

Impostor Phenomenon in an Interpersonal/Social Context: Origins and Treatment

Pauline Rose Clance
Debbara Dingman
Susan L. Reviere
Dianne R. Stober

ABSTRACT. The impostor phenomenon is considered in relation to origins in interpersonal and social contexts. Specifically, messages given in the family and in society via gender-role socialization are examined as catalysts for impostor feelings. Impostor feelings in relation to success and social mobility in women also are addressed. Given this interpersonal/social context, the authors suggest that the most efficacious treatment modality for the impostor phenomenon is a feminist-oriented women's group. The phases of women's impostor groups are outlined and general group issues are noted.

As psychotherapists and educators, Clance and Imes (1978) encountered many accomplished women who disclosed the secret belief that they were undeserving of the success and recognition they earned. They described a sample of more than 150 high-achieving women who shared the conviction that they were truly less competent and less intelligent than they appeared to be. These

Pauline R. Clance, PhD, is Professor of Psychology at Georgia State University; Debbara Dingman, PhD, is in private practice in Atlanta, GA; and Susan Reviere, MA, and Dianne Stober, MA, are advanced doctoral students in Clinical Psychology at Georgia State University.

Address correspondence to: Dr. Pauline Rose Clance, Department of Psychology, Georgia State University, Atlanta, GA 30303.

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women attributed their achievements to error, luck, charm, or sensitivity rather than to ability; they were terrified that they would eventually be discovered in their charade. Clance and Imes (1978) documented these clinical observations and called this experience the impostor phenomenon.

We propose here that, particularly for women, this phenomenon is rooted in interpersonal and social contexts, in that both the family and female gender-role socialization in a predominantly male-normed social system form the backdrop for impostor feelings. And although both women and men experience impostor feelings, we focus here on the significant challenges faced by women in overcoming *both* intrapsychic and sociocultural determinants of such patterns. Thus, we suggest that the impostor phenomenon in females is perhaps best conceptualized and treated in the interpersonal/social context provided in a group therapy milieu.

OVERVIEW OF IMPOSTOR PATTERNS

The client who experiences the impostor phenomenon is unable to internalize a sense of being talented and competent and, instead, attributes success to external factors unrelated to ability (Langford & Clance, 1993). She compares herself to others, emphasizing their strengths and her own deficits, while minimizing weakness in others and power in herself. She may report feeling overwhelmed by tasks, even those similar to previous assignments that she has successfully completed. She may procrastinate and later become immobilized by deadlines and her fear of failure. She might even begin to avoid all intellectual challenge, as she struggles with a constant fear of being unable to maintain the "facade" of success. She demands that her work be perfect, and as a result, she cannot escape disappointment. Feelings of anxiety, fear, and depression are common, resulting from pressure to live up to a successful image while dreading exposure as unworthy and incompetent.

Clance and Imes (1978) identified the behaviors that maintain the impostor phenomenon in the face of objective evidence of ability and competence, and they articulated a pattern which reinforces the impostor phenomenon feelings. This pattern begins when the client is offered a new opportunity, faces a new project, or starts any

challenging occupational task. She is likely to respond in one of two ways: she will either get to work immediately and over-prepare for the challenge, or she will procrastinate until the final hour when she will engage in a frenzy of activity. If she over-prepared, she will tell herself that she must work harder than others to be successful, and thus is an impostor. If she procrastinated and finished in a flurry, she will tell herself that she fooled them again with a last-minute hurry-up job, and thus is an impostor. Either way she forfeits the affirmation of a job well-done. The cycle continues as the client completes the task and often gains external recognition for her performance. After a successful outcome, she begins to believe that dread, worry, doubt, and anxiety are necessary ingredients of success. The pain is reinforced by the success, and her achievement takes on a magical quality. She experiences only a short-lived sense of accomplishment and relief before she encounters her next challenge and the cycle begins anew. Since the cycle is reinforced, it is difficult to break.

Similarly, Clance and Imes identified several other means by which women perpetuate the impostor phenomenon cycle. Some seek approval from a mentor or a superior by using flattery, censoring their own opposing opinions, giving friendship, or even tolerating sexual harassment, all of which may contribute in some small way to success. Social skills and office politics do, indeed, smooth the professional waters, but the client who has employed such tactics later views any and all approval she earns as indiscriminate or unfounded and over-emphasizes the contribution of her political skills to negate her achievement. In these cases the "baby is thrown out with the bathwater": because some manipulation may have been involved, the impostor phenomenon client may dismiss her very real competence.

