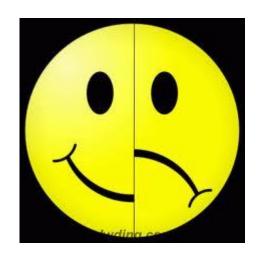
Concepts of Personality Development



Harry Stack Sullivan

- Sullivan emphasized interpersonal relationships and social experiences in shaping personality
- Sullivan's theorem of escape describes a self-system that is resistant to experiences that evoke anxiety
- Sullivan's theorem of reciprocal emotions refers to the interactive influence of emotions between the self and others, and reflects the interpersonal aspects of anxiety

Sullivan's major concepts

Anxiety is a feeling of emotional discomfort, toward the relief or prevention of which all behavior is aimed.

- Sullivan believed that anxiety is the "chief disruptive force in interpersonal relations and the main factor in the development of serious difficulties in living."
- It arises out of one's inability to satisfy needs or achieve interpersonal security.

Cont;

- Satisfaction of needs is the fulfillment of all requirements associated with an individual's physiochemical environment.
 - Sullivan identified examples of these requirements as oxygen, food, water, warmth, tenderness, rest, activity, sexual expression—virtually anything that, when absent, produces discomfort in the individual.

Cont;

- Interpersonal security is the feeling associated with relief from anxiety.
 - When all needs have been met, one experiences a sense of total well-being, which Sullivan termed interpersonal security.
 - He believed individuals have an innate need for interpersonal security.

Cont;

 Self-system is a collection of experiences, or security measures, adopted by the individual to protect against anxiety.

Self-system

The Good Me, the Bad Me, and the Not Me

- Sullivan made a distinction among three selves:
 - The 'good me' versus the 'bad me' based on social appraisal and the anxiety that results from negative feedback
 - The 'not me' refers to the unknown, repressed component of the self

Sullivan's Stages of Personality Development

The Developmental Epochs

- Sullivan (1953) outlined six developmental stages called "epochs":
- 1. Infancy
- 2. Childhood
- 3. Juvenile era
- 4. Preadolescence
- 5. Early adolescence
- 6. Late adolescence

Infancy Birth-18

 During this beginning stage, the major developmental task for the child is the gratification of needs. This is accomplished through activity associated with the mouth, such as crying, nursing, and thumb sucking.

Childhood 18-6

- At ages 18 months to 6 years, the child learns that interference with fulfillment of personal wishes and desires may result in delayed gratification.
- He or she learns to accept this and feel comfortable with it, recognizing that delayed gratification often results in parental approval, a more lasting type of reward.
- Tools of this stage include the mouth, the anus, language, experimentation, manipulation, and identification.

Juvenile: 6 to 9 Years

- The major task of the juvenile stage is formation of satisfactory relationships within the peer group.
- This is accomplished through the use of competition, cooperation, and compromise.

Preadolescence: 9 to 12 Years

- The tasks of the preadolescence stage focus on developing relationships with persons of the same gender.
- One's ability to collaborate with and show love and affection for another person begins at this stage.

Early Adolescence: 12 to 14 Years

- During early adolescence, the child is struggling with developing a sense of identity, separate and independent from the parents.
- The major task is formation of satisfactory relationships with members of the opposite gender.
- Sullivan saw the emergence of lust in response to biological changes as a major force occurring during this period.

Late Adolescence: 14 to 21 Years

- The late adolescent period is characterized by tasks associated with the attempt to achieve interdependence within the society and the formation of a lasting, intimate relationship with a selected member of the opposite gender.
- The genital organs are the major developmental focus of this stage.

Nursing implication

- Relationship development is a major concept of this theory, and is also a major psychiatric nursing intervention.
- Nurses develop therapeutic relationships with clients in an effort to help them generalize this ability to interact successfully with others.
- Nurses use the concepts of Sullivan's theory to help clients achieve a higher degree of independent and interpersonal functioning.

