

Stress and Anxiety Podcast Episode 4

Podcast 4 – How can understanding our early childhood development help when we feel anxious now? – 21 minutes

In the third podcast, we thought about a medical approach and a psychoanalytic approach to anxiety and about how, whilst they often have different aims, what they have in common is an understanding of how our early experiences can impact the laying down of some of our basic neural pathways.

In this podcast, you'll be invited to think in more detail about what happens to us as we go through the various stages of childhood emotional development, and we'll then go on to think about how we can make use of this when dealing with our own feelings of anxiety.

So, as you probably know, a huge number of neural connections are made in a baby's brain before birth, and the process continues to different degrees throughout childhood and adult life. The first few months of a baby and young child's life (especially up to the age of 2 years) are particularly important in establishing the neural pathways that can affect our fundamental patterns of feeling, thinking, relating, and behaving later on in our lives.

Thus, in addition to genetic factors, how a baby or small child is cared for, by whom, and how well in relation to that particular baby or small child's needs, all matter in shaping our subsequent emotional, cognitive, relational, and behavioural patterns and ways of perceiving others, ourselves, and our own and others' experiences.

If you've ever spent any time in the company of a very small baby, you will know that in the first few weeks or even months, it's as if they have no idea where they end and where the rest of the world or other people begin – limbs flail as the tiny baby screams when feeling hungry, cold, wet, or lonely, and cries for milk, warmth, and the comforting presence of a parent or carer who can hold them close and protect them. From a psychoanalytic perspective, the experience of birth is usually considered highly anxiety provoking in and of itself, not just for the mother giving birth or for those supporting her, but for the baby being born, too. And when you think about it, suddenly leaving what is hopefully a warm, cosy, and protected inter-uterine environment and being ejected out into the world, in what can be a quite traumatic if not violent process, might well come as a bit of a shock for the tiny infant, too. But for some babies, as Consultant Child and Adolescent Psychoanalytic Psychotherapist, Graham Music, points out in his book, *Nurturing Natures*, there is now clear scientific evidence that parental stress, whether in the external or internal physical or emotional milieu, can result in the inter-uterine environment being more hostile, with

some stress hormones, for example, crossing the placenta and impacting the developing foetus. Research also shows that maternal physical and mental state during pregnancy can and does impact the subsequent post-partum physical and emotional development of the baby and small child.

Once born, the baby is designed to react instinctively to others and somehow seems to know that without a parent or parent substitute, they would not survive for long - a fact which, even if a baby is unlikely to be able to conceptualise it in quite these terms is, when you think about it, quite literally true. Research has established that new born babies recognise both of their birth parents' voices from when they were *in utero*. Recent MRI studies also indicate that parents' brains undergo important changes during the period of pregnancy and immediately after birth, and that these changes are associated with specific aspects of care provision, such as an increased state of alertness to threat detection, and an increased aptitude and capacity for emotional regulation, empathy, and reflecting on the mental states of others (a process known as 'reverie').

Once they have been born, then, it is as if the tiny baby feels that the parent or carer is literally holding them together and stopping them from falling apart, and gradually, the repeated experience of being fed, hopefully in a predictable enough fashion, held, and comforted in an emotionally attuned way enables the baby to develop a sense of their own physical and eventually emotional boundaries, and optimally, an idea of the world as a predictable and safe enough place. Following the Psychiatrist and Psychoanalyst Donald Winnicott, this is sometimes referred to as a 'holding environment'. Nevertheless, the baby also has to learn to tolerate the frustration of waiting for their feed or for a cuddle, for a nappy change, or for an adult who will notice, comfort, and play with them, and then, as they develop, they also have to learn to tolerate the frustration of not having the breast or bottle immediately, of the experience of weaning, and of learning to co-ordinate their physical movements and to say their first words. Anyone who has spent any time with a baby or small child will recognise how frustrated and cross they can become, and how they can bite, scream, shout, kick, and lash out with their tiny fists and feet, and can wee, pooh, refuse to feed, and generally protest if their needs are not met almost instantly at first. Then, as they hopefully learn to manage their frustration bit by bit, and as reality impinges and they understand that other people also have needs, and that they can't always have what they want straight away or all the time, the baby, toddler and young child usually starts to develop a gradually increasing ability to be concerned about other people, too, and might become particularly solicitous about the feelings of their immediate caregivers.

