvania campus, she hustled. She joined a coed fraternity, signed up to tutor elementary school students and joined the same Christian group her parents had joined at their alma mater, Stanford.

But having gained admittance off the wait list and surrounded by people with seemingly greater drive and ability, she had her first taste of self-doubt. “One friend was a world-class figure skater. Another was a winner of the Intel science competition. Everyone around me was so spectacular and so amazing and I wanted to be just as amazing as they are.”

Classmates seemed to have it all together. Every morning, the
administration sent out an email blast highlighting faculty and student accomplishments. Some women attended class wearing full makeup. Ms. DeWitt had acne. They talked about their fantastic internships. She was still focused on the week’s homework. Friends’ lives, as told through selfies, showed them having more fun, making more friends and going to better parties. Even the meals they posted to Instagram looked more delicious.

Her confidence took another hit when she glanced at the cellphone screen of a male student sitting next to her who was texting that he would “rather jump out of a plane” than talk to his seatmate.

When, on Jan. 17, 2014, Madison Holleran, another Penn freshman, jumped off the top of a parking garage and killed herself, Ms. DeWitt was stunned. She had never met Ms. Holleran, but she knew the student was popular, attractive and talented. In a blog post soon afterward, Ms. DeWitt would write: “What the hell, girl?! I was supposed to be the one who went first! You had so much to live for!”

Despite her cheery countenance and assiduous completion of assignments, Ms. DeWitt had already bought razor blades and written a stack of goodbye letters to loved ones.

Ms. Holleran was the third of six Penn students to commit suicide in a 13-month stretch, and the school is far from the only one to experience a so-called suicide cluster. This school year, Tulane lost four students and Appalachian State at least three — the disappearance in September of a freshman, Anna M. Smith, led to an 11-day search before she was found in the North Carolina woods, hanging from a tree. Cornell faced six suicides in the 2009-10 academic year. In 2003-4, five New York University students leapt to their deaths.

Nationally, the suicide rate among 15- to 24-year-olds has increased modestly but steadily since 2007: from 9.6 deaths per 100,000 to 11.1, in 2013 (the latest year available from the Centers for Disease Control and Prevention). But a survey of college counseling centers has found that more than half their clients have severe psychological problems, an increase of 13 percent in just two
years. Anxiety and depression, in that order, are now the most common mental health diagnoses among college students, according to the Center for Collegiate Mental Health at Penn State.

Soon after Ms. Holleran’s death, Penn formed a task force to examine mental health on campus. Its final report, issued earlier this year, encouraged the school to step up outreach efforts, expand counseling center hours, and designate a phone line so that anyone with concerns could find resources more easily. It also recognized a potentially life-threatening aspect of campus culture: Penn Face. An apothegm long used by students to describe the practice of acting happy and self-assured even when sad or stressed, Penn Face is so widely employed that it has showed up in skits performed during freshman orientation.

While the appellation is unique to Penn, the behavior is not. In 2003, Duke jolted academe with a report describing how its female students felt pressure to be “effortlessly perfect”: smart, accomplished, fit, beautiful and popular, all without visible effort. At Stanford, it’s called the Duck Syndrome. A duck appears to glide calmly across the water, while beneath the surface it frantically, relentlessly paddles.

“Nobody wants to be the one who is struggling while everyone else is doing great,” said Kahaari Kenyatta, a Penn senior who once worked as an orientation counselor. “Despite whatever’s going on — if you’re stressed, a bit depressed, if you’re overwhelmed — you want to put up this positive front.”

Citing a “perception that one has to be perfect in every academic, cocurricular and social endeavor,” the task force report described how students feel enormous pressure that “can manifest as demoralization, alienation or conditions like anxiety or depression.”

William Alexander, director of Penn’s counseling and psychological services, has watched a shift in how some young adults cope with challenges. “A small setback used to mean disappointment, or having that feeling of needing to try harder next time,” he said. Now? “For some students, a mistake has incredible meaning.”

Meeta Kumar, who has been counseling at Penn for 16 years, has noticed
the same change. Getting a B can cause some students to fall apart, she said. “What you and I would call disappointments in life, to them feel like big failures.”

As the elder child of a civil engineer and preschool teacher in San Mateo, Calif., Ms. DeWitt, now 20, has understood since kindergarten that she was expected to attend an elite college. While she says her parents are not overbearing, she relishes their praise for performing well. “Hearing my parents talk about me in a positive way, or hearing other parents talk about their kids doing well in academics or extracurriculars, that’s where I got some of the expectations for myself,” she said. “It was like self-fulfillment: I’d feel fulfilled and happy when other people were happy with what I’m doing, or expectations they have are met.”