Clance and Imes further note that in some instances success is indeed due in part to variables such as luck, sensitivity, charm, attractiveness, or being in the right place at the right time. Such successes reinforce impostor feelings and make it difficult to internalize earned success. In one case, a young woman who was volunteering at a public radio station was asked to fill in for a talk show host who had taken ill. Ten years later, she is a respected and successful host of her own show. She still clings, however, to the

belief that she is lucky rather than competent. In this instance, the client fails to recognize her ability to make the best use of luck and opportunity, and in ignoring her talent she is typical of many who experience the impostor phenomenon.

Such patterns can be problematic for the impostor client in many ways. For example, she may not achieve to her full potential, at times even refusing opportunities to advance; she has difficulty enjoying success and, to the contrary, may feel haunted by that success; she does not have a realistic sense of her own competence; and she is not fully empowered to internalize and manifest her strengths, allow deficits, and fully pursue and experience fulfillment (Clance & O'Toole, 1988).

ORIGINS: THE FAMILY

The impostor phenomenon is brought about by experiences in which the child is only selectively validated and generally unsupported in a family system often rife with conflict but without channels for expression. The child tries to gain support and develop a secure identity and stable self-esteem in this environment by working excessively hard to please others (Langford & Clance, 1993). The impostor phenomenon client may report feeling ashamed for failing to live up to her parents' standards of perfection, and as a result, tends to have extremely unrealistic expectations of herself. She often believes that she should know without having been taught and is embarrassed to ask for instruction. Equating each mistake with total failure, she expects to be humiliated when she does not succeed on a first attempt.

If early in life a child finds that her parents value certain aspects of herself more highly than other aspects, she quickly learns to discriminate accordingly; at an unconscious level she strives to develop attributes which are deemed worthy by her parents and to deny qualities in herself which are less valued by them. With time, the child will introject the values of the parents. She will become just as selective in her self-regard as her parents are in the positive regard which they show toward her. For example, if a child is recognized in her family only for being attractive and socially skilled, she is likely to take note and to be proud of situations in

which she demonstrates these qualities. Such events are consistent with the conditions of worth she has internalized from her parents into her developing self-concept.

On the other hand, events which are inconsistent with her self-concept go unrecognized or are distorted. Such distortion is often revealed in research on the impostor phenomenon. In one study (Stahl, Turner, Wheeler, & Elbert, 1980), 55 percent of the high-achieving minority female science students sampled cited factors other than intelligence as primary reasons for their achievement. Seventy-nine percent stated that their teachers overestimated their abilities, and 24 percent said that they put much more time and effort into their studies than did others.

Recognition of parts of self (even positive ones) which are incongruent with the self-concept is threatening and leads to a state of anxiety. Thus, a girl whose family never recognized or celebrated her intelligence does not integrate intelligence into her self-concept. When as a woman she is shown to be intelligent, she is likely to distort the experience to keep it congruent with her sense of self. She may acknowledge the fact of her accomplishment but will misinterpret the method by which it was achieved, perhaps stressing her hard work or the leniency of the instructor rather than emphasizing her ability.

ORIGINS: SOCIETY

Similarly, society imposes values upon children, and these too must be faced by the developing child. That which is socially desirable in males is different than that which is valued in females. In this culture, the traits expected in males seem to cluster around competence and objectivity, while for females the emphasized attributes are warmth and expressiveness. The very qualities which are recognized as essential to success and achievement—*independence, assertiveness, power, self-confidence, and directness*—are the qualities against which a woman must defend if she is to maintain an image of herself as feminine by the societal standards which she has likely internalized and over-learned by a very early age (Fagot & Leinbach, 1989; Slaby & Frey, 1975). In fact, Jean Baker Miller (1991) suggests that for a female, the claiming of power is associated

with fears of selfishness, destructiveness, and abandonment of and by others. Specifically, she considers the perception of power in a woman as "psychic equivalent of being a destructively aggressive person. This is a self-image that few women can bear. In other words, for many women it is more comfortable to feel inadequate" (p. 202).

Thus, on an unconscious level the impostor phenomenon allows a woman to deal with her ambivalence about being successful, by allowing her to keep her achievement out of her awareness. She may deny that she is successful or she may attribute her success to more acceptable and traditionally feminine skills: awareness of the feelings of others, helpfulness, sociability, or the ability to communicate easily. In a society which expects men to be instrumental and women to be expressive, it is difficult for a woman to cross domains and succeed without some degree of guilt and confusion.

