

## Psychoanalytic views about development

### Introduction

This chapter provides a contemporary psychoanalytic perspective on three domains of development of concern and interest to psychoanalysts and developmental psychologists alike. These three domains make up the main sections of this chapter: (1) self, social relations, and emotion-regulation; (2) psychosexual and gender development; and (3) the long-term influence of early family experiences upon personality development and functioning. Throughout the chapter, reference is made to the ways in which developmental research provides confirmation of some psychoanalytic assumptions concerning development (e.g. the widely shared view that the mind is inherently interpersonal), and refutation of other assumptions (e.g. the suggestion that human newborns are normally overwhelmed with confusion, fear and aggression). The chapter aims to provide a ‘feel’ for the history, continuing evolution, and contemporary value of the psychoanalytic approach to development which places the consideration of emotions, interpersonal and intra-personal relations, and unconscious influences upon behaviour, at the top of the agenda.

#### *Discussion point:*

A discussion point relevant to this chapter’s relation to the wider text concerns similarities and differences between psychoanalytic and psychological views about development. Box 1 below provides a summary of some basic features to both views of development, where our interest is in highlighting points of differences, and underlining the specific value of a psychoanalytic approach:

Box 1: Five contrasts between psychological and psychoanalytic approaches to development

Some features of the <i>psychological</i> approach:	Some features of the <i>psychoanalytic</i> approach:
Focus on observable behaviour and the extent to which it may be reliably observed in the laboratory or naturalistic setting	Focus on the internal organisation of emotional and mental processes and mechanisms underlying observable behaviour
Primary focus is on age-related group differences as detailed in standard developmental texts	Focus on age-appropriate stages of development always in relation to individual differences
Unconscious influences upon behaviour doubted	Unconscious influences upon behaviour assumed
Adherence to the scientific method dictates caution concerning generalisations and value-judgements about the goals of development	Adherence to Freud’s value-laden suggestion that the goal of development is psychological health defined as being able to love well, and work well
Understanding normal development	Understanding deviations from, and promoting a return to, normal ‘healthy’ development

It is important to hold in mind that psychoanalytic theories are clinical theories aimed at understanding the whole person and promoting his or her psychological health. In line with this, the psychoanalyst does not shy away from making value-judgements about development linked to beliefs in what constitutes health, usually conceived as loving well, playing well, and working well. By contrast, a developmental psychologist is often not a clinician, and is frequently satisfied with understanding in detail some specific aspect of normal child development (e.g. object permanence) and linking it to a biological, evolutionary and/or cognitive account of development. In sum, the value of the psychoanalytic view lies in a determination to understand the mind as a ‘whole’, a belief that social interactions fundamentally influence emotional and cognitive growth, a preparedness to make value judgements about developmental experiences, and a basic concern with development in relation to psychopathology.

Notwithstanding these over-arching shared characteristics of psychoanalytic approaches to development, there are some marked differences of opinion concerning the origins and direction of development within the psychoanalytic literature. The chapter continues by looking at the important distinction between classical and contemporary psychoanalytic views concerning development of the self.

## Self, social relations, and emotion-regulation

The term “self” refers to that part of the mind which is both ‘I’ and ‘me’, both the one who senses and perceives the world, as well as the one who feels and knows things about one’s place in the world (See Phoenix, this volume). Psychoanalysis, in both its classical and contemporary forms, assumes that the self develops in the context of social relations. But out of what beginnings does the self develop? The contemporary psychoanalytic answer is rather different from the traditional Freudian one. Let us first consider the classical theory of Freud, before contrasting it with contemporary psychoanalytic thinking concerning child development.

Discussion point: What are the main features of the classical Freudian approach to development? Box 2, below provides a summary of the Freudian view in terms of three stages of early psychological development covering the first three stages of development (Freud, 1905, 1914, 1920,1923, 1926). Notably, Box 2 does not specify ages at which these developments occur. The first phase refers to the early months of life, while the second phase begins as soon as parents take steps to deliberately limit their baby’s behaviour (e.g. saying ‘no’), and the third phase applies to the child with organised language skills, and at least a first-order theory of mind (See Powell, this vol) in the preschool period. Box 2 underlines how the newborn baby in the classic Freudian view is nihilistic or without morals or awareness of other people. Satisfying personal desires not pleasure in social relations for their own sake is the primary or first goal of the newborn.

Box 2: Three stages of development according to Freud

Descriptive features of the classic Freudian view of development summarised as 3 phases	Explanatory concepts invoked to anchor these descriptions in a theory of normal development
1. Life begins in a state of inward focus where the infant has no sense of an individual self, is driven by the wish to secure pleasure and avoid pain, and in turn loves those who satisfy his/her desires, and hates those who deny satisfaction	Life begins in a state of ‘primary narcissism’ where ‘id’ (sexual/aggressive instinctual drives) and ‘ego’ (cognitive capacities) exist as a single matrix, and life is governed by the ‘pleasure principle’ (what feels good, is good!)
2. Parents inevitably and in gradually increasing measure frustrate the baby, who slowly develops an increasing capacity to delay gratification. Parents’ demands conflict with child’s wishes, and child’s protests/tantrums may follow	Ego becomes gradually differentiated from id; ego begins to deploy psychological defenses (e.g. denial) which help the individual work toward compromises between ‘id’ demands and parental (external world) demands
3. Children become increasingly able to negotiate with parents over goals, and intense emotional outbursts are less frequent. Moral behaviour becomes reliably observable, and behavioural evidence of sexual and aggressive interests is much less obvious. Peer-relations and adaptation to the demands of school and society follow more-or-less naturally.	Parents’ love and demands become internally represented as the ‘superego’ which provides the child with a mental guide for how to behave (what the superego approves of is good!); ‘pleasure principle’ still governs in ‘id’ but ‘reality principle’ governs in ego and superego. What were previously external conflicts are now internal ones.