Penn had felt like a long shot but was her top choice. When she was admitted off the wait list in June 2013, she made a pact with herself not to squander the precious opportunity. Over that summer, she studied the course catalog, and decided that declaring a major early would help her plan more efficiently. She chose math, envisioning a teaching career. “I’m a person who lives by a schedule,” she said. “I have a plan for maybe the next two years, next three years, maybe five years.”

And so she had made a plan for making her life turn out the way she thought it was supposed to. “I had the idea that I was going to find this nice Christian boyfriend at college and settle down and live the life my parents had led,” she said.

But there was the issue of her sexuality. Several times in high school she had found herself attracted to other girls, but believing her parents and church did not fully accept homosexuality, she had pushed aside those feelings. Her resolve was strengthened when her father sat her down for a heartfelt speech about how proud he was of her getting into Penn and of the direction her life was going. “Tears rolling down his face, he said, ‘Kathryn, the reason I’m living is to pass you off to your husband.’”
Now, upon noticing a cute girl in her dorm, she had a terrifying realization: “I couldn’t deny it anymore.”

Every day, she grew more despondent. She awoke daily at 7:30 a.m. and often attended club meetings until as late as 10 p.m. She worked 10 hours a week as part of her financial aid package, and studied furiously, especially for her multivariable calculus class. Would she never measure up? Was she doing enough? Was she taking full advantage of all the opportunities?

Then came a crushing blow: a score in the low 60s on her calculus midterm. The class was graded on a curve, but surely she would fail it, she thought, dooming her plan to major in math and to teach.

“I had a picture of my future, and as that future deteriorated,” she said, “I stopped imagining another future.” The pain of being less than what she thought she ought to be was unbearable. The only way out, she reasoned with the twisted logic of depression, was death.

She researched whether the university returned tuition to parents of students who die by suicide, and began cutting herself to “prepare” for the pain.

The existential question “Why am I here?” is usually followed by the equally confounding “How am I doing?” In 1954, the social psychologist Leon Festinger put forward the social comparison theory, which posits that we try to determine our worth based on how we stack up against others.

In the era of social media, such comparisons take place on a screen with carefully curated depictions that don’t provide the full picture. Mobile devices escalate the comparisons from occasional to nearly constant.

Gregory T. Eells, director of counseling and psychological services at Cornell University, believes social media is a huge contributor to the misperception among students that peers aren’t also struggling. When students remark during a counseling session that everyone else on campus looks happy, he tells them: “I walk around and think, ‘That one’s gone to the hospital. That person has an eating disorder. That student just went on antidepressants.’ As a
therapist, I know that nobody is as happy or as grown-up as they seem on the outside.”

Madison Holleran’s suicide provided what might be the ultimate contrast between a shiny Instagram feed and interior darkness. Ms. Holleran posted images that show her smiling, dappled in sunshine or kicking back at a party. But according to her older sister, Ashley, Madison judged her social life as inferior to what she saw in the online posts of her high school friends. An hour before she killed herself, she posted a dreamy final photo of white holiday lights twinkling in the trees of Rittenhouse Square.

Where the faulty comparisons become dangerous is when a student already carries feelings of shame, according to Dr. Anthony L. Rostain, a pediatric psychiatrist on Penn’s faculty who was co-chairman of the task force on student psychological health and welfare. “Shame is the sense one has of being defective or, said another way, not good enough,” Dr. Rostain said. “It isn’t that one isn’t doing well. It’s that ‘I am no good.’” Instead of thinking “I failed at something, these students think, ‘I am a failure.’”

America’s culture of hyperachievement among the affluent has been under scrutiny for at least the last decade, but recent suicide clusters, including the deaths of three high school students and one recent graduate in Palo Alto, Calif., have renewed the debate. “In the Name of College! What Are We Doing to Our Children?” blared a Huffington Post headline in March. Around the same time, the New York Times columnist Frank Bruni published “Where You Go Is Not Who You’ll Be: An Antidote to the College Admissions Mania,” which he was inspired to write after years of observing the insanity surrounding the process — not only among students but also their parents. Numerous other alarms have been sounded over helicopter parenting, and how it robs children of opportunities to develop independence and resiliency, thereby crippling them emotionally later in life. These cultural dynamics of perfectionism and overindulgence have now combined to create adolescents who are ultra-focused on success but don’t know how to fail.

Beginning in 2002, when she became dean of freshmen at Stanford, Julie Lythcott-Haims watched the collision of these two social forces up close. In
meetings with students, she would ask what she considered simple questions and they would become paralyzed, unable to express their desires and often discovering midconversation that they were on a path that they didn’t even like.

“They could say what they’d accomplished, but they couldn’t necessarily say who they were,” said Ms. Lythcott-Haims. She was also troubled by the growing number of parents who not only stayed in near-constant cellphone contact with their offspring but also showed up to help them enroll in classes, contacted professors and met with advisers (illustrating the progression from helicopter to lawn mower parents, who go beyond hovering to clear obstacles out of their child’s way). But what she found most disconcerting was that students, instead of being embarrassed, felt grateful. Penn researchers studying friendship have found that students’ best friends aren’t classmates or romantic partners, but parents.