Indeed, as Surrey (1991) points out, a woman may come to feel disconnected from her own experience in struggling to master the incongruities between early relational (i.e., "feminine") expectations and later societal requirements for a type of maturity equated with independence and self-sufficiency. Gilligan (1982) discusses such inconsistencies as "personal doubts that invade women's sense of themselves" (p. 49). As a result, a woman may then learn to attribute her achievement to sources other than her own skill or intelligence in order to quell the anxiety aroused by such social inconsistencies (Ayers-Nachamkin, 1992).

In another line of thinking about social origins of impostor feelings, McIntosh (1985) has discussed the normative power hierarchy, or pyramid, topped by white males in this society. She notes that women, minorities, and other disenfranchised individuals are socialized in many realms to exist at the base of that pyramid. She notes, "people feel fraudulent especially when ascending in hierarchies in which by *societal definition* they do not belong at the top of the pyramid . . . (where) there is less territory but more power . . ." (p. 3). In fact, from this perspective, impostor feelings might be particularly problematic for women of color in that they have not only family and gender-role expectations, but also stereotyped racial role expectations and oppression to face. The result then is a narrow choice of "appropriate" roles and images despite circum-

stances and realities that both offer and demand the assumption of a wide range of roles and functions (Greene, 1992).

While many women do manage in multiple roles and functions, both traditionally "feminine" and otherwise, they do so often with considerable discomfort. Women often attempt to be successful at work without neglecting any of their traditional family duties. They are actually performing adequately in two full-time careers, working outside and inside the home. Yet they often feel like failures if either job is not done to perfection.

This experience is commonly reported by the impostor phenomenon women we see. One client, a successful businesswoman, described her sense of failure with her family because her house was only superficially clean. Objectively, she performed excellently as a businesswoman and adequately as a housekeeper; but she believed that it was incumbent upon her to be perfect everywhere. If she wasn't perfect, she must be an impostor.

Traditional gender differences manifest themselves in what is given to women as well as what is expected from them. Galliano (1980) found that young male college students (age 18-24) were likely to be receiving financial support from their families while young female college students more often reported receiving emotional support. In addition, older female students (age 30-50) reported that their significant others were unsupportive of their decision to return to college.

Women are inculcated with these societal values which are usually not overtly communicated, discussed, or examined. For example, Gloria Steinem (1983) notes in the introduction to her first book after 20 years as a journalist:

I noticed that many of my male contemporaries who were felling forests and filling bookstores with their hard-cover works were not better writers than I. Some were much worse. Others had imitative ideas that hardly seemed worth the death of one tree. In the first light of early consciousness, I also noticed that most of them had wives, secretaries, and girl friends who researched, typed, edited, and said reverential things like, "Shhh, Norman is working." Meanwhile, I felt so "unfeminine" about admitting that I, too, loved and was ob-

sessed with my work and that, unlike those male colleagues, I never asked friends and lovers for help with research or other support, and rarely put writing ahead of their social schedules. I never even said firmly, "I want to work." Instead, I shuffled and apologized and said, "I'm terribly sorry, but I have this awful deadline." Only later did I understand that a need for external emergencies to justify "unfeminine" work is common to many women . . . In fact, one measure of women's ingenuity may be the wide variety of ways we have found male authority, economic circumstance, or other good reasons to justify doing what we wanted to do anyway. This subterfuge allows us to maintain a passive, "feminine" stance while secretly rebelling. Like most deceptions, it is a gigantic waste of inventiveness and time. (p. 20)

Society expects certain behaviors from its members. Women, as a part of the society, share these expectations. They internalize them and make them their own on an unconscious level. Thus, they often do not expect themselves to be successful. They do not look for support to return to school. They do not expect their lovers to type or edit, or even to take their work seriously. They are not surprised when they work harder and longer than others. They may think impostor phenomenon feelings are normal and not seek help, or they may even deny that they are successful enough to suffer from the impostor phenomenon.