The more recent approach to development within psychoanalysis has moved away from classical Freudian views in three main respects. First, there is now a central focus on interpersonal relationships and the way these develop in the context of broader physiological and cognitive changes. Second, contemporary psychoanalytic views of development are searching for accounts of human motivation that are not limited to, or defined by, the Freudian belief in an eternal battle between life and death instincts. His view involved the ego or self in a perpetual struggle to defend itself against the ominous forces of sex and aggression. This was presumed to be achieved more-or-less successfully by the ego deploying strategies or mechanisms of defence that would diffuse the power of these impulses, and yet also permit their partial or transformed expression and satisfaction (Freud, 1920, 1926; See also Box 3 below for suggestions about the contemporary relevance of this view). Further, many classical psychoanalytic views of what was assumed to be normal development in *all* children are now appreciated mainly as accounts of development in only *some* children, namely children whose development is following an atypical or psychopathological pathways (See Lyons-Ruth, 1991; Steele & Steele, 1998).

## 1.1 Origins of the contemporary psychoanalytic approach to child development

The Freudian view of early psychological development may be forgiven for being so out of touch with the concerns of contemporary psychoanalytic understandings of development as only the latter is based on reliably collected empirical observations of infants. Additionally, Freud's thinking about child development was primarily based on looking backward at what was presumed to have been the childhood experiences of his adult patients. The contemporary psychoanalytic view owes much to its reliance on data deriving from prospective longitudinal investigations of childhood, and, importantly, to the development of video-film. James and Joyce Robertson's (1952) film 'A two-year old goes to hospital', collected in consultation with the psychoanalyst John Bowlby, represents a hallmark in the emergence of the contemporary psychoanalytic approach to development which acknowledges the presence of complex social-emotional reactions in babies, including separation-anxieties and grief responses, indicative of an inborn propensity to search out meaningful social relations (See Chapter X also).

Evidence of both the persistence of the classical perspective, and the powerful emergence of a contemporary psychoanalytic perspective, may be found in the work of Margaret Mahler who based her thinking in part on video-filmed observations (Mahler, Pine, & Bergman, 1975). Yet, within 10 years of the book about her theory being published, the classical elements to the theory no longer had much credence owing to their incompatibility with research findings. Mahler's theorising leaned very heavily upon Freud's (1914) suggestion that the psychological self or ego is initially a bodily ego, not yet aware of itself as having an existence separate from mother. She correspondingly framed her understanding of development as a move from 'normal autism' (See Powell, this volume) and 'symbiosis' toward increasing measures of separation and individuation from the mother to whom we are initially biologically (and psychologically) fused. From a contemporary psychoanalytic perspective, Mahler's view of development seems to over-value the human propensity for independence and correspondingly under-values the equally important human need for social relations.

Mahler's conceptualisation of early self-development as autistic-like is inconsistent with contemporary infancy research. This research suggests that newborn infants are able to recognise boundaries between themselves and their mothers, contrasting with Freud's (1914) notion of 'primary narcissism' and Mahler et al's (1975) concepts of 'normal autism' and 'normal symbiosis'. However, we may be less inclined to dismiss these clinical speculations when we consider the following two points: (1) laboratory-based infancy research is based largely upon observations of young babies in their most alert and responsive moments; and significant amounts of data from babies are lost because many are often too sleepy or inattentive; and (2) we should ask what are human newborns doing when they are not displaying their impressive organisation of perceptual capacities? They are asleep as much as 75% of the day. Further, approximately 50% of the human newborn's sleep is active-REM or dream-sleep. Thus, we should not forget to ask what is the baby dreaming about? Perhaps it is of some boundary-less state of being as Fred Pine (1985), one of Margaret Mahler's co-authors, suggests in a poetic defense of her ideas. Pine points out that no phase of development is intended to describe all the child's experiences at that age. All that is intended by Mahler's phase-concept, Pine maintains, is a description of what comprise the high-intensity, affectively-significant moments of a child's day:

the post-nursing moments of falling asleep at the mother's breast or in her arms against her body, especially since they follow and powerfully contrast with the moments of distress and confusion during crying and hunger, are moments . . . that are likely to be psychological high points of the infant's day and thus to become organising nodes for other experiences. These moments (which look from the *outside* as though they could be accompanied by merging, melting, boundary-less experiences in the infant) are among the justifications for referring to the this period as the normal symbiotic phase—or better, as the period of formative impact of experiences of boundarylessness. (Pine, 1985, p. 41)

Notably, this contemporary attempt to preserve some of the essential insights of Mahler's classical theorising does *not* seek to replace Freud's instinctual-drive theory. Pine (1985) suggests that infants' positive interactions with their mothers activate libidinal/sexual/loving drives while negative experiences activate frustration and aggressive drives—both drives having been prominently included in classical psychoanalytic theories.