Bit by bit, as the Child Psychoanalyst Melanie Klein argued, and in what Winnicott termed a 'good enough' environment, the baby gradually develops a sense that the primary carer who can, at times, frustrate them by making them wait is the same person who feeds, comforts, and cares for them. And from this perspective, as the baby or small child starts to bring these two versions of their parent or carer together in their minds, they gradually begin to worry about whether their own angry or hostile feelings might be damaging them or might drive them away. And if the baby or small child is feeling particularly cross towards their parent or carer, they might even worry about whether or not they will come back. A desire to please begins to set in, as well as an increased anxiety about being separated, and this is the stage at which many small children start using dummies, raggies, blankets, or teddies as what Winnicott termed 'transitional objects', to help them manage when their primary carer or significant others are absent.

Small children also then gradually start to develop other fears, such as worries about monsters under the bed, frightening bogeymen and witches, or ghosts, or sometimes phobias about particular animals, fairy tale characters, or even cartoons, of which they can become particularly frightened when they themselves have been cross, aggressive, or hostile towards their parent, carer, the parental couple if there are two parents in the family, or towards any siblings or playmates who, it is often feared, are loved more or being treated preferentially. Later on, the young child might get worried about fantasised burglars or even murderers breaking into the house. It is as if, as Melanie Klein pointed out, they fear retaliation or revenge for their own hostile and aggressive impulses.

In the 'good enough' environment, however, the baby and small child gradually also acquires the experience of an adult or adults who can take in their feelings and emotions, reflect on them, relate to them, name them with words, and return them to the infant or toddler in a more emotionally digestible form ('Oh, it's so hard when you have to wait for your milk/sleep/nappy change/cuddle, I know you're hungry, wet, and tired', or 'Oh, I know it really hurts, shall I rub it better?'). This is the process we have come across already, which the Psychiatrist and Psychoanalyst, Wilfred Bion, termed 'containment'. This idea is closely associated with the related phenomenon of 'attunement', developed by the Psychiatrist and Psychoanalyst, John Bowlby, which is to do with the parent or carer being sufficiently emotionally in touch with the baby or small child's feelings. Both are closely related to a third concept, that of 'matching', that is, the mirroring of bodily and emotional rhythms, developed by the Psychiatrist and Psychoanalyst, Daniel Stern. Nevertheless, perhaps surprisingly, these processes of containment, attunement, and matching don't have to be anywhere near perfect, and indeed, there is now evidence to suggest that, as Winnicott long ago argued, it is actually helpful if these processes are not too perfect, as it is the recovery from mismatches, or what Daniel Stern refers to as 'mis-steps in the

dance', that can actually help the baby and small child to build emotional resilience, confidence, and agency, as long as the mis-matches are not too widely divergent from what that particular baby or small child needs at the time. What this does suggest, however, is that, as long as they are not too challenging all at once, having experiences that are slightly out of our comfort zone can actually be helpful.

It is not hard to imagine how a parent with post-natal depression, severe mental health difficulties, their own inter-generational attachment difficulties, or preoccupations with extreme financial difficulties or other environmental adversities, might find it particularly difficult to provide this 'good enough' emotional environment, however much they might consciously wish to. In an influential paper by the Child Psychoanalyst, Selma Fraiberg, called 'Ghosts in the nursery', she explores how parents' own difficult experiences and relationships from their own childhoods can and do impact the emotional world of the developing infant. This idea of 'ghosts in the nursery' is another psychoanalytic concept which has more recently been evidenced by research on the inter-generational transmission of attachment and trauma. This is not to blame parents or carers for everything that we subsequently experience or for all our ensuing problems, but rather, it is to recognise that, as well as the genetic predisposition of the baby or young child to any later emotional or mental health difficulties, and any adverse experiences the child might go on to have later on in their lives, the inter-generational physical and emotional environments their own parents or carers grew up in can also impact the consequent development of emotional or mental health difficulties in the following generation.

Depending on our experiences of our parents or carers and how they responded to us when we were babies and small children, then, we go on to develop our own particular 'cognitive templates' – that is, our own individual ways of reading and experiencing the world, as well as our own particular 'attachment patterns', or ways of relating to others - be that a secure attachment pattern or an insecure anxious, avoidant, ambivalent, or disorganised attachment pattern, which can impact the ways in which we, in turn, experience and relate to others. If this is an area that interests you, a good place to start is the chapter on attachment in Graham Music's *Nurturing Natures* book.