CONVERGENCE IN FAMILY/SOCIAL ROLE EXPECTATIONS

When a woman becomes different from her family of origin, she becomes vulnerable to the impostor phenomenon. This may occur when she chooses a non-traditional lifestyle or surpasses family norms in terms of education or occupation. This vulnerability may also occur for individuals from cultural groups which have traditionally been discriminated against in society. By achieving more than has been seen as "proper" for her group, a woman may experience conflict in being different from her family or cultural group. Setting oneself apart in these ways can lead to psychological con-

flict, a sense that "you can't go home again." This conflict can be reconciled by distorting one's success: by suffering the impostor phenomenon.

In a study of 80 successful career women, Hirschfield (1982) focused on parental career orientation and looked at one way in which a daughter can be different in her family. She found traditional parental career orientation to be a significant predictor of the impostor phenomenon. That is, a woman whose family values dictate devotion to home and family is vulnerable to the impostor phenomenon if she pursues a career, while a woman whose career aspirations are consistent with family expectations is less vulnerable to the impostor phenomenon.

Dingman (1987), in studying the impostor phenomenon in relation to social mobility, further noted the integration of family and social role expectations. In a study of 50 male and female members of the business community, she found one key gender-related difference: women's impostor phenomenon scores rose with an increase in social mobility scores while men's impostor phenomenon scores were unrelated to their social mobility. Considering familial and social expectations, it is not surprising to find that a woman who achieves social mobility via educational and career attainment (vs. more traditional avenues such as marriage and family) is vulnerable to the impostor phenomenon. Such a woman has broken with tradition, broken away from her family and in breaking new ground is unsure of herself and unsure of what the future holds.

In therapy, the therapist and the client together work to discover the specific combination of societal and family messages and dynamics that have instilled impostor feelings. The therapist then can assist the client to remember, discover, and analyze how she developed the impostor phenomenon feelings which are often a mystery to her. The therapeutic process is necessary to begin to unravel this mystery.

TREATMENT

One of the most exciting and effective treatment modalities for women struggling with the impostor phenomenon is group psychotherapy. (For specific information about individual therapy strategies see Clance and Imes (1978) and/or Clance (1985), chapter 3.)

The impostor phenomenon, viewed as primarily a discrepancy between one's perception of one's achievements and success and others' perceptions, is distinctly interpersonal. For this reason, the group is the preferred treatment setting. In the group, both interpersonal and intrapersonal aspects of the impostor phenomenon can be explored and resolved. In addition, social expectations can be addressed. And finally, the group provides a relational network in which a female client can explore, take risks, and empower herself in connection rather than in fierce independence. This very self-in-relation experience can build a complementary loop addressing the building of both intrapsychic strengths to manage social pressures and interpersonal support and feedback to support intrapsychic growth.

We will discuss women's impostor groups in which the clients have been self- or therapist-referred with identified impostor phenomenon issues. Although there are specific, exciting challenges unique to mixed groups, those are beyond the scope of the present paper.

WOMEN'S IMPOSTOR GROUPS

The women's theme-centered impostor phenomenon group moves through three stages. First the members recognize and claim the impostor phenomenon identity. Next, the group becomes expert in recognizing impostor phenomenon feelings, thoughts, and behaviors in themselves and each other thus forming a cohesive identity. Finally, the group members support one another in taking new non-impostor phenomenon risks.

In the first stage the group members recognize, describe, and understand how impostor phenomenon feelings are occurring in many facets of their lives. The therapist helps the clients to look at impostor phenomenon feelings and may engage the group in personal explorations of ways impostor feelings have been taught by families and by society (McIntosh, 1985).

In the feminist spirit of equating the personal with the political, the therapist might also encourage the awareness that feeling like impostors implicitly acknowledges and perpetuates the social hierarchies or pyramids. This, in turn, perpetuates the existence of

impostor feelings in disenfranchised individuals (McIntosh, 1985). Interactions in the group underlined by this awareness allow the group members to explore the broad impact of impostor phenomenon feelings on their lives and relationships.

For example, one client in such a group was extremely helpful to other members but shared little of her own process. When confronted by her peers, this client shared her feeling that she was not as successful as the other members and that she did not have impostor issues as such, but was a true impostor both in the group and in her career. The group process led to exploration of this self-defeating belief system and an awareness for the client of how rejected the other members were feeling by her lack of disclosure. Thus, as this example demonstrates, this first stage allows the client to make public, usually for the first time in her life, the secretly held fears and beliefs about not being a truly successful person in her field. As such, group members gain knowledge of the myriad ways in which they discount themselves and their successes.