By contrast, contemporary object-relations approach to self-development (e.g. Stern, 1985) consider the relational needs of the infant as the primary motivating force underlying development of the self, without

recourse to the assumption of there being inborn aggressive or sexual drives (e.g. Greenberg & Mitchell, 1983). Further, the contemporary approach assumes that children's positive or negative emotions crucially depend on the extent to which infant's emotional needs are sensitively and responsively met by mother and others in the caregiving environment. This in turn lays the foundation for enduring mental representations of the self and others.

The current object-relations perspective is consistent with much of the research into early human development over the last few decades which has helped to demonstrate the alertness and keen social interests of the human newborn (e.g. via preferential looking, EEG and brain scanning). Contributing to, and greatly influenced by, this new research have been a number of psychoanalysts (e.g. Robert Emde and Daniel Stern) who have made it their priority to systematically observe infant development. Most importantly, Emde (e.g. 1988) and Stern (e.g. 1985) are representative of a powerful contemporary voice in psychoanalysis. This voice describes infant behaviour without resort to classical psychoanalytic assumptions about the developmental roots of psychopathology in older children or adults on the one hand, or assumptions about quantities of unconscious sexual or aggressive instinctual energies seeking release through behaviour. Instead, the newborn human infant is seen as governed by self-organising processes and an inborn propensity for social relations. Regulation of social interactions and psychophysiological states advance in line with identifiable underlying developmental shifts in the organization and functioning of brain processes (e.g. Emde, 1981). These shifts involve significant developments in neurobiological functions and lead to the reorganisation of behaviours and abilities.

Daniel Stern's (e.g. 1985) thinking about the development of the self reads rather like a considered meditation on the recent infancy research, particularly the meaning of cross-modal perception. The basic finding seems to be that what adults take for granted—, namely the capacity for linking and mentally representing information received from various senses, e.g. connecting-up what we are seeing with what we are hearing, with what we are feeling and so on—is not unique to older children and adults. Infants, from shortly after birth if not before, are engaged in something very similar. For example, three-week old infants given one of two pacifiers with distinctive protruding nubs subsequently looked longer at the shape of the nipple they just sucked as opposed to an unfamiliar shape (Meltzoff & Borton, 1976). This is one piece of the evidence for trans-modal or inter-modal perception being a feature of the innate design of our perceptual system. In other words, it appears that the self does not need to learn to take in information from one modality and transfer it to another, we do this naturally. Daniel Stern (1985) comments on how this capacity leads not simply to the encoding of information but to the building up of a representation which can then be recognised and/or applied in more than one sensory modality and more than one context. Against this background, Stern sketches a likely progression as increasingly complex bits of information about the social, emotional and moral world are encoded, represented and utilised by distinct layers or strata of the self, including a core self, an emergent self, and a verbal self.

Contemporary psychoanalytic perspectives differ from their earlier classical forms most markedly in terms of their reinterpretation (or rejection) of Freud's instinctual drive theory. For Freud, the quality of the person's relations with objects (animate and inanimate) in the external world were understood as the expression of the individual's sexual and aggressive longings. Even for Freud, this was not invariably the case and thus he declared in one of his most often-cited phrases: 'some times a cigar is *just* a cigar'. Freud needed to make this point because in the thinking of classical psychoanalysis, anything and everything could become the target or 'object' of an instinctual drive. By contrast, contemporary psychoanalytic theories share a belief that the 'objects' of primary interest are people, the primary 'object' is ordinarily the mother, and the primary longing determining the child's tie to the object is a wish to be cared for and loved.

Contemporary psychoanalytic perspectives thus share with mainstream developmental psychological thinking that human newborns' inclination to participate in social interactions and develop autonomous self-regulatory (ego) skills must be cultivated by one or more caregivers (usually but not necessarily mother and father). Ordinarily, caregivers during social interaction often experience a sense of joy, and promote a similar sense in the infant (after Bowlby, 1951). When there are significant deficits in the caregiving environment as when infants are physically abused, child development, at both the neurobiological and social-cognitive levels, is significantly compromised with potentially long-term deleterious consequences (Perry, 1997).

## 1.2 The interpersonal assumption, 'object-relations' theories and emotions

Thus infancy research appears to be increasingly demonstrating how self development flourishes in an

appropriate, sensitive and responsive, interpersonal context. As already suggested above, an interpersonal assumption is basic to many contemporary psychoanalytic approaches known as 'object-relations theories'. This is a term which denotes the fundamental importance of social relations to self development. At the same time, retention of the word 'object' from classical psychoanalysis underlines the assumption that the self constructs, stores in memory and is influenced by representations or fantasies concerning what it *feels like* to participate in social relations. Clearly, there are times when feelings of pain and frustration are aroused by social interactions, just as at other times the self resounds with joy and satisfaction. In this section of the chapter, we aim to show how these ideas about social interaction and their mental representation provide a basis for understanding fundamental issues about the regulation of emotion. A focus upon the affect-regulatory function of self development is shared by object-relations approaches, is implicit in the ideas of classical Freudian, Kleinian, and Mahlerian thinking, and is explicit in the ideas of contemporary psychoanalytic approaches (e.g. Emde, 1988; Stern, 1985).

Initially, in the first three months of life, infants are obviously unable to comfort themselves; the capacity for autonomous self-soothing or self-regulation develops only slowly as a result of the way infants' distress has been responded to by caregivers. The extent to which self development may be regarded as a transition from complete dependence on the caregiver in order to achieve a balanced internal regulation of affect to relative independence in this domain was well captured by Anna Freud (e.g., A. Freud, 1965). While drawing attention to the many different age-specific tasks that development of the self (or ego) involves, she argued that the object-relationship line of development determines to a large extent the child's progress on all other lines (e.g. from the body-to play-to work; from immaturity to maturity in body management). This object-relationship line begins with biological unity to the mother (in utero), then a prolonged period of dependence upon the mother for the satisfaction of urgent needs. The goal or normal end-point of this line was conceived by Anna Freud as 'emotional self-reliance'.

