

*The Carter–Jenkins Center
presents*



Humberto Nágera M.D.

Director, The Carter-Jenkins Center

Professor Emeritus of Psychiatry, University of Michigan

Professor Emeritus of Psychiatry, University of South Florida

Psychoanalyst, Children, Adolescents and Adults

Developmental Interferences

by

Humberto Nágera M.D.

Director, The Carter-Jenkins Center

Professor Emeritus of Psychiatry, University of Michigan

Professor Emeritus of Psychiatry, University of South Florida

Psychoanalyst, Children, Adolescents and Adults

Developmental Interference

1. A “developmental interference” can be defined as whatever disturbs the typical unfolding of development. The term may be reserved to describe:
 - a) those situations that involve gross external (environmental) interference with certain needs and rights of the child, or internal interference due to pain, illness, etc.
 - b) situations in which unjustified demands are made of the child.

Developmental Interference (cont)

2. Many developmental interferences are not meant to happen. They can be described as accidental, e.g., long separations of mother and child due to prolonged illness of the mother.
3. Developmental interference can come about, through the lack of the indispensable minimum of stimulation and interaction, between the baby and his mother or his environment.

Developmental Interference (cont)

4. The degree of the interference, depends on their nature, and on the specific developmental stage at which they occur.
5. Separations of the child from the mother, at a time when the child still has a strong biological need for and a right to the mother's presence.

Developmental Interference (cont)

6. Parental holidays.
7. Marked and prolonged depression of the mother.
8. Exposure to hunger, through neglect or rigid feeding time tables.
9. Hospitalization of the child.

Developmental Interference (cont)

10. Illness of a painful nature, and of prolonged duration.
11. Very early, or rigid toilet training.
12. Death of parents, siblings.

Developmental Conflicts

1. They are experienced by every child, since they are part of normal development.
2. Occur when certain specific environmental demands are made at the appropriate developmental phases, or
3. When the child reaches certain developmental and maturational levels, at which specific conflicts are created.

Developmental Conflicts (cont)

4. Toilet training, demanded at the appropriate time and in a reasonable form, is a good example of #2 and #3 (previous slide).
5. Occasionally, developmental conflicts can be transformed into serious developmental interferences, when the demand, even if correct in timing, is made in improper or even traumatic ways.

Example of Developmental Interference and Developmental Conflict

1. Toilet training, should be based on the maturation of the central nervous system (myelination of the pyramidal tracts, etc.) plus the child ability to understand the demand.
2. “Training” can also be effected though, by circumventing conscious control, by means of reflex conditioning, long before the child is ready (physically or maturationally).

Example of Developmental Interference and Developmental Conflict (cont)

3. Before he can understand, accept, and comply with such requirements as described.
4. Child may be forced to sit on a pot for a long time when this restriction of his motility is least welcome.

Example of Developmental Interference and Developmental Conflict (cont)

5. The developmental interference in that case is related to the restriction of his motility and the negative aspects of the mother-child relationship.
6. Remember too that a young infant highly values his body products.

Example of Developmental Interference and Developmental Conflict (cont)

7. The child can understand already the demand and has developed concerns for the feelings and wishes of the object.
8. The developmental conflict has reached the right stage, when he values as much and even more than his body products the mother, who is demanding that he renounce his anal pleasures.

Example of Developmental Interference and Developmental Conflict (cont)

9. Notice how what may have been previously a gross developmental interference, has become a true developmental conflict through growth, maturation, and developmental processes.
10. It has become an “internal developmental conflict”, because there are now two opposite tendencies “inside the child himself.”

Example of Developmental Interference and Developmental Conflict (cont)

11. Understand then, the danger of placing excessive emphasis on the external circumstances as the triggering factor, of many neurotic episodes in childhood.
12. The individual nature of such conflicts, is due to the fact that the strength of the different component instincts, varies greatly from one child to another, as do the environmental reactions to them.

Example of Developmental Interference and Developmental Conflict (cont)

13. The “developmental conflicts” are usually specific, and of a transitory nature.
14. They generally disappear, more or less completely, once the specific phase has passed.

Example of Developmental Interference and Developmental Conflict (cont)

15. While the “developmental conflicts” are active, we might observe anxiety of different types, some temporary symptom formation, some behavioral disorders, some phase-specific fears, etc.