In a group setting many eyes and ears are available to detect irrational, unrealistic, and inconsistent belief systems. Often in our groups a member will begin a story about her work to be interrupted in a caring yet playful way by other members who spot self-defeating logic. "I'm waiting for the 'but' in your story" or "how did you manage to negate this one?" are commonly heard in impostor phenomenon women's groups. While it is harder for the client to negate several people in group who are making such observations, the client in individual therapy is likely to dismiss feedback from the therapist in the manner that is second-nature for those with the impostor phenomenon. She may think or say "you do not know the whole truth," "you only think that because you care about me," or "you are my therapist: you're paid to be supportive." This is more difficult to do in a group setting. Thus the group environment is more powerful in confronting the overpracticed impostor phenomenon experience. However, in allowing safe challenge, the therapist must be reminded that the impostor client's fears and doubts must be taken seriously and understood, as she likely has experienced a lifetime of being discounted in regard to these feelings and many others (Clance & O'Toole, 1988). By the same token, accepting these feelings also raises the danger of the therapist attempting to

rescue the client. For the therapist working to heal internal, familial, and social oppressions in impostor clients, it is essential to remember that rather than rescuing *per se*, it is more important to walk with the client in learning to empower herself and challenge old messages from within.

In the second phase of the theme-centered women's group, the group members develop a group identity and cohesion. They begin to understand how creative and ingenious they are at dismissing positive feedback, praise, compliments, and the fact of their success and personal power. They become experts at spotting this process in themselves and in other members of the group. Initially, it is much easier to identify these behaviors in others. Observing it in her peers, the individual gradually becomes sensitized to the process and notices it more readily in herself. Examples of this process of negation and dismissal are plentiful. They include statements such as the following:

- "If I got help with this task the successful accomplishment of the task does not reflect positively on me, because all of the credit is due to the person who provided assistance or consultation" or "if I were truly competent I would not need help."
- "Yes, that was good, but it is the only good work that I have done. I cannot repeat this quality work. My evaluator does not know about all of the work I do which is not up to this standard."
- "It was difficult for me to produce at this level of quality, and it cannot count as success if it requires this much effort."
- "This was a breeze to do. It cannot be noteworthy or significant work if it is easy."

As the impostor phenomenon sufferer distorts her success in this way, she is able to register only a fraction of the approval that people feel toward her. Since she experiences so little positive regard in her world, she is afraid to risk the little esteem she may have by using her own personal power to set appropriate limits or act assertively. The group, as it becomes cohesive, can provide this positive regard, approval, and nurturance so that the individual members are more willing to empower themselves and take risks in

settings outside the group. As the women join together to identify and explore the personal, familial, and social injunctions that catalyze impostor dynamics, they may begin to reevaluate their own attributes versus those deemed important to success in this society. In this process, a common valuing and redefining of female experience may begin to grow, as clients recognize and celebrate their own unique ways of relating and achieving, apart from social definitions of "appropriate" behavior in either realm. As the group members come to know one another better and to appreciate the unique struggle of each individual, they come to understand the dynamics of the development of the impostor phenomenon (Smith & Siegel, 1985).

In the final stage of this kind of group the clients support one another in taking new non-impostor phenomenon risks. They dare to talk about their wishes and dreams, their desires and goals, as well as their terrifying fears of failure. As the group helps each member analyze the dread of failure, the fear of rejection, and the courage needed to challenge family and social expectations, they each learn to go forward even when they face the risk of failure. In the group they receive the positive regard and support to attempt such courageously different behaviors. We have found that the impostor phenomenon client wants to please others and to cultivate and nurture approval. The group can provide this approval but also can help question whether or not such approval is necessary for survival.

One common theme for the impostor phenomenon client is the avoidance of celebrations or rituals in career development. She often is unaware of how to celebrate herself since her success was rarely commemorated in her family of origin. We have worked with an artist who never attended the opening of any of her shows, a PhD who never went to her graduations, and an actor who never went to a cast party. In group settings it is useful to explore the client's family history with celebrating herself, her fears about being publicly acknowledged, and her experience in the present situation when group members plan and execute in-group rituals and celebrations. In these ways group members break old patterns and learn new behaviors.