A central requirement of optimal self development in the object-relations frame of reference is the capacity to successfully handle *more-or-less on one's own* feelings of love and hate, normally felt with great intensity toward one's parents (e.g. Bowlby, 1956/1979). As Bowlby suggested, the extent to which individual children will be able to regulate these feelings within themselves will depend crucially upon how such feelings are handled *between* parents and their children. Do the parents prohibit all expressions of aggression toward them? Or do they (hopefully) create an emotional climate conducive to the expression of both negative and positive affect, where family members share the confidence that divergent feelings can be connected-up and resolved between and within people.

One early and enduring object-relations approach that addresses the aggression and frustration felt by young children, and indeed all people, is that model elaborated by Melanie Klein. According to Klein, infants have an immense suspicion and fear of their mothers who are experienced as alternately fully satisfying and then ominously frustrating, even alien (Klein, 1946). In Klein's view, this leads to mental splits in young children's inner experience with parts of their mothers becoming represented as loving/lovable and yet other parts as frightening/feared *distinct* figures. Fear gives way to depression as normal development brings the awareness of whole individuals being both the source and target of diverse, often contradictory feelings. Achieving and maintaining an integrated sense of self and others becomes the challenge for the developing self, and the focus of therapy, from the Kleinian perspective.

Perhaps in order to underline her belief that psychopathology exists on the same continuum as mental health, Klein suggested that human life begins in a 'paranoid-schizoid' position. This involves the mind being haunted by fantasies of being isolated and under attack from the 'bad' breast (or frustrating mother) who is split off from the 'good' breast (or satisfying mother) with whom the infant wishes to merge. Healthy development, for Klein, involves passing into a 'depressive position' as she called it, around three months of age, which gives rise to an increasingly realistic appreciation for the whole mother in both her bad (frustrating) and good (available) elements. She believed that the paranoid-schizoid position is never fully left behind and life is thereafter experienced in terms of a complex array of negative feeling states (e.g. greed, envy, rage) and positive emotions (e.g. joy, gratitude and hope). Thus, every phase of development involves the risk of falling into the position of re-experiencing one of the two original emotional orientations to the world, fear or despair. Klein spoke of shifting 'positions' occupied by the self rather than a sequence of developmental 'phases' or 'stages'. This is because the latter terms assume the possibility of successfully passing into the next phase/stage by leaving behind or resolving the conflicts of the previous phase/stage (this idea of progress can be seen in Freud's theory of psychosexual stages or Erikson's theory of psychosocial stages, see Box 3 below). Klein was not so optimistic (See Grosskurth, 1985). With the term 'position', then, Klein meant modes of mental functioning, seeking to

highlight the likelihood that throughout the life course, people may shift—often quite suddenly—from one position or mode to another in their thinking and feeling about the self and the social world. Thus, Klein's object-relations theory of self development makes rather negative assumptions about the probable contents of the infant's inner emotional experience and is perhaps only directly relevant, as we have previously argued (Steele & Steele, 1998), to infants growing up in extremely frightening contexts.

*Discussion point:* Do you think Klein accurately captures the way parent-child relations can be both intensely positive and negative? Do you think the model describes an important aspect of relationships?

A different psychoanalytically-based approach to self development which takes positive and non-frightening contexts to be the norm is John Bowlby's (1969) attachment theory. According to attachment theory, the primary influence upon the child's developing sense of self is the quality of care provided by his or her caregivers. To the extent that the caregivers are sensitive, responsive and stimulating in the right measure, the child is expected to develop a secure sense of self, and trust in others (See Van IJzendoorn, this volume). This inner sense of self and other is assumed to be stored in a largely unconscious mental structure known as the 'internal working model.' The internal working model stores mental representations of the feelings and thoughts that have been elicited by the child's interactions with caregivers. Providing these feelings and thoughts are neither overwhelming nor frightening, a coherent or integrated mental model of self, others and the world should develop. In normal development, this is a tolerably accurate model of experience.

The effects of negative experiences on development are still seen by psychoanalysts as influenced by both conscious and unconscious processes. One of the lasting insights of Freud was the discussion of how unconscious processes both represent and influence observable behaviour, and this insight remains a central part of contemporary psychoanalytic thinking. For example, multiple incoherent mental models are expected to follow from terrifying experiences where pressure is placed upon the child by the caregiver to represent negative experiences as benign or positive. Out of a wish to please the caregiver and/or protect the self, the result is a distortion of reality, with some typical non-specific representation of actually traumatic events being kept at a conscious level rather than a representation of the overwhelmingly negative details of the events themselves. At an unconscious level—outside of immediate awareness—the actually negative, perhaps terrifying, events and interactions are represented and stored (Bowlby, 1979). The unconscious (but accurate) mental model exerts a disruptive influence on the conscious (inaccurate) mental model and the rest of the mind. This inhibits the accurate processing of information and causes severe emotional distress. As a result, self-development is seriously compromised for the child who suffers early abusive experiences—a view of self-development entirely consistent with Freud's theorising in the 1880s and early 1890s (See Sandler, Dare & Holder, 1972). For traumatised individuals, restoration to the path of normal self-development is usually thought to require the conscious acknowledgement of the repressed memories of the trauma and the reworking of these memories and associated feelings into a coherent narrative. Such re-working can only take place in the context of new, benign and supportive relationships.