After literally millions of tiny interactions with parents or carers, in what is hopefully a 'good enough' environment, then, the baby and young child ideally starts to learn to internalise the process of emotional containment themselves, learning to name and reflect on their own feelings, and eventually learning, more or less, to self-regulate emotionally. At the same time, however, the young child takes in and starts to recognise both parental and societal expectations, developing an (at times harsh) inner critic (what the pioneering Psychoanalyst, Sigmund Freud, termed the 'superego'). This inner critic or superego can

be seen as trying to keep in check the young child's more selfish, instinctual, and impulsive feelings (the 'id'), while the more reasoning and thinking part of the mind (the 'ego') attempts to keep a balance between these two, often opposing, forces in the mind. Worries about having damaged the parent or carer through hostile or aggressive feelings, about the parent or carer going away and not coming back, or about not being loved as much as someone else in the family can become exacerbated by the young child feeling that they have been naughty, or that they haven't done something well enough – especially when the grown-ups around them, or older children, seem to be able to do everything so much better! Nursery and primary school can sometimes exacerbate these feelings as children have to learn how to 'sit nicely', 'walk nicely', 'play nicely', fold their arms and legs, and keep quiet at all the right times, not to mention learning how to read, do maths and start writing, as well as working out how to make friends, deal with adversaries, and learn all sorts of other complicated new social rules and intricacies of classroom and playground politics.

At around the age of 4 or 5, the time of starting school in the UK, another important source of anxiety can come to the fore – that is, the child's envy of, and sense of exclusion from, the parental couple, where there are two parents, or in a single parent family, of the lone parent's relationship with others or with, for example, their job or another important activity that demands their attention. In particular, the child has to deal with ambivalent feelings of both love and hatred towards the parent or activity which is seen as a rival for the attention and love of the parent they most desire. You might have heard this referred to as the 'Oedipus complex' and, whilst the original psychoanalytic conception reflected the traditional attitudes of the time in which the idea was first developed, Psychoanalysts nowadays tend to think of this phase in terms of what the Psychiatrist and Psychoanalyst, Ron Britton, has termed a 'triangular space', that is, the need for the young child to recognise that they are observers of, and not participants in, their parents' relationship, with all that this entails in terms of starting to reflect on their own and others' feelings, thoughts, and behaviours. Essentially, then, the young child's developmental task at this age is to move away from the idea of an exclusive dyadic relationship with their primary carer to relationships with others, their wider society, and eventually, if they wish as adolescents or adults, to a partner or partners of their own. Not surprisingly, perhaps, at the age of around 4 or 5, the feelings of hatred towards the rival parent, or whatever occupies the desired parent's attention, often result in huge anxiety, again leading to fears about some sort of retaliation. For some children, there is also the idea of a catastrophe occurring if they experience or imagine their parents actually linking up, as this can entail an idea of their being entirely forgotten or excluded. Where these difficulties are extreme or remain unresolved, they can often resurface again in early adolescence, and might

continue to trouble us in relationships throughout our adult lives, unless they are unattended to.

We can see how, then, even though we often don't remember anything about our earliest experiences, they might nevertheless contribute to some of our most fundamental contemporary anxieties. We can also see why predictable routine, continuity, naming and expressing feelings, and having our experiences and feelings taken in, validated, and thought about, whether by friends, family, significant others, or even just by ourselves (by making the time and space to reflect on them), might be important in helping us to mitigate whatever anxieties we might currently be suffering. And we can see how contemporary experiences might really resonate, without our even being conscious of the process, with experiences from early childhood that we can't remember because they happened so early in our lives, or with later experiences which we might have subsequently repressed because they were too painful emotionally. In the next podcast, we'll be exploring some of the ways in which we might be able to make time and space for our feelings, and you might find it helpful to keep this brief tour through some of the key emotional developments in childhood from a psychoanalytic perspective in mind.