There are several components in the above description of

women's impostor groups which are consonant with the values of feminist therapy. As discussed earlier, for women, the impostor phenomenon often entails a learned social role of what is proper behavior for women (Worell & Remer, 1992). In fact, a feminist point of view is perhaps the most effective perspective from which to address impostor dynamics. Feminist therapy arose out of therapists using issues coming out of being a woman in a society which invalidates women (Rosewater & Walker, 1985). Feminist therapists have stated that the traditional, stereotypic female role is inherently conflictual for women, fostering a feeling of inferiority and passivity instead of affirming competency and self-direction (Sturdivant, 1980). For a group member struggling with such impostor issues as emphasizing gender-appropriate attributes (e.g., sensitivity, compassion, etc.) and deemphasizing gender-inappropriate attributes (e.g., intelligence, assertiveness), the group setting can allow for much consciousness-raising regarding family and societal expectations contributing to impostor feelings. The group members in sharing these feelings, thoughts, and behaviors, begin to see commonalities in their situations and may experience the clear realization that "the personal is political." This understanding can help members begin to recognize and break out of impostor patterns as they empower themselves to resist and challenge social expectations. Further, feminist therapy's emphasis on helping clients understand and analyze their socially constructed gender roles dovetails well with group process in understanding this phenomenon and its manifestations and risking new definitions and behaviors.

GENERAL GROUP ISSUES

In group settings, impostor feelings related to family issues, social expectations, and gender-role differences can be addressed, as the group may powerfully recreate family-of-origin dynamics or other social dynamics (e.g., workplace issues). The client who suffers from the impostor phenomenon initially may perceive the group as just another challenge to face, another place where she must avoid discovery, a setting where she will be with people who believe that she is more competent and more intelligent than she believes herself to be. The impostor phenomenon client tends in the

group setting, as in other settings, to distort her experience and to overemphasize her shortcomings while devaluing her strengths. She will often see the risk involved but not acknowledge the courage involved in facing the challenge and overcoming the odds.

The impostor phenomenon client assumes criticality on the part of others, and this can successfully and gently be challenged in a group setting. We have found that a client will assume that group members will be judgmental of her or that they will think that her issue is not important enough or deep enough to warrant group time. With one woman with whom we worked these issues did not come to light until the client began termination. As group members were saying good-bye the client discovered that she was valued by them and that they would miss her. This was inconsistent with her experience: her fantasy had been that the other group members would be glad when she was gone; that they would be relieved that this outsider would no longer be taking a space in the group. Yet the other members had experienced her as helpful, interested, focused on everyone else's work and issues. They also shared that they had experienced her as withholding in some way and unable to accept the times when the focus was on her. This client chose not to leave the group. She stayed to resolve the issues that emerged during this "termination" session. A common experience of the impostor phenomenon was happening in the "here and now." It was possible to explore how it occurred and how she blocked her experience of herself as successful, important, and powerful. It was useful for the client to see how she was discounting the experience and evaluation of the other members by shutting them out and not hearing them. In a group setting she was able to appreciate the impact of her impostor phenomenon beliefs on important people in her life.

As the impostor phenomenon client begins to accept herself as powerful and successful, she may experience a profound sadness. As she begins to experience the support, acceptance, and recognition of the important people in her life, she will experience her long-buried feelings of missing that positive regard in earlier phases of her life. The client will move through a grieving process—to mourn the joyful and intimate experiences that were absent for her in the professional milestones of her development. She experiences sor-

row at what could have been for her had she known such consistent celebration of herself.

From here, she may discover her rage at the layers of oppression that have confused and stifled her. As this rage is safely experienced, expressed, and even celebrated, the impostor client, with the support and mutuality of the other group members, may find strength and empowerment (Smith & Siegel, 1985).

The next challenge, which may be simultaneous with the grieving process, is for the impostor phenomenon client to learn how to be grounded and centered in her excitement and celebration of herself. In many instances, she was overtly or tacitly admonished not to be proud or conceited. She learned to equate all self-acknowledgement with conceit, arrogance, or grandiosity. She was given negative messages about such feelings, and she learned to tone them down or to shut them off altogether. In the group setting the impostor phenomenon client can learn to express her joy without censure. She can experiment with subtle gradations of this experience: to know herself as pleased, honored, delighted, glad, and successful. And she can experience the intimacy that is possible when she shares her excitement and celebrates herself with others.