Summary of section 1:

Contemporary psychoanalytic perspectives on development are known as object-relations theories and should be distinguished from the classical Freudian account of development framed in terms of instinctual drive theory. The contemporary perspective regards the primary motivation in human development as the inborn wish to form and maintain meaningful social relationships. A crucial function of these early relationships with caregivers is the model they provide to the infant for the regulation of emotional states. These aspects of contemporary psychoanalytic theory are highly consistent with mainstream developmental research on social and emotional development. However, psychoanalytic views, in both their classical and contemporary forms, tend to go further than those of psychologists by discussing broad features of the internal workings of the mind, by being more speculative, by trying to focus on features of development which play a central place in our emotional life, and by being concerned with the way psychopathology can emerge out of the interaction between the internal workings of the mind and the external environment to which the individual belongs.

## 2. *Psychosexual and gender development*

### 2.1 Psychosexual development

A core feature of the psychoanalytic perspective concerns the way that early social experiences often acquire multiple conscious and unconscious layers of meanings, and that individuals seek out certain kinds of interactions to confirm expectations and wishes of the self (See Sandler & Sandler, 1998). This became a central feature of psychoanalysis following Freud's observation that the profound emotional distress and anxiety symptoms of his abused patients often remained despite the disclosure of their past traumatic experiences. This was of crucial importance to the psychoanalytic theory of development as it set Freud upon the path of charting the domain of the inner world. He was led to a number of important discoveries including the central place of sexual interests and pleasures in human development from birth onwards (Freud, 1905), the relentless phenomenon of unconscious guilt (Freud, 1907), and the closely related human capacity for violence (Freud, 1920). From the evidence he compiled in his consulting room, Freud wrote at length about the roles of sexuality and aggression in development and the mind's attempts to harness these powerful forces and arrive at compromise positions that permit the pursuit of both self-interest and social good (Freud, 1912).

This section of the chapter is based on the view that understanding children's sense of self, gender and relations with others is enhanced by following what was long understood to be the cornerstone of personality development, the psychosexual stages (Freud, 1905, see Box 3). The term 'sexual' was intended by Freud (1940) to mean something rather more like what is conventionally understood by the term 'sensual'. However, by extending the term 'sexual' as Freud did he was led to regard children as 'polymorphously perverse' insofar as they seek sensual pleasures from all sort of activities far removed from the goal, or possibility of, reproduction.

Box 3: An overview of psychosexual and psychosocial stages of development

(After Freud, 1905, Erikson, 1950 A. Freud, 1936)

Age	Freud's Psychosexual	Characteristic Mode of Ego	Erikson's Psychosocial	Characteristic psychosocial/behavioural
Birth - one year	Oral	Incorporation	Basic trust vs mistrust	Trust mother and in turn self and others
1 to 3 years	Anal	Projection Displacement	Autonomy vs shame/doubt	Be self-sufficient and follow social rules
3 to 6 years	Phallic/Oedipal	Reaction Formation, Identification	Initiative vs guilt	Develop peer relations and internalise social rules
7 to 11 years	Latency	Sublimation, Humour	Industry vs inferiority	Master cognitive and social skills at school
12 to 18 years	Genital	Intellectualisation, Asceticism	Identity vs role confusion	Develop a sense of personal direction re future and awareness re past
Early Adulthood			Intimacy vs isolation	Achieve love and companionship beyond the family
Adulthood			Generativity vs stagnation	Raise and/or care for children; be productive at work
Maturity/ old age			Ego integrity vs despair	Reflect on life as being productive and satisfying

Freud's initial theorising about these phases of development came from reconstructions of childhood based on his treatment of emotionally troubled adult patients. Many of his ideas were subsequently confirmed by later psychoanalysts who based their thinking about psychosexual development on extensive observations of normal and atypical children (e.g., Edgecumbe & Burgner, 1975). Freud's

theorising resulted in a conceptualisation of human development as maturation through a series of psychosexual phases before eventual establishment and maintenance of the self in the genital phase some time after puberty. His interest was in the operation of the mind as a result of different experiences that in turn influence well-being and development.

The terms sensual and/or sexual to describe the strong motivational force informing much of children's behaviour can be seen to be relevant to observations of the profoundly passionate devotion underlying the behaviour of a hungry feeding infant, a toddler refusing to leave somewhere they like, or a defiantly proud school-child insistent on playing rough-and-tumble games at a high pitch of intensity without interruption. Further, the high prevalence of sexual perversions and violence in adult life involving other adults or children serves to further underline the diverse ways in which the sexual and the genital/reproductive 'often fail to coincide' (Freud, 1940, p. 151).

Box 3 provides an overview of both Freud's (1905) psychosexual stages of development, the characteristic modes of mental functioning or defense to cope with inner conflicts (After Freud, 1926, A. Freud, 1936), and the corresponding social challenges accompanying each phase of life according to Erikson (1950). Thus, Box 3 pulls together psychoanalytic thinking developed over the first half of the twentieth century that has enduring relevance to a broad understanding of human development. These views suggest that the child's progression through each phase may be viewed not only as a change in the child's focus of bodily interest, frustration and satisfaction but also, more fundamentally, as a developmental step forward in the child's social, emotional, cognitive and self development.