And what happens if we didn't have a 'good enough' experience of childhood, or if we had a 'good enough' experience in some regards but not others? What if significant others in our lives were themselves overly distracted, anxious, depressed, repeatedly bereaved, overworked, or struggling with mental or physical health problems, debt, alcoholism, bad housing, inter-generational trauma, or the impact of not having received good enough parenting themselves? What if, perhaps because this wasn't done for them, our primary carers couldn't take in our feelings and process them for us, by putting them into words and returning them to us in a modified and more digestible form, so that we could eventually learn to do this for ourselves? Or what if they inadvertently or, sadly in some cases, even deliberately, added their own fears, anxieties, difficult, hostile, or aggressive feelings to our own negative emotions, so we had an experience of our fearful feelings ricocheting back at us, amplified in horrifying ways? In the latter case, we might have repeated experiences of what Bion called, 'nameless dread', an almost indescribably terrifying, pervasive feeling of near death, which, in thankfully very rare circumstances, might even lead to a cutting off from reality, as a way of defending against extreme emotional pain. In less severe circumstances, if what we learned was not to feel and express our emotions in a helpful way, but rather, to repress them or to act them out unconsciously, we might find ourselves using a range of other defences against anxiety, usually without even realising it.

Some of these other ways in which we might defend against early or subsequent anxieties have been usefully explored by Anna Freud – Sigmund Freud’s daughter and herself a distinguished Child Psychoanalyst. These unconscious defences might include somatisation, where anxiety about an emotional conflict gets expressed via physical aches, pains, or illnesses. Just because they are psychological in origin does not mean that they are not real, and they can be just as painful as those which are physically organic in nature. So, for example, even if you know there is nothing actually wrong with your sight because you have recently had your eyes tested at the optician’s, you might find your eyes aching when you visit your parents because there is something you don’t want to see about their emotionally abusive relationship. You might make use of the defence of displacement, where feelings of hatred get shifted from someone important to you onto someone less so. So, perhaps you might find yourself always complaining about how you never get to see your tutor at Oxford, when what you might really be complaining about is how your father or mother always worked such long hours when you were little that you only saw them at weekends. Conversely, using the defence of masochism, you might turn hateful feelings towards yourself, perhaps working extremely long hours as a way of punishing yourself for the rivalrous feelings you have towards your brother, about whom, as a child, you were never allowed to express any hostile feelings. You might use excessive projection, relocating your own difficult feelings in others, saying, for example, that your flatmate is always really competitive about exams, when it is you who feels highly competitive towards your flatmate. You might develop what is called a reaction formation, a kind of defence where we become overly solicitous and concerned about someone towards whom we might in fact have some pretty aggressive feelings. Or perhaps you make use of obsessive rituals or thought patterns, using so-called ‘magical thinking’, so you might find yourself avoiding walking on the cracks in the pavement on your way to lectures, for example, because you feel that if you don’t, someone you love might come to harm, but unconsciously, it might be that you have quite mixed feelings towards them and want to protect them from your own hostile feelings. Other defences against anxiety might include sublimation (becoming brilliant at sport, music, academics, or other activities as a socially acceptable way of expressing aggression or competitive feelings towards others), denial (‘What, me? I’m not worried!’), displacement (‘I’m worried about my exam’ rather than, ‘I’m worried that my parents don’t love me as much as my sister’), and regression, when we revert in developmental terms to a period when we felt we didn’t have such difficult feelings or circumstances as we do now, and behave in a childlike manner with regards to past habits, feelings, or mannerisms which we have long outgrown. So, for example, when feeling really vulnerable after a break-up, you might find yourself wanting to listen to some of your favourite music as a teenager, or even eating nursery food. Whilst many of these defences are normal human reactions when used in moderation, they can be problematic

and actually make our anxiety worse, rather than better, if they become more extreme or over-used.

In this podcast, then, we've thought about anxiety from a developmental, psychoanalytic perspective. You might want to spend some time reflecting on the possible source of anxious feelings that you might have, and to try to relate them to your own childhood experiences, both those you remember and those you don't but might have been told about or be able to find out about. These things can't be forced, however, so as a way of starting to reflect on what we've been discussing in this podcast, rather than deliberately sitting down and trying to remember things, you might instead want to try doing something relaxing and enjoyable and see what comes to mind, allowing your mind to wander. If you can, you might want to find out about some of your early childhood experiences, and see whether you can allow your mind to make any connections by itself, if that is what it wants to do. And as ever, if you find this process of seeing what comes to mind difficult or disturbing and want some help with it, do think about making an appointment with the University Counselling Service, or if you start to find your feelings getting too much, so that you find it difficult to contain them yourself, please do make an appointment to see your GP or College doctor. In case of life threatening emergency, please go to Accident and Emergency at your nearest hospital.