

# Erikson's psychosocial theory



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Erikson's psychosocial theory (Erikson, 1968), developed from Sigmund Freud's psychosexual theory and his extensive practical field research, emphasizes on the growth and change within the individual. He incorporated cultural and social aspects into Freud's biological and sexually oriented theory, and focused on how experience and environment shaped behavior and personality.

Erikson was the first to develop a life-span of human development, broken into eight stages. Each stage is associated with a crisis of two opposing emotional forces that the individual needs to resolve to successfully pass through to the next stage. A healthy balance of the two forces develops a basic virtue or strength. A tendency towards one of the opposing forces results in a 'maladaptation' or 'malignancy'.

The transition between stages are interconnected and do not occur in regimented clear cut steps. It is not an achievement scale where the crisis stages can be resolved permanently. Any previous crisis can revisit anyone with successful or unsuccessful results.

The stages are driven by physical and sexual growth, which prompts the life issues that create the crises. They are not driven by age precisely, hence the age range serves just a very rough guide, especially through the later levels when parenthood timing and influences vary. Interpretations of age range vary among writers and academics. Erikson intentionally did not stipulate clear fixed age stages, and it's impossible for anyone to do so.

Bowlby's attachment theory (Bowlby, 1989), developed from the object relations theory, emphasizes on the formation, continuation and growth of

caregiver-child relationships, along with the influences over social and emotional life. Bowlby's attachment theory was subsequently extended beyond infancy and early childhood into adolescence and adulthood by Hazan and Shaver (1987).

Add description + key assumptions!!! ; Ainsworth, Blehar, Waters, & Wall, 1978;

The first stage of Erikson's theory parallels Bowlby's theory of infant attachment, where experience with caregivers is crucial. Bowlby's (1989) attachment theory states that the infant develops models of the world and of self through interaction with the attachment figure. A positive model leads to secure attachment, while a negative model leads to a less satisfactory attachment. The infant uses sensorimotor behaviors, for instance crying, to alert and seek proximity to the attachment figure. In a stressful situation, this attachment behavioral system is used to reduce distress and instill a sense of physical security.

Caregivers who are warm, sensitive, available, and responsive during stressful situations lead to secure attachment. A sense of trust that they are cared for and protected creates feelings of worthiness. The sensorimotor secure base facilitates the infant to explore the surrounding world. Repeated success in leaving and safely returning to a security base enables the infant to view the world as a safe and inviting place, simultaneously gain the confidence to move around independently.

Successful resolution of the first stage, trust versus mistrust, develops the virtue hope. The infant should be well-fed and cared for, but not over-

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indulged or over-protected. Over-protection fosters a false sense of trust and promotes gullibility which leads to sensory maladjustment, characterized by senselessness or delusion. Abuse or neglect fosters mistrust and promotes suspicion of people. Mistrust increases resistance to risk-exposure and exploration, and leads to the malignant tendency of withdrawal.

It is the optimal result of the first developmental period in both theories. The outcome of this period is determined by the consistency and quality of care provided by the caregiver. These similarities support claims that attachment can be seen as the foundation of identity.

The second to fourth stage of Erikson's theory corresponds to attachment in children. The developmental context in this period expands from family to school and other contexts outside the home. Active participation by the child is required to develop motor skills and language, and to obtain achievements and accomplishments. The rapid development in cognitive abilities in this period enables the child to evaluate and describe experiences. The role of caregiver here is to provide guidance, praise and support as the child explores.

The secure base behavior changes and extends through childhood and into adolescence. Internal working models (IWM) of attachment guide the child to anticipate and plan in the relationship (Bowlby, 1969; 1982). The sensorimotor secure base is internalized to form IWMs of self, which represent self-belief. IWMs of the world represent the expectations of attachment figures and relationships (Bowlby, 1973; Magai, 1999).

The presence of a secure base is significant in both theories to support for exploration. Without such a secure base, the child faces uncertain about their abilities or about the reliability of needed support from others. Secure attachments support exploration and affirm secure models of self and the world.

Successful resolution in the second stage, autonomy versus shame and doubt, develops the virtue of willpower. The child should be encouraged to explore and manipulate the environment, but not given unrestricted freedom. Autonomy promotes confidence to be self-reliant while shame and doubt inhibits self-expression. Unrestricted freedom fosters shameless willfulness and leads to the maladjustment tendency of impulsivity, characterized by thoughtless and reckless behavior. Impediment to exploration and independence destroys confidence and leads to the malignant tendency of compulsion, characterized by self-limiting behavior.

Successful resolution in the third stage, initiative versus guilt, develops the strength purpose. Fantasy, curiosity and imagination should be accepted and encouraged. Initiative flourishes during adventure and play, while guilt stems from admonishment. This stage marks the beginning for social moral judgment. Lack of regard for others leads to the maladjustment tendency of ruthlessness, characterized by manipulative and detached behavior.