A contemporary psychoanalytic understanding of the oral phase (the first year) involves foremost consideration of the way infants/caregivers are challenged to develop/promote a trusting as opposed to mistrusting orientation to the world; this is also a time when the infant's behaviour appears to be frequently governed by the question 'Will this go in my mouth?' and thus the characteristic ego defense to challenges is incorporation. Incorporation refers to the infant mentally representing, *taking inside* a sense, or schema, of what it feels like to be with mother/father/others (after Stern, 1985). At the anal phase, toddlers are faced with the challenge of arriving at an autonomous and proud attitude despite the imposition of social rules which could lead to a dependent and self-doubting orientation to the world. This can be avoided by a judicious combination on the parent's part of limit-setting and love. This is followed by the phallic/oedipal phase (at fourth, fifth and sixth years) of development which involves the challenges of demonstrating initiative and containing one's naturally evolving sense of guilt. Guilt is seen as a self-evaluative emotion, which evolves along side the internalised images of mother/father/others. These images of caregivers provide the social rules and ideals the child will strive toward. What follows is latency when the instinctual drives were assumed by Freud to be well-harnessed in the unconscious (7-11 years). This phase of childhood was, for Erikson, linked with the dilemma of industry vs. inferiority, where there is a need to consolidate one's cognitive and social skills (peer relations) in the school setting and other contexts. These are tasks that are helped by the mind's increased capacity for transforming (or sublimating) intense emotional urges into culturally valued activities, e.g. music, art, sports, school work, theatre (including tragedy and comedy). With puberty comes adolescence and the dilemma of identity vs. confusion as the teenager struggles to adjust to rapid bodily changes and achieve a direction vis-a-vis the future together with a revised understanding of the past, particularly one's relationship to one's parents (See chapters X and X). Typical modes of psychological defense in these years are intellectualisation (engaging with vigor in newly achieved capacities for abstract thought) and/or ascetism (denying bodily/sexual needs in the pursuit of a non-physical, political or spiritual truth). The years of early adulthood that follow carry the challenge of achieving meaningful long-term relationships involving love and companionship; achieving intimacy and preventing a gloomy sense of isolation is thought to be assisted by having successfully resolved the identity issues of adolescence. Beyond this await the dilemmas characteristic of middle adulthood: generativity (having a productive and fulfilling life) vs. stagnation, and old age: integrity (a sense of satisfaction from one's life achievements) vs. despair. Erikson's lifespan approach depended strongly on the view that the way in which the individual approaches psychosocial dilemmas in later childhood and adulthood is powerfully influenced by the way in which psychosocial dilemmas in earliest childhood were faced and resolved or not resolved.

Freud's account of development in terms of psychosexual stages is frequently cited in developmental textbooks and then quickly followed up, as the this chapter has done, with reference to Erikson's psychosocial stages. Somewhat unique to Box 3 is the inclusion of a list of psychological defenses, which are the instruments deployed by the mind (or ego) in its ongoing attempts to satisfy one's own impulses (the id), the ideals stored in one's conscience (superego), and the rules imposed by the external world (See



Box 1). Thus, while the first section of the chapter highlighted differences between classical and contemporary psychoanalytic views of development, this second section assumes there is value in distilling from classical psychoanalytic writings those contents which may be seen to link up with contemporary developmental observations and theorising. The result is an integrated overview of 'life-span' development including motivational, cognitive and social components, that draws attention to aspects of the life path which are central to adult functioning.

## 2.2. Gender development

Freud's account of psychosexual development, tied as it was to the whole of personality development, did not include a separate concept of gender identity. We follow the suggestion of Tyson & Tyson (1990) in adopting distinctions among gender identity (understanding that you belong irrevocably to one gender), gender-role identity (tendency to behave in 'masculine' vs 'feminine' behaviours), and sexual partner orientation (heterosexual, homosexual, bisexual) to understand the feelings and behaviours associated with an individual's sense of self as a girl/woman or boy/man. Boys and girls face different tasks in the domain of gender development. For example, girls may be seen to have a relatively easier time achieving a core sense of gender identity. This is because to achieve their core feminine gender identity they must identify with their primary attachment figure, their mother. By contrast, for boys, in order to achieve a core masculine identity they must turn away from their primary love for mother, and identify with the father. These tasks for girls and boys alike are complicated by the intense positive and negative emotions felt toward both parents, a situation well captured by Freud and his followers in their account of three-person oedipal dynamics.

For Freud, the crucial phase of psychosexual development was the oedipal phase. The dynamics of the oedipal phase have been charted by Edgecumbe & Burgner (1975) who sub-divided the oedipal phase (3-6 years) into the phallic-narcissistic phase (3-4 years) and the oedipal phase proper (5-6 years). In the phallic-narcissistic phase, pride in one's gender and exhibitionistic displays of the body are thought to be normal. Phallic-narcissism is an apt term for the consolidation of an understanding of the anatomical differences between the sexes which proceeds in line with the acquisition of early conservation skills described by Piaget (See chapter by Pine) when children show that they realise their gender stays the same despite superficial changes (e.g. of dress, hairstyle etc.). In the preschool years, children often delight in their bodily prowess, readily displaying how well they can run, jump, ride or otherwise be competent in a physical manner. Girls may take a particular pleasure in displaying feminine qualities to their fathers, while boys may be prone to demonstrating their masculine strength to their mothers. At times this may become a desperate craving for closeness with the opposite sex parent (the positive oedipal complex). At other times proximity is desperately sought with the same sex parent (the negative oedipal complex). Whether the oedipal situation is positive or negative there is always the feared of rejection from the desired parent, and retribution from the other parent. Appropriate emotional availability of parents is a crucial component to the successful resolution of these intense rapidly changing feelings in young children.

