

The lifespan developmental stages of infancy



During the lifespan developmental stages of infancy, childhood, adolescence, and young adulthood, new needs and stressors arise which if not dealt with appropriately can lead to dysfunctional personality styles and relationships in adulthood. As a future social psychologist interested in conducting research on violent offenders and high risk occupations I was particularly interested in learning about the influence of each stage of development on personality styles. The research and material on developmental theories including attachment theory provided a viable theoretical base for the conceptualization of personality dysfunction. Most law enforcement officers are killed in the line of duty by individuals with personality disorders specifically antisocial personality (Officers. com, 2011). Therefore, understanding the development of personality disorders benefits the study of criminology and social science. The present review of the literature has three purposes: (a) to discuss the impact of early stages of development on interpersonal relationships during an individual's lifetime, (b) to focus on an individual's continuous adjustment to family social and environmental stressors and their reliance on interpersonal relationships to adapt and to develop their own self identity, (c) and to explore the risk factors and proactive preventive law enforcement and mental health practices that address early indications of dysfunctional interpersonal skills and personality styles.

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Reflective Paper

Within the field of developmental psychology, a debate between nature vs. nurture is often ensued when examining factors such as personality. Many professionals believe that nature or biology (genetics) determines an individual's behavior across his/her life span. On the other side of the debate are the professionals who believe that we are a product of our environment. A third argument in the field suggests that we are a product of a combination of nature and nurture.

An individual's development on all levels is not limited to one particular factor. Conception is the beginning of lifetime of reciprocal interactions and adjustment between a person, their family and the broader social environment. Each developmental stage represents changes and stresses which have a direct impact on social interactions and more intimate relationships. Early relationships are the foundation from which an individual will draw from later in life to engage others socially (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

Erik Erikson suggested that a person progresses through eight stages of psychosocial development from birth through death. The term psychosocial derives from the word psychological or pertaining to the mind brain and personality and social or the broader environment. This term at times is extended to biopsychosocial which includes biology or life (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

The eight stages of psychosocial development have a significant impact on the individual's growth and personality. According to Erikson each stage is marked by conflict which if successfully addressed and overcome have a

positive outcome. In order to be successful an individual has to resolve each crisis by achieving a healthy balance between the two opposing temperaments (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

Erikson indicates that a person's psychosocial development is not precise nor is it permanent. Crisis that may have been encountered early in life may once again arise later. This may explain violent offenders who have no prior violent history or offenders who are rehabilitated despite having committed heinous crimes. This implies that we shouldn't be complacent nor should we lose hope that others can change (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

Unforeseen events in an individual's life which require adjustment are embedded in interpersonal relationships. Insight into one's own behavior is necessary in order to adjust and adapt to social environmental changes. Interpersonal relationships define an individual's personality style. Consequently, human emotional and physical development relies on the interaction between the individual and their broader social environment (Baldwin, 1992).

Individuals are biologically predisposed to attend to the broader social environment with a singular personality style. Research indicates that variations in behavior may be indirectly or directly related to genetics. These disparities in behavior are often referred to as dimensions of temperament. Temperament is contingent on biological, interpersonal and social factors which are exhibited throughout and individual's life span. According to Buss and Plomin there are four fundamental temperament dimensions;

emotionality which is the propensity to express negative emotions frequently, activity which is the degree of physical movement that an individual normally exhibits, impulsivity which describes the extent to which an individual takes action, progresses from one action to the next, and is able to engage in self-control and sociability the act of being outgoing, gracious and happy while socializing with others (McAdams, 1989).

Buss and Plomin suggest that an individual has the natural tendency to build on these four temperaments. These temperamental dimensions exist from infancy and continuously progress through the lifespan developmental stages. The broader social environment in which an individual is embedded acts in response to these dimensions and alters them in the interim.

Interpersonal relationships from infancy through late adulthood are at the heart of this constant adjustment (McAdams, 1989).

Early physical and emotional issues such as brain damage in utero or during early lifespan developmental stages can be risk factors for the development of violent personality styles in youth and adults. Exposure to teratogens or toxic substances like alcohol is also a potential risk factor associated with the development of antisocial and violent behavior (Broderick & Blewitt, 2010; Pienaar & Molteno, 2010).

Research in the area of prenatal exposure to alcohol indicates that children exposed to this risk factor may develop psychiatric problems. These psychiatric problems can in turn lead to social alienation and violence.

Prenatal exposure to alcohol and postnatal traumatic experiences may also result in lower IQs, serious neuro-developmental deficits in attention span,

visual processing, language, motor skills and memory. Other behaviors observed are significant social problems, impulsivity, hyperactivity, inattention and oppositional defiant disorder. Research using self psychology theory suggested that some of the features associated with fetal alcohol exposure jeopardize a child's sense of self, which in turn fosters the development of psychopathology and dysfunctional interpersonal skills (Broderick & Blewitt, 2010; Pienaar & Molteno, 2010).