Evaluation of Sullivan's Theory

- Sullivan incited interest in interpersonal theory, particularly on aspects of agency and communion
- Critics note the abstract nature of his concepts and the resultant lack of empirical testing
- The role of interpersonal factors in his theory may be overextended

Psychosocial Stages of Personality Development/ Erickson

- 8 successive stages over the lifespan
- Addresses bio, social, situational, personal influences
- Crisis: must adaptively or maladaptively cope with task in each developmental stage
 - Respond adaptively: acquire strengths needed for next developmental stage
 - Respond maladaptively: less likely to be able to adapt to later problems
- Basic strengths: Motivating characteristics and beliefs that derive from successful resolution of crisis in each stage

Stage 1: Basic Trust vs. Mistrust

- Birth to age 1
- Totally dependent on others
- Caregiver meets needs: child develops trust
- Caregiver does not meet needs: child develops mistrust
- Basic strength: Hope
 - Belief our desires will be satisfied
 - Feeling of confidence

Stage 2: Autonomy vs. Shame and Doubt

- Ages 1-3
- Child able to exercise some degree of choice
- Child's independence is thwarted: child develops feelings of self-doubt, shame in dealing with others
- Basic Strength: Will
 - Determination to exercise freedom of choice in face of society's demands

Stage 3: Initiative vs. Guilt

- Ages 3-5
- Child expresses desire to take initiative in activities
- Parents punish child for initiative: child develops feelings of guilt that will affect self-directed activity throughout life
- Basic strength: Purpose
 - Courage to envision and pursue goals

Stage 4: Industriousness vs. Inferiority

- Ages 6-11
- Child develops cognitive abilities to enable in task completion (school work, play)
- Parents/teachers do not support child's efforts: child develops feelings of inferiority and inadequacy
- Basci strength: Competence
 - Exertion of skill and intelligence in pursuing and completing tasks

■ Stages 1-4

Largely determined by others (parents, teachers)

■ Stages 5-8

- Individual has more control over environment
- Individual responsibility for crisis resolution in each stage

Stage 5: Identity vs. Role Confusion

- Ages 12-18
- Form ego identity: self-image
- Strong sense of identity: face adulthood with certainty and confidence
- Identity crisis: confusion of ego identity
- Basic strength: Fidelity
 - Emerges from cohesive ego identity
 - Sincerity, genuineness, sense of duty in relationships with others

Stage 6: Intimacy vs. Isolation

- Ages 18-35 (approximately)
- Undertake productive work and establish intimate relationships
- Inability to establish intimacy leads to social isolation
- Basic strength: Love
 - Mutual devotion in a shared identity
 - Fusing of oneself with another person

Stage 7: Generativity vs. Stagnation

- Ages 35-55 (approximately)
- Generativity: Active involvement in teaching/guiding the next generation
- Stagnation involves not seeking outlets for generativity
- Basic strength: Care
 - Broad concern for others
 - Need to teach others

Stage 8: Ego Integrity vs. Despair

- Ages 55+
- Evaluation of entire life
- Integrity: Look back with satisfaction
- Despair: Review with anger, frustration
- Basic strength: Wisdom
 - Detached concern with the whole of life

Criticisms of Erikson

- Ambiguous terms and concepts
- Lack of precision
 - Some terms are not easily measured empirically
- Experiences in stage may only apply to males
- Identity crisis may only apply to those affluent enough to explore identities

Relevance to nursing practice

Nurses can plan care to assist these individuals in fulfilling the tasks and in moving on to a higher developmental level.

Object Relations Theory

- Object relations refers to interpersonal relations
- Object refers to that which will satisfy a need. significant person or thing that is target of another's feelings (drives).
- In combination with relations, object refers to interpersonal relations and suggests inner residues of past relations shaping present relations

 Object relations theorists investigate the early formulation and differentiation of psychological structure and how these inner structures are manifested in interpersonal situations

 Theorists focus on relationships of early life that leave lasting impression within the psyche of the individual.

Object Relations Theorist

- Share a common concern about the primacy of relationships over innate instinctual drives
- Shifts from instinct to early relationships Emphasizes environmental influences.
- Weight is given to how the infant develops a 'self' through relationships within family and how this self relates toward others
- Study disorders in relationships –(personality disorders)

Margaret Mahler

Separation – Individuation Theory

Normal Autistic Phase (birth-1 month) - First few weeks of life. The infant is detached and self absorbed. Spends most of his/her time sleeping. Mahler later abandoned this phase, based on new findings from her infant research. She believed it to be non-existent. The phase still appears in many books on her theories.

Normal Symbiotic Phase (1-5month) - Lasts until about 5 months of age. The child is now aware of his/her mother but there is not a sense of individuality. The infant and the mother are one, and there is a barrier between them and the rest of the world.