CONCLUSION

We have seen time and again that the social/interpersonal context of the therapy group can offer corrective experience that supplants early messages of the family and society. Since these early messages were learned in these interpersonal and social contexts, it makes sense that such a milieu, as provided by the group, could provide a powerful and effective environment in which to enhance awareness, observation, exploration, and change of impostor-related feelings and behaviors. In an atmosphere of consistent validation, respectful challenge, acceptance in spite of mistakes, connection even in conflict, recognition and affirmation of being human, celebration of self and of success, the group setting can provide the key experiences of recognition and esteem missed or distorted in development. As this occurs, the impostor phenomenon client can realize significant growth and healing.

REFERENCES

- Ayers-Nachamkin, B. (1992). The effects of gender-role salience on women's causal attributions for success and failure. In J. Crisler and D. Howard (Eds.) *New directions in feminist psychology* (pp. 226-238). New York: Springer Publications.
- Berelson, B., & Steiner, G. (1964). *Human behavior: An inventory of scientific findings*. New York: Harcourt, Brace, and World.
- Clance, P. R. (1985). *The impostor phenomenon: Overcoming the fear that haunts your success*. Atlanta: Peachtree Publishers.
- Clance, P. R., & Imes, S. A. (1978). The impostor phenomenon in high achieving women: Dynamics and therapeutic intervention. *Psychotherapy: Theory, Research, and Practice*, 15(3), 241-247.
- Clance, P. R., & O'Toole, M. A. (1988). The impostor phenomenon: An internal barrier to empowerment and achievement. *Women & Therapy*, 51-64.
- Dingman, D. J. (1987). The impostor phenomenon and social mobility: You can't go home again. (Doctoral Dissertation, Georgia State University, 1987). *Dissertation Abstracts International*.
- Fagot, B. I., & Leinbach, M. D. (1989). The young child's gender schema: Environmental input, internal organization. *Child Development*, 60, 663-672.
- Galliano, G. (1980). *Achievement behavior, achievement motivation, and related factors: A study of age and sex differences*. Unpublished doctoral dissertation, Georgia State University.
- Gilligan, C. (1982). In a different voice: Psychological Theory and women's development. Cambridge, MA: Harvard University Press.
- Greene, B. (1992). Still here: A perspective on psychotherapy with African-American women. In J. C. Chrisler and D. Howard (Eds.) *New directions in feminist psychology* (pp. 13-25). New York: Springer Publishing Co.
- Hirschfield, M. M. (1982). The impostor phenomenon in successful career women. *Dissertation Abstracts International*, 43, 1722A.
- Langford, J., & Clance, P. R. (1993). The impostor phenomenon: Recent research findings regarding dynamics, personality and family patterns and their implications for treatment. *Psychotherapy*, 30(3), 495-501.
- McIntosh, P. (1985). Feeling like a fraud. *Work in progress*. Wellesley, Massachusetts: Stone Center for Developmental Services and Studies, Wellesley College.
- Miller, J. B. (1991). Women and power. In J. Jordan, A. Kaplan, J. Miller, I. Stiver, and J. Surrey (Eds) *Women's growth in connection: Writings from The Stone Center* (pp. 197-205). New York: The Guilford Press.
- Rosewater, L., & Walker, L. (Eds.). (1985). *Handbook of feminist therapy: Women's issues in psychotherapy*. New York: Springer Publishing Co.
- Slaby, R. G., & Frey, K. S. (1975). Development of gender constancy and selective attention to same-sex models. *Child Development*, 46, 849-856.
- Smith, A. J., & Siegel, R. F. (1985). Feminist therapy: Redefining power for the powerless. In L. Rosewater and L. Walker, *Handbook of feminist therapy: Women's issues in psychotherapy* (pp. 13-21). New York: Springer Publishing Co.

- Stahl, J. M., Turner, H. M., Wheeler, A. E., & Elbert, P. (1980). The impostor phenomenon in high school and college science majors. Paper presented at the meeting of the American Psychological Association, Montreal.
- Steinem, G. (1983). *Outrageous acts and everyday rebellions*. New York: Holt, Rinehart, and Winston.
- Sturdivant, S. (1980). *Therapy with women: A feminist philosophy of treatment*. New York: Springer Publishing Co.
- Surrey, J. L. (1991). Relationship and empowerment. In J. Jordan, A. Kaplan, J. Miller, I. Stiver, and J. Surrey (Eds) *Women's growth in connection: Writings from The Stone Center* (pp. 162-180). New York: The Guilford Press.
- Worell, J., & Remer, P. (1992). *Feminist perspectives in therapy: An empowerment model for women*. Chichester, England: John Wiley & Sons.

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