

A Bio-Social Theory of Neurosis

Dr. C. George Boeree

Shippensburg University

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[<http://www.ship.edu/%7Ecgboeree/genpsyneurosis.html>]

Neurosis refers to a variety of psychological problems involving persistent experiences of negative affect including anxiety, sadness or depression, anger, irritability, mental confusion, low sense of self-worth, etc., behavioral symptoms such as phobic avoidance, vigilance, impulsive and compulsive acts, lethargy, etc., cognitive problems such as unpleasant or disturbing thoughts, repetition of thoughts and obsession, habitual fantasizing, negativity and cynicism, etc. Interpersonally, neurosis involves dependency, aggressiveness, perfectionism, schizoid isolation, socio-culturally inappropriate behaviors, etc.

Generally, neurosis means poor ability to adapt to ones environment, an inability to change one's life patterns, and the inability to develop a richer, more complex, more satisfying personality.

The first point to note is that there are predisposing physiological conditions, for the most part hereditary. Most obvious is the temperament trait (or traits) referred to as emotional instability. Other traits may also contribute, such as extremely high or low conscientiousness. It may be that any inherited trait, when present in the extreme, makes the person more liable to develop neurotic problems.

The second point is that one's culture, upbringing, education, and learning in general may prepare one to deal with the stresses of life, or not. These factors may also serve to override any predisposing physiological conditions, or to exacerbate them.

The third point concerns the triggering stressors in people's lives which lead to the various emotional, behavioral, and cognitive symptoms of neurosis. These stressors can be understood as consisting of situations of uncertainty and confusion, usually involving interpersonal relationships, that overwhelm the person's capacities, learned and/or inherited, to cope with those situations.

Basically, we deal with the world by using our previously acquired knowledge of the world, in coordination with our inherited capacities, to solve the problems presented to us as efficiently as possible. When we are up to the task, our emotional responses are kept to within tolerable limits. When we are not up to the task, we experience anxiety. This anxiety may develop into other emotional responses as well, depending on the details of the problem, our inherited traits, and our learned patterns of response to problematic situations.

When we experience repeated occasions of stress and anxiety, we begin to develop patterns of behavior and cognition designed to avoid or otherwise mitigate the problem, such as vigilance, escape behaviors, and defensive thinking. These may develop into an array of attitudes which themselves produce anxiety, anger, sadness, etc.

The family is often the focus in discussing the origins of neurosis. First, any genetic predispositions towards neurosis may be inherited. Secondly, the family may have provided little in the way of preparation for a child to deal with the stresses of life. And thirdly, the family may itself be a source of the stress and confusion which the child may be unable to cope with. It may often be the case that a parent is him- or herself troubled by neuroses, and thereby provides the genetics, the poor parenting skills, and the stresses that lead children to develop neuroses.

A child is still in the process of learning the skills required to survive and thrive in the social world, and is thereby more susceptible to stress. He or she needs both parental guidance and a degree of security. The child needs to know that the parent will be there for him or her. This reliability is communicated by means of the love a parent expresses to the child. If the child fails to perceive that love (even if it does actually exist), he or she will be left with considerable and very general anxiety, as well as feelings of incompetence and unlovableness.

On the other hand, we should not jump to conclusions in this regard: Not all neurotics raise neurotic children, and not all neurotics were themselves raised by neurotic parents. There are many stressful events which can overwhelm even fairly emotionally stable and well educated children, adolescents, and even adults. Among these, we can mention the death of parents, their divorce and remarriage, foster homes, institutionalization, ill health of the child or the parents, war time experiences, immigration, poverty and homelessness, assault, sexual abuse, bigotry, and so on.

Many people develop neuroses during adolescence. The sometimes dramatic physical and emotional changes can by themselves overwhelm some adolescents. Even more likely, these changes, combined with the need to demonstrate social competence and to gain peer approval, can lead to great stress and overwhelm the adolescent's emotional capacities. Teenagers rejected by their peers, due to weight problems, physical appearance, weakness, retardation and learning problems, social shyness or awkwardness, sexual orientation, race, ethnicity, national origin, etc., are especially vulnerable. Many, if they have the resources and especially if they have support from family and friends, recover in early adulthood. Others do not.

Just like the child, the adolescent is still in a stage of development, and has the added burden of requiring the social skills involved in sexual competition. These are usually learned by imitating other adolescents, especially those that are admired for their skills and successes. The learning is then supported by gaining validation from other adolescents in the form of acceptance and approval. Without that approval, the adolescent feels no confidence in his or her social skills and again lives with the anxiety of never quite

knowing how to act. The adolescent is left with feelings of isolation and self-loathing.

Many of these issues continue to apply in young adulthood and even later. Young adults typically feel the need for a partner in life, for a network of friends, for a sense of competence as evidenced by success in college or in the workplace, and so on. Later, the desire for children, for financial security, and for social respect add to the stress. And later still, coming to terms with the prospect of ill health, the death of friends and family, and one's own mortality provide the older adult with new challenges for their emotional strength. The better the foundation in childhood and adolescence, however, the better the chances that the adult will be able to cope.