Example of Developmental Interference and Developmental Conflict (cont)

17. “Developmental conflicts” may be solved in such a way, that some aspects of the component instincts objected to, are taken into the personality in the form of character traits, or
18. As reaction formations against them (becoming clean in example above).

Neurotic Conflicts

1. This term, as usually employed in psychoanalysis and general psychiatry, has many connotations.
2. I shall restrict its meaning here, to conflicts that take place among the different psychic structures, id, ego, and the superego.
3. The “neurotic conflicts” are simple units.

Neurotic Conflicts (cont)

4. The component instincts push for gratification, while other aspects of the personality, may be opposing such a gratification.
5. We distinguish them (neurotic conflicts) from the “infantile neurosis” or “neurosis proper.”
6. The “neurosis proper” can, and usually does include several neurotic conflicts.

Neurotic Conflicts (cont)

7. Need to distinguish “neurotic conflicts”, from the conflicts between the child’s drives and the external world.
8. The objection to the discharge, or gratification, is in the case of the “neurotic conflicts”, an internalized one.

Neurotic Conflicts (cont)

9. “Neurotic conflicts” are frequently remnants of previous “developmental conflicts”.
10. Some developmental conflicts cannot be solved, and when development proceeds further, they remain behind, as unresolved conflictive areas.
11. What should have been a “transitory” developmental conflict, becomes now a permanent neurotic conflict.

Neurotic Conflicts (cont)

12. Thus “transitory conflicts” are thus turned into permanent conflictive areas, with permanent pockets of anxiety or symptom formation, of a restrictive nature.

13. The “neurotic conflicts”, create favorable conditions for the subsequent development, of the more complex and organized “infantile neurosis” and “later neurosis”.

Neurotic Conflicts (cont)

14. Neurotic conflicts, will remain active and integrate themselves into the infantile neuroses, the adolescent or the adulthood neurosis.
15. As conflicts of an internalized nature, one should clarify the role played by the superego.

The Infantile Neurosis

1. The “infantile neurosis” occurs, as children pass through the *phallic-oedipal phase*, and are in the nature of regular episodes in a child’s development.
2. Freud remarked, how a human child can not successfully complete its development without passing through a phase of neurosis, sometimes of great, and sometimes of less distinctness (the infantile neurosis).

The Infantile Neurosis (cont)

3. He was therefore, tempted to claim for this neurosis of childhood, the significance of being a prototype and a model.
4. The “Infantile Neurosis”, have traditionally been used to cover a normal and typical developmental conflict, as well as cases of mental pathology, in which “infantile neurosis”, has a much more serious connotation.

The Infantile Neurosis (cont)

5. Earlier problems may have determined, for example, important fixation points and directed later drive and ego development into certain specific directions.

The Infantile Neurosis (cont)

6. The “Infantile Neurosis”, is an attempt to organize all the previous and perhaps manifold neurotic conflicts and developmental shortcomings, with all the conflicts typical of the phallic-oedipal phase, into a single organization, into a single unit of the highest economic significance.