Suppressed adventure and experimentation fosters a negative fear of admonishment, and leads to the malignant tendency of inhibition, characterized by risk-averting and unadventurous behavior.

Successful resolution in the fourth stage, industry versus inferiority, develops the virtue competence. The child experiences the satisfaction of achievement, but not complacency. The expansion of the social circle enables the child to learn social skills and use tools in preparation for future. Over-training in a particular area of competence hinders the development of broader interests and leads to the maladjustment tendency of narrow virtuosity, characterized by workaholic or obsessive behavior. This is often apparent in child actors, athletes, musicians and prodigies. Lack of success to develop capabilities in school and work fosters a sense of inferiority and leads to the malignant tendency of inertia, characterized by indifference or aimlessness.

The fifth stage of Erikson's theory corresponds to attachment in adolescence. Individuals continue to explore the world as adolescent. The developmental context emphasizes peers and other social groups. This period involves making adult decisions and adopting roles. The capacity for self-reflection, for instance assessing strengths and weaknesses, and self-reevaluation of self-descriptions obtained from at earlier stages, is required to achieve a sense of identity.

Secure base and attachment behavior show continuity in their operation and function into adolescence, but the attachment figures may change, especially as romantic relationships become important. Models of self and the world continue to inform individuals about their worthiness of love and care and the likelihood of such love and care being offered. Secure attachment promotes active exploration and resilience in the face of negative exploration outcomes.

In infancy and childhood, the secure base exists for infants and children, not caregivers. The romantic relationship is a mutual secure base for both partners, providing a base for exploration and a safe harbor when comfort is needed.

Successful resolution in the fifth stage, identity versus identity diffusion, develops the virtue of fidelity. Identity crisis is a period of intensive exploration for different identities. The adolescent explores and commits to the adopted identity. Identity foreclosure, or commitment to identity without exploration, is generally less than ideal (James Marcia, 1980). Adolescents are known for their idealism and enthusiasm to promote their beliefs and lifestyles. Over-involvement in a role leads to fanaticism, characterized by self-important and extremist behavior. Identity fusion into a group allows escape from the harsh society and leads to the malignant tendency of repudiation, characterized by social disconnectedness.

The sixth stage of Erikson's theory corresponds to attachment in adults. The young adult begins to form intimate relationships and attachment with others. The developmental context expands further to co-workers, friends, and romantic partners. Intimacy requires a developed sense of identity as it establishes closeness and vulnerability with partners. Intimate relationships may prompt reconsiderations of previous identity formed with explorations and commitments. Activities build on the decisions made in the identity formation period pertaining to one's work and social/romantic life.

Secure attachment styles are generally linked to greater satisfaction in relationships (Feeney, 1994), and self-disclosure, reliance on partners, and physical intimacy (Collins & Freeney, 2004).

Insecure individuals are prone to be distrusting of their partners or are uncomfortable with forming an interdependent relationship. An insecure self model is likely to promote fearful, anxious or avoidant attachment (Collins and Read, 1990). In terms of identity development, this form of insecurity undermines the secure base making exploration of identity within the context of the intimate relationship difficult. Commitments based on such exploration tend to be less stable.

Successful resolution of the sixth stage, intimacy versus isolation, develops the strength of love. The young adult should be able to build deep and meaningful relationships with family, friends and marital partner, as opposed to isolation from love, friendship and community. Intimacy is a love between equals (friends or lovers), and it is essentially reciprocal. Feelings of loneliness promote superficial and liberal intimacy, which leads to the maladjustment tendency of promiscuity, characterized by sexually needy and vulnerable behavior. Fear of commitment fosters loatheness, which leads to the malignant tendency of exclusion, characterized by loner or self-contained behavior.

Successful resolution of the seventh stage, generativity versus stagnation, develops the strength of Care. The individual contributes positively and unconditionally to others. Generativity is an extension of the virtue love to the future generation. Unlike intimacy, generativity is not contingent on



reciprocity of love. A meaningful life involves participation in and contribution back to life. Over-devotion decreases productivity and quality, which leads to the maladjustment tendency of overextension, characterized by busybody and meddling behavior. Lack of outlet to contribute fosters selfishness, which leads to the malignant tendency of rejectivity, characterized by disinterested or cynical behavior.

Successful resolution of the eighth stage, integrity versus despair, develops the strength Wisdom. The individual should be able to look back on life positively and happily, and accept the imminence death with calmness. Attaining integrity without much difficulty leads to the maladjustment tendency of presumption, characterized by conceited and pompous behavior. Fixation on past failures and bad decisions fosters feelings of contempt, which leads to the malignant tendency of disdain, characterized by miserable and blaming behavior.