Most contemporary psychoanalytic approaches do not regard the oedipal-phase concept as an accurate description of children's sexual desires. Instead, the concept is utilised as a metaphor for the intense and often complicated thoughts, feelings and interactions that occur among three people (child, mother, father), each with profound emotional ties to the other. Nonetheless, the psychoanalytic approach regards it as important for children's gender development that their parents chart a middle-ground between under-gratifying and over-gratifying the sensual interests of their children. A benign positive presence by both the same-sex and opposite-sex parent will help prevent children from undue burdens of guilt for their passionate positive feelings and/or jealousy-driven negative feelings, and grant them a deserved sense of pride in their gender-related feelings. This leads to an early consolidation of children's gender identification, encouraging boys and girls toward healthy transformed relations with their parents (and peers) at the end of the oedipal phase, the start of formal school learning.

The feelings of the early school-aged boy are normally governed by a wish *to be like* his father (no longer wanting to replace him) as shown in the preference of school-aged children for playing with same-sex peers. This is supported by positive encouragement from other boys who are adopting a masculine identity, and by non-parental male role models. Similar processes are involved for girls, who by the school-aged years show a clear preference for affiliating with other girls, and no longer battle quite so

much with their mothers as they did in the immediately preceding years (or as they will in the adolescent years).

Psychoanalytic approaches differ from many mainstream psychological approaches to gender development issues in general, and the adolescent experience in particular. This can be seen in the closer attention paid by psychoanalysts to the intense emotional conflicts likely to be felt by children/teenagers, and the assumption that sexual identity, gender-role behaviour and partner-orientation are all core aspects of personality development and functioning with roots in early childhood experiences. Thus, from the psychoanalytic perspective, puberty presents the young person with enormous challenges. The radical changes in body size and functioning (menarche/spermarche) must be integrated with a renewed sense of gender identity, gender role behaviours, and sexual partner choice. Old (pre-oedipal) relationship issues (e.g. intense dependency needs) involving parents are reawakened and children must negotiate a new sense of autonomy from parents as they take their initial steps toward their choice of sexual partners.

### **3. The long-term influence of early family experiences upon personality development**

The classic psychoanalytic view of emotional disturbance in adulthood was that individuals' problems invariably stemmed from difficulties in resolving the ambivalent feelings that characterise the oedipus complex. This oedipal-centred view of emotional development has shifted as more and more psychoanalytic authors proposed accounts of development that gave pride of place to the assumption that the infant's experiences with mother make the fundamental and enduring contribution to social and emotional development. The plausibility of this revised psychoanalytic view stems from two sources. First, the mother who provides appropriate, sensitive and responsive care in the child's first year is highly likely to be the kind of woman who knows well how to modify her parenting behaviour to suit the changing needs of the child in subsequent developmental phases. Second, children's emotional and cognitive responses to their early interactions with their mothers are stored in mental representations that shape the development of a moral self, and guide the child's responses to new social experiences.

The understanding that development is based firmly on the *actual* quality of care children receive has been elaborated by many psychoanalysts (e.g. Robert Emde, Erik Erikson, Daniel Stern and Donald Winnicott) but none have put it so plainly or with such fierce determination as John Bowlby (1951, 1958, 1969, 1979, 1988). Drawing upon a set of diverse scientific theories concerning parent-child relations, Bowlby advanced a psychoanalytic model of self and moral development that has yielded a number of testable hypotheses, many of which have been robustly confirmed (See Bretherton, 1995; Sroufe, 1986; Van IJzendoorn, this volume). Bowlby's attachment theory has much in common with the first model of the mind advanced by Freud (See Sandler et al., 1972) which looked primarily at the environment in which the child lived for clues as to its inner world and moral sensibilities. And, while Bowlby incorporated aspects of Freud's later thinking, especially the suggestion that anxiety is best understood as longing for a lost person, or person whose loss is feared (after Freud, 1926), his attachment theory did not include Freud's ideas about instinctual drives of sexuality and aggression (See Steele & Steele, 1998).

Unlike Bowlby, his fellow British 'independent' psychoanalyst Donald Winnicott (e.g. 1965, 1971) did not seek a clean break from instinctual drive theory and was thus in a position to more strongly influence other psychoanalytic views of development. Winnicott used the unforgettable phrase that 'there is no such thing as a baby,' urging his listeners to give full attention to the fact that development exists, proceeds, and depends, upon the context of the mother-child relationship. How mother looks at, and looks to, the baby was, for Winnicott (1967) the crucial formative influence upon self development. He believed that infants who are regarded with respect and genuinely loved will acquire an authentic sense of self, capable of experiencing a wide range of emotions and develop an integrated positive representation of self and others. In contrast, self-development may be set on a fundamentally insecure track by a mother whose own unmet relationship needs and psychological defenses interfere with her capacity to reflect accurately upon her infant's thinking. These children see too much of a mother's emotional conflicts, and not enough of her love and understanding. As a result, they have less capacity to understand and love the self or others. In response to repeated rejection and/or neglect, such children develop a false-self to protect the deeply hurt and fractured, yet true, inner self. The false-self is likely to be manipulative, seductive, untrusting of others and hostile—prone to launching pre-emptive attacks on others in the misguided hope of protecting the self.