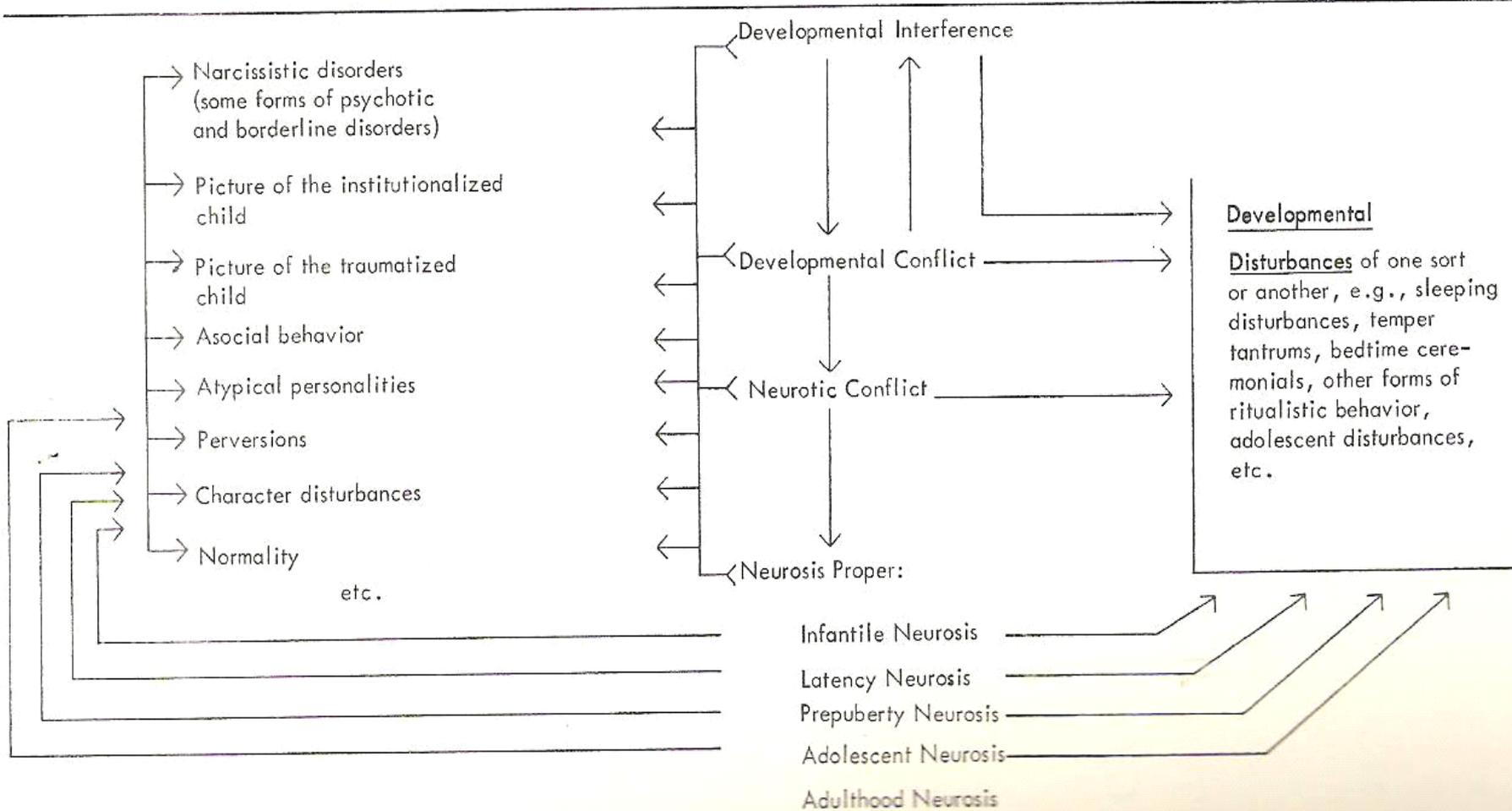
The Infantile Neurosis (cont)

7. Once that has happened, it constitutes the core for all later neurosis, and contributes to further character and personality development.

CHART I

OTHER POSSIBLE OUTCOMES

LINE OF DEVELOPMENT TOWARD NEUROSIS



A Developmental Scheme: Toward Normality, Neurosis or Other Forms of Disturbance (diagram Chart 1)

1. Contributions to the clinical pictures (listed in the left column) of the diagram can come from one or more of the types of interference and conflicts (described in the middle column). [Slide 37](#)