In terms of violent offenders physiological deficiencies in the neurotransmitter serotonin have been linked to violent behavior. Research indicates that serotonin counterbalances the violent and aggressive effects of testosterone on the brain. The pairing of low serotonin levels and high testosterone levels have been observed in some individuals diagnosed with violent personality disorders (Officer. com, 2011).

The lifespan developmental stages of infancy, childhood, adolescence, and young adulthood, in particular are defined by new events which if not successfully dealt with can contribute to dysfunctional interpersonal relationships in adulthood. John Bowlby described the attachment between parent and child as a mechanism that insured survival through proximity during stressful situations. Parents who are attentive and attuned to their children's needs and expectations promote a safe environment. This environment allows a child to develop healthy social, emotional, secure attachments. A home where a child's needs go unmet fosters distrust and chronic anxiety. The child then begins to see the world as an uncomfortable and unpredictable place from which they must hide or rebel against (Broderick & Blewitt, 2010; Ranson & Urichuk, 2008).

The parent-infant relationship represents the sources from which an individual draws from for future social behaviors and interpersonal relationships. The research in this area indicates that this is particularly true of sociability with peers and adults, morality and higher emotional functioning. Nevertheless, parent-child attachment varies in the impact it has on the lifespan developmental stages of an individual (Broderick & Blewitt, 2010; Ranson & Urichuk, 2008).

Affect attunement between parent and child is pivotal in the development of secure attachment and a positive, integrated, sense of self. Children who are continuously exposed to abuse are more likely to develop a fragmented sense of self and disorganized attachment patterns. In order to function daily in the world these children expend all of their psychological and physical energy. In addition, they are reactive, concrete, impulsive and dissociated from personal events. These characteristics may persist throughout an individual's lifetimes (Hughes, 2004).

Children who demonstrate a secure attachment style have social-emotional competence, higher cognitive functioning (i. e., academic skills, language skills and IQ), physical health and mental health. Children who have insecure attachment styles show deficits in these areas which increase the likelihood of negative outcomes in their interpersonal and broader social relationships (Ranson & Urichuk, 2008).

Behaviors that protect a child from harm and fear, and help an infant safely explore the world foster a positive parent-child attachment. The infant's behaviors include reaching, crying, grasping, smiling, vocalizing, clinging,

sucking and moving. These behaviors can be displayed differently and may be affected by culture. Nevertheless, the attachment relationship and their contribution to infant emotional development is a worldwide phenomenon (Broderick & Blewitt, 2010; Ranson & Urichuk, 2008).

Insecure attachment styles are a result of inconsistency in a caretaker's ability to be affectionate, loving, dependable, and sensitive to a child's needs. The three types of insecure attachment styles are: resistant attachment, avoidant attachment, and disorganized attachment. Children with these types of attachment styles are aggressive, hostile, socially withdrawn, highly dependent, and noncompliant. Consequently, they experience more difficulties at school and socially with their peers. This in turn places them at a higher risk for academic failure, mental health issues, and juvenile delinquency (Broderick & Blewitt, 2010; Ranson & Urichuk, 2008).

The most frequently diagnosed mental health disorder related to a child's insecure attachment style is reactive attachment disorder (RAD). The risk factors associated with RAD are; a history of separation from the caregiver, lack of (or inconsistent) affection and care and neglect. Children who have been physically and sexually abused and neglected are also more likely to develop RAD (Broderick & Blewitt, 2010; Child abuse, 2010).

Children diagnosed with RAD engage in behaviors such as; sadism, violence, eating disorders, counterfeit emotionality, kleptomania, compulsive lying, sexual obsessions or compulsions, passive-aggression and defective conscience. A diagnosis of RAD is seen as the foundation for a possible

future diagnosis of conduct disorder, antisocial personality disorder and substance abuse (Broderick & Blewitt, 2010; Ranson & Urichuk, 2008).

Adolescents with disruptive and antisocial behaviors have a history of poor parent-child relationships and parental neglect. Research on troubled adolescents indicates that insecure attachment and negative parent-child relationships promote repressed, hyper vigilant or unsure reactions to parents, random friendliness, and evident psychopathology. These children are mistrustful and angry toward their parents, do not adopt their parent's morals, and are unable to regulate their emotion in childhood and through adulthood (Elgar, Knight, Worrall, & Sherman, 2003).