Children “deserve to be strengthened, not strangled, by the fierceness of a parent’s love,” Ms. Lythcott-Haims wrote in a 2005 op-ed piece for The Chicago Tribune. If by adulthood they cannot fend for themselves, she asked, “shouldn’t we worry?”

Eventually she came to view her students’ lack of self-awareness, inability to make choices and difficulty coping with setbacks as a form of “existential impotence,” a direct result of a well-meaning but misguided approach to parenting that focuses too heavily on external measures of character. In June, Ms. Lythcott-Haims, who left Stanford in 2012, published a book on the subject, “How to Raise an Adult: Break Free of the Overparenting Trap and Prepare Your Kid for Success.”

These observations echo those made by the psychologist Alice Miller in her seminal book for therapists, “The Drama of the Gifted Child: The Search for the True Self.” In the book, published in 1979 and translated into 30 languages, Ms. Miller documents how some especially intelligent and sensitive children can become so attuned to parents’ expectations that they do whatever it takes to fulfill those expectations — at the expense of their own feelings and needs. This can lead to emotional emptiness and isolation. “In what is described as depression and experienced as emptiness, futility, fear of impoverishment, and
loneliness,” she wrote, “can usually be recognized as the tragic loss of the self in childhood.”

Ms. DeWitt had said goodbye and provided explanations to close friends and relatives on pink rose-adorned paper, stacked up neatly on her desk. Her roommate noticed that she had stopped eating after Madison Holleran’s suicide, expressed concern and invited conversation. During an hourlong discussion, Ms. DeWitt disclosed how she had been contemplating suicide, but she pretended those feelings had gone away. To make sure her denial was convincing, she tossed the letters in the recycling bin.

But when the roommate returned hours later, she discovered that the letters had been taken out of the trash, and she told a resident adviser, who contacted the house dean. The dean insisted that Ms. DeWitt go for counseling. She did, and was immediately hospitalized.

After lots of counseling, a leave of absence and an internship at the headquarters of Active Minds, a nonprofit youth mental health advocacy group in Washington, D.C., Ms. DeWitt returned to campus in January.

Elite colleges often make it difficult for students to take time off, and readmission is not always guaranteed, something frequently cited as a deterrent to getting help (Yale eased its policy in April after a student’s suicide note expressed anguish over readmission). Other elite schools are likewise examining the issue. When Ms. DeWitt’s mother came to visit her in the hospital, one of the first things she brought up was the readmittance process.

Both of Ms. DeWitt’s parents confirmed the contents of this article but declined to provide comments beyond expressing their love and support and saying, in a jointly written email, “Her courage and resilience have been a real blessing and example to us. We want to give Kathryn the opportunity to tell her own story.”

Ms. DeWitt has tried to forge a new path for herself that is kinder and more forgiving. Rather than stay involved with the Christian group favored by her
parents, she joined the progressive-minded Christian Association and the Queer Christian Fellowship, where she feels comfortable talking about her newly found identity as a lesbian. She was among the first students to write openly about her emotional state for Pennsive, a blog started to create “a safe space for Penn students to better understand and openly discuss issues regarding mental health.”

Other efforts at Penn include the formation of a peer counseling program, to start in the fall, and the posting of “ugly selfies” to Instagram and Facebook, a perfectionism-backlash movement that took place for a few weeks earlier this year. Nationally, researchers from 10 universities have joined forces to study resiliency, and the Jed and Clinton Health Matters Campus Program has enlisted 90 schools to help develop mental health and wellness programs. Active Minds, which was founded at Penn in 2001, now has more than 400 chapters, including ones at community colleges and high schools. Ms. DeWitt is the Penn chapter’s webmaster.

These days, Ms. DeWitt’s lime-green watch covers up a scar where she had cut herself. But she is less concerned about covering up her true self. She has confessed her sexual feelings to her parents. They are working on acceptance. “My mom is there,” Ms. DeWitt said. “My dad is still working on it.” Having made it through her first year — the 60-something on her calculus midterm, graded on a curve, ended up netting her an A minus — she has become a lot more relaxed about her grades, her life and her future. “I’m probably going to major in psychology,” she said. Her career plans are up in the air, an uncertainty that would have been intolerable to her former self.

“I need some experience before I make the decision. It’s nice to have the freedom not to know.”

**Correction: August 2, 2015**

*An article on Page 14 this weekend about student mental health on campus misstated the suicide rate among 15- to 24-year-olds. It was 11.1 deaths per 100,000 in 2013 and 9.6 in 2007, not 11.1 percent and 9.6 percent.*

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