S 31

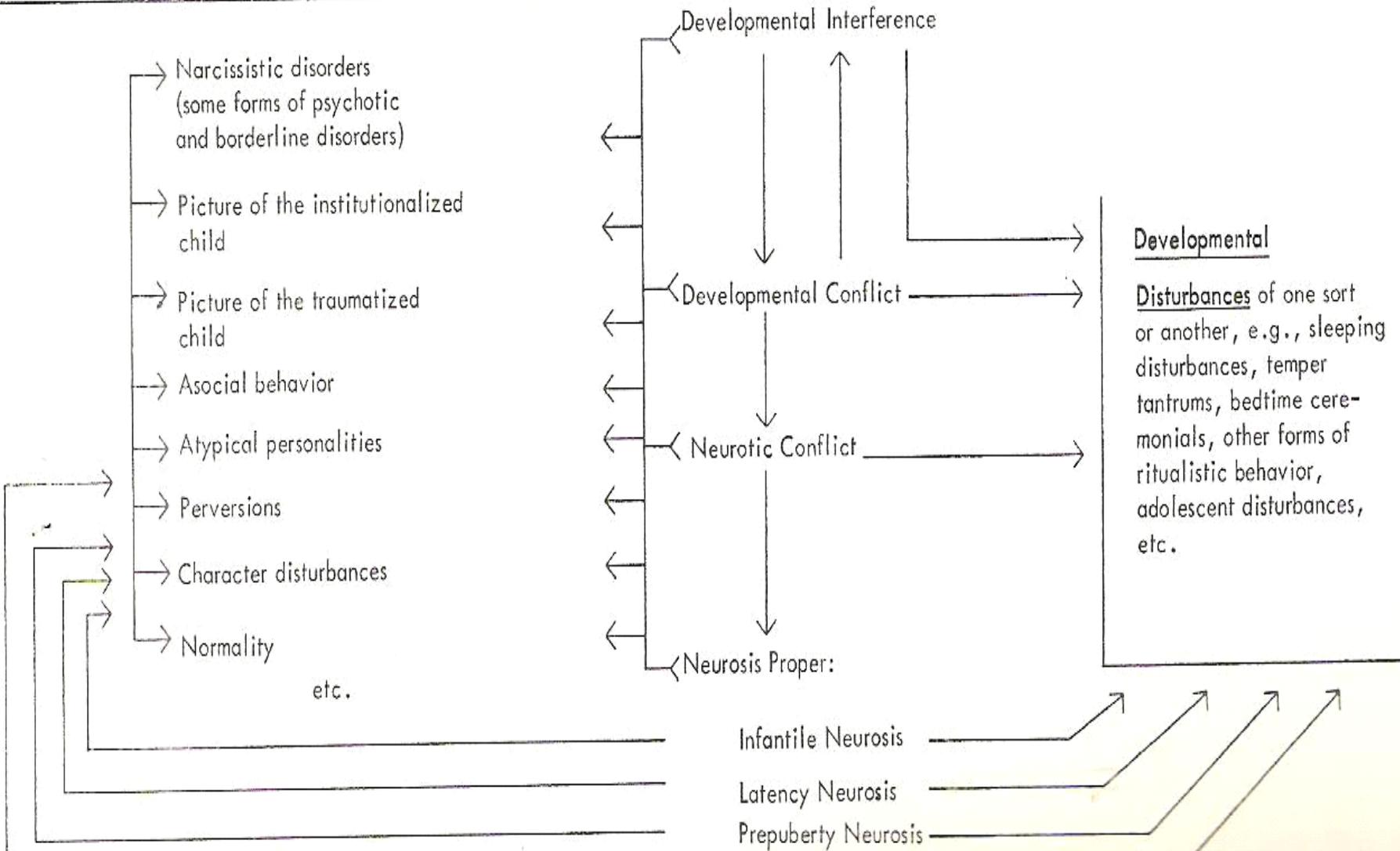
S 33

S 34

CHART I

OTHER POSSIBLE
OUTCOMES

LINE OF DEVELOPMENT TOWARD
NEUROSIS



A Developmental Scheme: Toward Normality, Neurosis or Other Forms of Disturbance (cont) (diagram Chart 1)

2. Clearly, it will be easier to deal with asocial behavior resulting from neurotic conflicts, than with asocial behavior resulting from a defective superego structure, itself perhaps the result of undesirable developmental interferences.

A Developmental Scheme: Toward Normality, Neurosis or Other Forms of Disturbance (cont) (diagram Chart 1)

3. In the diagram, there are arrows that seem to indicate a progression from the developmental interferences to the neurosis proper, but this is only partially true. [Slide 37](#)
4. It must be kept in mind, that developmental interferences can be active up to adulthood.