During adolescence there is a renegotiation of the parent-child relationship. This renegotiation has the adolescent searching for a new self-image outside of his/her home environment while dealing with hormonal, physical, and cognitive changes (Allison, 2000; Sorkhabi, 2010). The conflict arises as parents seek to maintain control while the adolescent pushes the limits in search for emotional independence and autonomy. These are skills they will need as they progress from late adolescence to young adulthood. This conflict between parents' and adolescents' desires and experiences causes resistance to parental advice and a continued need for acceptance from peers on the part of the adolescent (Allison, 2000; Levy, 2011).

There are biological and social factors that contribute to an adolescent's change in behavior. Developmental theories offer differing explanations for these behavioral changes. Psychoanalytic theory postulates that the development of asexual attraction to individuals outside of the immediate

family creates conflict between an adolescent and their caregivers, including teachers ((Broderick & Blewitt, 2010; Levy, 2011).

Identity formation theory, similarly to psychoanalytic and cognitive theories suggests that an adolescent is traversing several stages in a quest to develop a positive ego identity. When an adolescent is unable to reach this goal in a healthy manner there is a risk of identity and/or role confusion. This confusion may negatively impact an adolescent's behavior leading to delinquency, running away from home, substance abuse, low self-esteem, depression, and adjustment disorders can impact the family causing parental dissatisfaction, depression, anger and marital distress (Broderick & Blewitt, 2010; Levy, 2011; Mullis, Graf, & Mullis, 2009).

Erik Erickson stated that the conflict of identity vs. role confusion exists in every adolescent. This drive pushes an adolescent to question the meaning of life and their role in the world. Many adults will offer the adolescent suggestions and at time answers to these questions. Nevertheless, this type of advice can contribute to an adolescent's the confusion and anger. At the heart of this confusion is the need to feel wanted, respected and valued as a member (of family or group) and as an individual (Allison, 2000; Broderick & Blewitt, 2010).

The relationship between parenting style and the development of personality styles and self-esteem is of great interest to developmental psychologist. It is difficult to thoroughly account for the effects of parenting styles on children's future behavior. Historically there have been children who grew up in very different home environment and have very similar personalities.

Conversely, there are children who have grown up in the same home and demonstrate striking differences in personality styles (Broderick & Blewitt, 2010).

The links that have been observed between parenting styles and children are summarized in four dimensions of parenting; disciplinary strategies, warmth and nurturance, communication styles and expectations of maturity and control (About. com, 2011). These dimensions have been noted in four types parenting styles; authoritarian, authoritative, permissive and uninvolved (Broderick & Blewitt, 2010).

Authoritarian Parenting style is defined by strict rules which are enforced with punishment when not followed. This type of parenting style negatively impacts a child's cognition. Some of the behavioral characteristics observed in children of authoritarian parents are; withdrawn, rebellious, unhappy, anxious, lack intellectual curiosity, react to others with hostility when frustrated and have low self-esteem. Children of authoritarian parents are obedient and proficient but have a decrease in happiness, interpersonal skills and self-esteem (Broderick & Blewitt, 2010).

Authoritative Parenting style also has established rules and regulations which are enforced. However, this type of parenting style fosters social maturity, confidence, self-confidence in completing new tasks, self-controlled and the ability to resist engaging in disruptive behavior. Children of authoritative parents are; happy, capable, successful and have high self esteem (Maccoby, 1992)

Permissive Parenting style is defined by parents who place very few demands of their children.

This parenting style negatively impacts a child's cognition. These children's behavioral characteristics are; immaturity, impulsivity, underachievers, rebellious, dependent on adults, showed less persistence on school tasks and low self esteem. Children of permissive parents have a decrease in happiness, self-regulation and experience problems with authority (Broderick & Blewitt, 2010; Education. com, 2011)

Uninvolved Parenting style is characterized by parents who are indifferent, make few demands of their children, have little sensitivity and few interactions with their children. These children's basic needs are met; however, there is little emotional attachment with their parents. Consequently, these parents reject and neglect their children's emotional needs. Children of uninvolved parents have low frustration tolerance, are not as capable as their peers, and display low self-esteem (Broderick & Blewitt, 2010; Education. com, 2011)

In addition to the four parenting styles discussed the literature also recognizes redirection as a parenting style. This style has some similarities with an authoritative parenting style. Redirection is considered the most effective parenting style for children who are raised in democratic societies. Redirection fosters self-motivation, reasoning, assertiveness, self-awareness, and builds self-esteem. Adolescents who have been raised by parents who utilized redirection have; high academic performance, are self-confident and have high self esteem (Kvols & Jordan, 1993).

Parents can have authoritarian, authoritative, and permissive parenting styles, with many variations. The child's temperament can determine what parenting style a parents chooses to utilize (Rudy & Grusec, 2006).