Separation-Individuation Phase (- The arrival of this phase marks the end of the Normal Symbiotic Phase. Separation refers to the development of limits, the differentiation between the infant and the mother, whereas individuation refers to the development of the infant's ego, sense of identity, and cognitive abilities.

Subphase 1—Differentiation (5 to 10 Months)

- The differentiation phase begins with the child's initial physical movements away from the mothering figure.
- A primary recognition of separateness commences.

Subphase 2—Practicing (10 to 16 Months)

- With advanced locomotor functioning, the child experiences feelings of exhilaration from increased independence.
- He or she is now able to move away from, and return to, the mothering figure.
- A sense of omnipotence is manifested.

Subphase 3—Rapprochement (16 to 24 Months)

- This third subphase is extremely critical to the child's healthy ego development.
- The child becomes increasingly aware of his or her separateness from the mothering figure, while the sense of fearlessness diminishes.
- The child, now recognizing the mother as a separate.
- The child needs the mothering figure to be available to provide "emotional refueling" on demand.

Subphase 4—Consolidation (24 to 36 Months)

- With achievement of consolidation, a definite individuality and sense of separateness of self are established.
- Objects are represented as whole, with the ability to integrate both "good" and "bad."

Relevance to nursing practice

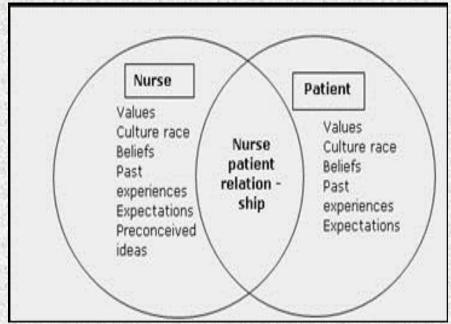
 Understanding the concepts of Mahler's theory of object relations helps the nurse assess the client's level of individuation from primary caregivers.

Peplau's Interpersonal Relations Theory

- •Stresses the importance of nurses' ability to understand their own behaviors to help others identify perceived difficulties.
- •Emphasizes the focus on the interpersonal processes and therapeutic relationship that develops between the nurse and client.
- •Four phases of the nurse-patient relationship are identified
- •Six primary roles of the nurse
- •Six secondary roles of the nurse

4 Phases of nurse-patient relationship

- * Orientation-client seeking assistance, meeting of nurse-patient, identifying the problem and services needed (interview process), and guidance.
- * Identification- identifying who is best to support needs, patient addresses personal feelings about the experience and is encouraged to participate in care to promote personal acceptance and satisfaction.



Phases cont.

- Exploitation- patient attempts to explore, understand and deal with the problem, and gains independence on achieving the goal
- Resolution- termination of the therapeutic relationship to encourage emotional balance for nurse and patient (difficult for both patient and nurse as psychological dependence persists)

Roles of Nurses

Primary

- Stranger
- Teacher
- Resource person
- Counselor
- Surrogate
- Leader

Secondary

- Technical expert
- Mediator
- Safety agent
- Researcher
- Tutor
- Manager of environment

A Nursing Model – Peplau (cont.)

Four stages of personality development

- Stage 1 Learning to count on others
- Stage 2 Learning to delay satisfaction
- Stage 3 Identifying oneself
- Stage 4 Developing skills in participation

Application of theory in "MY" nursing practice

- This theory would be useful with our newly diagnosed cancer patients and their family.
 Resistance is met when trying to educate them about the treatment, encouraging
 enrolment in studies, and education about how to care for the patient in their home
 setting.
 - Orientation-patient gets admitted to the unit, nurse helps the patient to recognize
 and understand that they have cancer and the importance of treatment.
 - *Identification*-Patient takes the time to internalize the diagnosis, the nurse participates in helping the patient to do so.
 - -- *Exploitation*-the nurse works to have the patient explore what help is needed to meet goals, incorporating other disciplines to problem solve (oncologists, therapists, alternative medicine, etc.). Patient test the limits of the nurses availability, and the nurse encourages patient to evaluate ways to meet their final goals.
 - -- **Resolution**-when in-patient treatment is complete, the nurse has to evaluate feelings and remove themselves from the bond that is made, allowing the patient and family to move on and regain balance in their own lives.

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