S 31

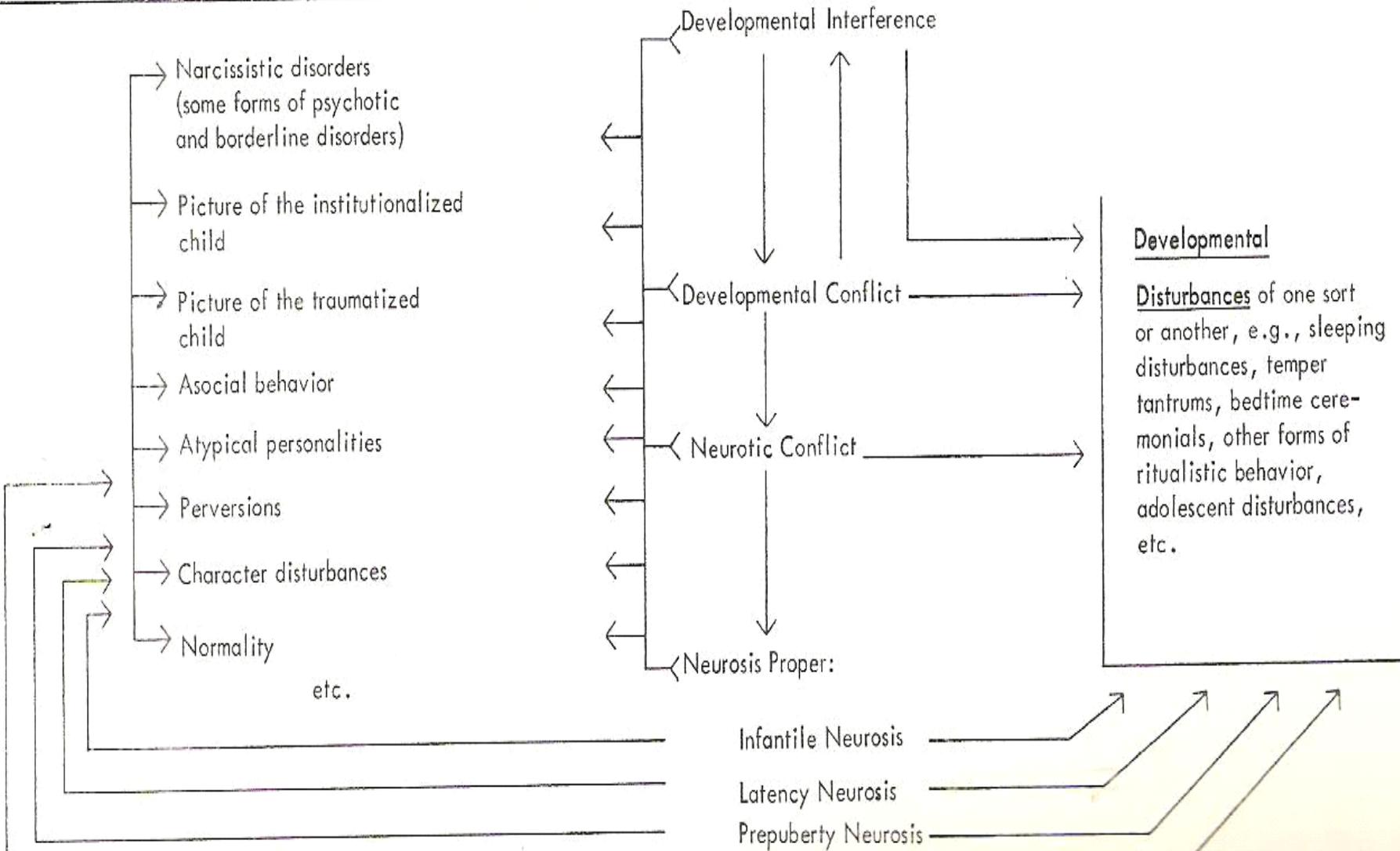
S 33

S 34

CHART I

OTHER POSSIBLE
OUTCOMES

LINE OF DEVELOPMENT TOWARD
NEUROSIS



A Developmental Scheme: Toward Normality, Neurosis or Other Forms of Disturbance (cont) (diagram Chart 1)

5. In the right column of the diagram, I try to show the possible origin of the so-called developmental disturbances, sleeping disturbances, some forms of ritualistic behavior, castration anxiety, etc. [Slide 37](#)