Adolescence, early adulthood, middle-age and late adulthood represent the lifespan developmental stages during which an individual develops a self identity through past events and memories. Children view the past as factual events, adolescents and young adults ponder and research the meaning and validity of past events (McAdams, 1989). During middle and late adulthood there is a need to connect the past and the future (Papalia, Olds, & Feldman, 2006).

Interpersonal relationships in infancy, childhood, adolescence, and young adulthood have a direct impact on future relationships and the psychological and social growth of an individual. The relationships engendered during these early life lifespan stages of development represent the foundation of all future interpersonal interactions. Understanding and individual's needs at each stage provides insight into the risk and protective factors that have an impact on dysfunctional interpersonal skills and personality styles.

Interpersonal relationships are necessary in order to cope and adjust to changes in the broader social environment.

Issues with self esteem and adequacy produce a need to define one's identity through relationships. This is observed early in life as children when begin to develop our own self identity with parental support and reassurance. Later during adolescents we seek individuation, support by acceptance from our parents and peers. Late adolescence and early

adulthood brings the challenge of molding an adult identity (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

Middle-age through late adulthood begins and ends the process of the examination of our personal and professional accomplishments and goals. This examination is therapeutic in that it helps pave the way for issues related to aging and death. Interpersonal relationships in late adulthood are a pivotal part of this examination which requires that one connect with past and future generations (Papalia, Olds, & Feldman, 2006).

During middle and late adulthood it is important to stay active and continue to engage with the social broader environment. Poor interpersonal skills and dysfunctional personality styles will ultimately contribute to negative outcomes during these lifespan developmental stages. An individual's ability to compensate for age-related declines in intellectual performance may be comprised by dysfunctional interpersonal skills. This ability which is known as "selective optimization with compensation" requires that an individual set their own goals and assess their own abilities in order to fully understand their age related physical and cognitive limitations (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

Lack of insight or self identity, individuation and poor interpersonal relationships can negatively impact on the aging process by adding ambivalence, anxiety and stress. Individual who poor social and interpersonal skills who have not contributed to making the world a better place may experience feelings of regret, and ponder on wasted opportunities. Erickson, describes this as "Despair and/or Disgust" the stage

in which an individual is unable to find peace with their accomplishments in life and therefore may experience denial and/or resentment (Broderick & Blewitt, 2010; Papalia, Olds, & Feldman, 2006).

Interpersonal relationships provide context during each of the lifespan developmental stages and help to resolve life-stage-related preoccupations. In order to thoroughly understand the development of personality it is imperative to learn from both sides of the nature vs. nurture debate. The analysis of both sides has provided ideas and concepts the help in assessing and proactively treating dysfunctional personality styles. Based on both biological and environmental research on the influence of lifespan developmental stages on interpersonal relationships and personality styles we can continue to develop treatment modalities, therapies, and raise community awareness of the risk and protective factors that contribute to dysfunctional relationships and personality styles.

It is imperative that law enforcement officers immediately coordinate with mental health workers and other pertinent agencies such as child protective services when investigating incidents involving violent offenders. This would allow for proactive intervention which can provide stabilization and referrals to mental health services for violent offenders and their families (Beresin, 2009).

Mental health professionals interested in working with violent offenders should consider and be aware of the individual, family (biological, psychological and behavioral), community (gangs, guns, and drugs) and societal (demographics, politics, and culture) risk factors that contribute to

poor interpersonal skills and violent personalities. Parenting skills training should foster a parent-child relationships that have: trust, which is the cornerstone of all future relationships; exploration of the environment, where a child feels safe and secure and therefore is conducive to positive intellectual and social development; behavior control, so that a child learns how to manage impulses and emotions; a sense of identity (capabilities and self worth), with a healthy balance of dependence and independence; morality, which contributes to empathy, compassion and conscience, and a core sense of beliefs (Broderick & Blewitt, 2010).

My vision for the impact that I would like to make on the field of social psychology includes the development of new and innovative behavioral assessment tools and techniques to proactively prevent crime by studying a violent offender's behavior and motivation. I want to focus not only on the crime but on the violent offender's social history including each of the lifespan developmental stages. Therefore, the behavioral assessment tools develop would analyze the capabilities and predispositions of a violent offender, including their genetic and physical makeup, perceptual and cognitive skills, and the emotional and the social development in order to ascertain these variables impact on their interpersonal skills and personality styles.

Understanding the development of a violent offender is complex and multifaceted. Research indicates that as a society we can proactively prevent violence by fostering a broader social environment in which individual's respect one another, despite race, gender or ethnicity (Beresin, 2009). Healthy relationships that result from nurturing parent-child

interactions which engender trust and positive self image should be encouraged through education. All violent offenders have a developmental history at some point they were children, adolescents and young adults and like you and me in order to understand their journey regardless of their crime we must acknowledge both the role of nature and nurture in their journey.

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