While it may sound like Winnicott was placing a huge burden upon mothers in terms of the need for them to fulfil their maternal roles ‘perfectly’, this was not the tone of Winnicott’s message. The type of mother Winnicott celebrated and encouraged was not the perfect mother, but the ‘good-enough mother’. This was the mother who could cope well enough with her own mental conflicts and accept the inevitability of ambivalent feelings and conflicts in her children. The good-enough mother facilitates her children’s capacity to resolve mental and social conflicts by knowing when to help her children but also, and equally important, knowing when to introduce frustration or challenge—knowing when and how to say ‘no’. Curiously, as Winnicott was poetically etching his psychoanalytic account of good-enough parenting, in the world of psychology Baumrind (1967) was developing and testing her theory of parenting which bears a striking resemblance to Winnicott’s ideas. In Baumrind’s terms, the good-enough mother is the parent who is high on the dimensions of warmth and control—the authoritative parent; the not-good-enough mother is the parent low on warmth and either low or high on control—Baumrind’s ineffectual or authoritarian types; while the too-good mother is the parent high on warmth but low on control—the permissive type (See Woollett, this vol.). Notably, Bowlby (1973) himself recognised an affinity between Baumrind’s research and his thinking about family experiences, secure attachment, the growth of self-reliance and a mature moral sensibility.

Dorothy Burlingham & Anna Freud (1944) pointed to these challenges of parenting, and the challenges of growing up when they noted how invariably and enthusiastically positive most parents are of very young children. They noted that to any objective observer the praise and adoration heaped upon infants is often out of all proportion to the acts performed or their characteristics. But this, they add, is how it should be when the child is very young because it will not be long until the parents nag and criticise their children for displaying some of the very same ‘babyish’ behaviours which were previously praised! Development demands that we give something up, just as we gain something else—the value of which is not always clear. Psychoanalytic views about development capture this inevitable paradoxical tension in psychological and social life, urging us to reach forward with trust, and to look inward with awareness at our characteristic emotional reactions to the world for these reflect our past understandings of self and others. The psychoanalytic literature on development, from Freud’s day forward, underlines the persistent human wish to transfer into *present* social circumstances understandings and expectations acquired in the context of *past* relationships. The phenomenon is known as ‘transference’ is rather like Piaget’s notion of assimilation, i.e. interpreting new experiences in light of past understandings. The psychoanalyst is a keen observer of the social and emotional manifestations of this tendency. Ultimately, human development demands awareness of this powerful tendency to repeat the past, accommodation to the present, and the generation of new models to help that permit the achievement of still more adaptive solutions in the future.

While Freud’s original thinking about development was based on reconstructions of the childhood experiences from accounts provided by his adult patients, contemporary psychoanalytic views of development are based firmly on observations of children, many of whom are then studied in prospective longitudinal designs. Very different conclusions have arisen from the prospective investigations, as compared to the conclusions drawn from looking backward into the life experiences of disturbed adults. Early experiences appear to have a strong, almost inexorable, influence on later developmental outcomes *but only* when we are looking backward to the previous experiences of dysfunctional, emotionally disturbed individuals. Looking forward from infancy, early adverse social relations (even abuse) does not inevitably lead to continuing adversity and the repetition of it in the next generation (See Clarke & Clarke, in press). There are multiple developmental pathways leading back to a more-or-less normal life course for those children who begin life in adverse circumstances. Each of these restorative pathways is, however, likely to require the establishment and maintenance of a long-term relationship with at least one caring and supportive other person. From this base adaptive development involving satisfying work- and love-relations with others can and do proceed. An undeniable feature of contemporary psychoanalytic perspectives on development is the great care devoted to understanding the meaning children derive from, and the meaning children bring to, their real-life social experiences with others.

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#### Chapter summary

This chapter has suggested that developmental theorising may be enriched by taking into account a contemporary psychoanalytic perspective. The benefit may be found in the picture gained of the possible inner workings of the mind as they concern self and gender development, affect-regulation and the question of health vs psychopathology. Additionally, it should be clear that there is no single psychoanalytic perspective. The chapter provides an overview of the differences between Freudian dual-instinct theory and contemporary object-relations theories which have many points of convergence, but begin from distinct starting points in their conceptualisation of what motivates



Some discussion questions:

1. Discuss the characteristic features of psychoanalytic object-relations theories.
2. Compare and contrast Melanie Klein's with John Bowlby's view of early emotional development.
3. Provide a psychoanalytic account of life-span development.
4. Prepare an essay concerning some similarities and differences between psychoanalytic and psychological perspectives on development.

Further reading:

For a classic (yet still relevant) psychoanalytic account of the distinct, yet related, lines along which development unfolds, see Anna Freud's chapter on 'Developmental Lines' in her 1965 book.

For a comparison and contrast among the psychoanalytic theories of Melanie Klein, Anna Freud, Margaret Mahler and John Bowlby, see Steele & Steele (1998).

For accessible readings on attachment theory and research, see Bowlby (1979, 1988).

For a complex integration of classical and contemporary psychoanalytic perspectives, which also conveys much fascinating detail about the history of psychoanalysis, see Sandler & Sandler (1998).

Read Erikson's (1950) original account of the psychosexual stages elaborated in Box 3.

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