S 31

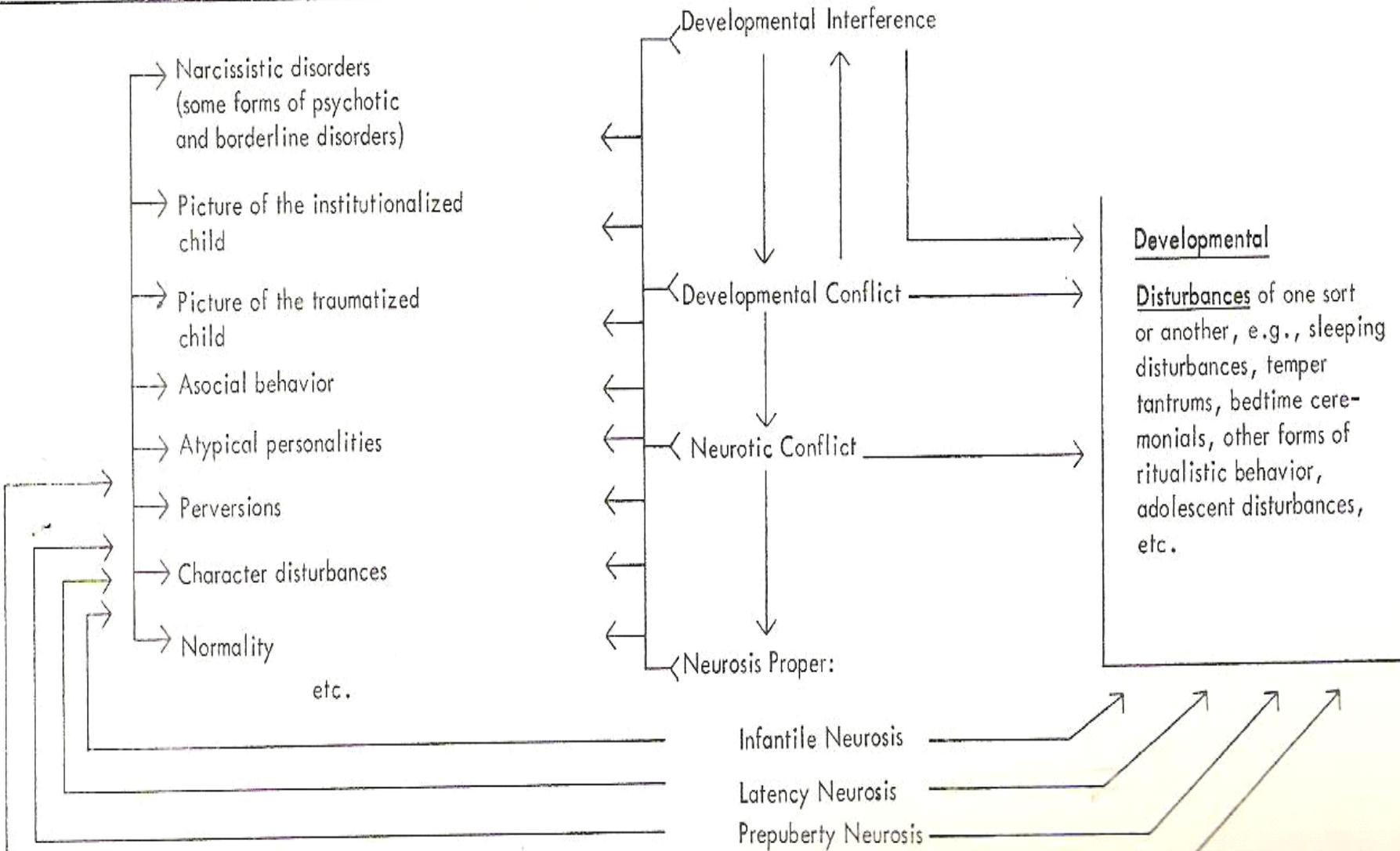
S 33

S 34

CHART I

OTHER POSSIBLE
OUTCOMES

LINE OF DEVELOPMENT TOWARD
NEUROSIS



The Carter-Jenkins Center

(A NON PROFIT ORGANIZATION)

**DEVOTED TO THE IMPROVEMENT OF MENTAL HEALTH
ACROSS THE WORLD BY MEANS OF OUR EDUCATIONAL
PROGRAMS FOR BOTH THE PROFESSIONALS AND THE
WORLD COMMUNITY AT LARGE.**

**PLEASE, HELP US FULFILL THESE AIMS BY SENDING YOUR
TAX FREE DONATIONS TO:**

**THE CARTER-JENKINS CENTER
1325 WEST FLETCHER AVENUE
TAMPA, FL 33612, USA
Phone: 813-908-8686**

**For other programs go to:
www.thecjc.org**

THE END

Many other programs concerning issues on mental health or ADHD updates, can be seen in our web page at:

www.thecjc.org

Visit this Web page and follow the instructions to see these programs and please recommend it to your friends and colleagues if you like them.

For a complete list of Lectures on Mental Health click below:

http://www.thecjc.org/current_prog.htm

Developmental Interferences

*A Carter–Jenkins Center
production*



Copyright 2015

