

GROWING OLDER-GROWING WISER?

The DNA of the Soul and Life Satisfaction

Dr. Evgenia Georganda

Dubai January 2006

Biology offers us a valuable schema with which we can visualize psychic development and its basic ingredients. Development proceeds in stages and the attainment of different skills and capabilities can be viewed as steps in a ladder that lead us higher towards the ultimate goal of our development-- **individuation** and **self-actualization**. The photograph of a DNA molecule can also help us grasp the idea of development as a non-linear process. It rather takes the form of a spiral where what has been gained (or lost) in the previous stages has a cumulative effect. It is often the case that individuals in therapy realize that they are again and again working on specific themes that they believed they had already resolved. They often become discouraged and feel as if they are not progressing. It is important however to realize that such repetition, may differ from the known repetition compulsion where one seems to be stuck in a vicious circle and instead, may be viewed as a normal process by which someone is working on the same theme but on a higher level until s/he can reach full

realization and thus resolution. The upward movement of the spiral suggests the unfolding and evolutionary nature of our journey in life and our struggle to ascend to a higher way of being.

Life as we know it, is **a process** that begins with birth and ends with death. This life long process has been divided into eight stages. Infancy, toddlerhood, early childhood, latency, adolescence, early adulthood, middle age, and old age. What happens in each stage is important for the next. Erikson (1963,1980) was the first one to introduce the idea of **a positive and a negative outcome** depending on the quality of our early relationships. Our parents are responsible not only for the basic DNA material that we inherit, but for our basic psychological constitution as well. Although the knowledge of our biological structure cannot help us to change it, the understanding of our basic psychological make-up can help us to alter it.

Development is a process of separations that lead us from a merged and symbiotic way of being to an existence as a separate and unique individual. To be able to stand on our own and to become the best that we can be are considered by many psychologists the ultimate goals of our development. Many things can happen that will promote and enhance the attainment of these goals and many things can hinder or block them. **Our realization of what happens in each stage can be very helpful in promoting growth and unblocking the path to self-actualization and self-fulfillment.**

Birth signifies the first and most important moment in this process of separation/individuation. It is with the cutting of the umbilical cord that we

become physically separate from our mother. This physical separation will be followed (or has to be followed) by a number of separations on the psychological/emotional plane, before we can reach self-actualization. The loss of the sense of security offered by the protected life in the womb can be replaced only by a very **secure attachment** to a mother who is always there for her child. Although the consistent care provided by a loving mother is absolutely essential for the development of a basic feeling of **trust**, it can nonetheless never be perfect. Some feelings of **mistrust** and a basic fear of abandonment cannot be avoided. However, with a reasonably good mother-infant relationship we can attain the first and most basic virtue of all, the **virtue of hope**. In thalassemia the mother-child bond may be disrupted due to the diagnosis of the illness. How the mother and significant others will deal with the shock of the news is of great importance. The support of the caring physician and/or of specialized personnel is of utmost importance during this phase.

By the 6th month infants start to develop the ability for **self-object differentiation**. So, at least cognitively, the infant can begin to develop the idea of a separate existence from the surrounding world. However, whether this cognitive skill will be translated into an emotional reality will depend to a large extent on how the mother deals with separation and whether she is able to handle the loss of a dependent and dependable object. An ability, which is, related to mother's process of individuation and her capability to find a meaning in life other than her child. According to Freud (1973, 1978) our ego starts to develop in this first **oral** stage alongside our ability to differentiate self from

object. How well it will develop and whether it will be able to deal with the pressures and the demands of our instincts on the one hand and the social demands on the other, depends once more on the relationship that is established with mother. The pattern of relating and the faults of this initial relationship will be re-enacted later on in our choice of relationships.

The first emotional separation is attempted during the second year of life, the period known as the “terrible two’s”, when the toddler takes the first steps in life. This greater physical **autonomy** is coupled with the greater cognitive autonomy offered by the use of symbols and the development of language (**representational thinking**). The young child is able not only to move around on her/his own, but also to communicate her/his needs verbally. It slowly acquires a greater ability for self-control, both on the physical and the emotional plane. What happens in the relationship with the parents is of great importance. Will the child develop the **virtue of will**? Will it be able to learn how to stand on its own two feet physically as well as emotionally, or will it be led to feeling **shame and doubt** and I would add **fear**? Fear is a major obstacle in our development. Fearful and shy children become adults who are unable to take risks and grow. Although a certain degree of fear is useful and realistic most of our fears take unrealistic proportions and stop us from our struggle to attain higher and higher goals. Overprotection and authoritarianism are equally devastating both for the development of autonomy and for the creation of overwhelming feelings of fear in the two-year-old. Such negative outcome of this early stage thwarts the development of our ability to become independent and

responsible adults. The presence of a chronic illness often intensifies overprotectiveness. However, we must be aware that too many restrictions and the instillation of too much fear will be detrimental for the development of a competent and self-reliant adult.

Excessive moral demands, too much criticism, and generally a very demanding upbringing can curtail the **virtue of purpose** and block our ability to act and achieve goals that we set. In addition, the way the **Oedipus conflict** is resolved will play a crucial role in the development of both our sexual identity as well as our ability to form satisfying sexual relationships in later life. The development of a very strict **superego** can block our effort to fulfill our potential. A strict and unrealistic *conscience* is a hindrance since it moves us away from what is meant for us and towards what is desirable and approved by others. It makes us feel guilty when we do things that we like and desire, instead of what we have been taught we should do. Such a conscience is not a positive influence on our struggle to become the best that we can be since what we can do best is what we desire and is meant for us. Similarly, an extremely unrealistic *ego ideal* can be the cause of great pain and frustration for what we cannot be, which anyway may not be in the givens of our existence. [The ability to accept who we are, with our strengths and our weaknesses, is absolutely essential in order for the healing process to take place and is hindered by any unrealistic demands and expectations that have been incorporated into our self-image from very early on.](#) So, what we see is that either excessive or too little demands can be a cause of a poor self-image and low self-esteem.

In the next stage of our development, **sexuality** becomes **latent** and we become absorbed in our effort to learn social skills, to become competent academically and socially. The **virtue of skill** gives us a first good basis for building our self-esteem. We feel competent and productive. Feelings of mastery and self-control are absolutely essential not only for a positive evaluation of our self and our strengths, but also for our ability to cope with crisis and handle our fears and insecurities. The first powerful relationship outside the family is created with what Sullivan (1953) calls “the chum”, our buddy, our best friend, usually of the same sex. Learning how to relate and form intimate relationships is a skill essential for life. [Living without loving leads to a bear existence](#). Our ability to trust is essential once more. Can we trust? Are we too scared of failure and rejection? Do we believe in our value? Do we think of ourselves as lovable? Crucial questions which will have to be addressed as we enter into adolescence and we start to form our own identity. How well prepared we are in order to face this crisis is of paramount importance. The presence of an illness can be a serious hindrance to self-acceptance due to feelings of inferiority.

Adolescence is a transition and thus a complex stage. A number of physical developments signal the end of childhood and the re-emergence of sexuality (**genital** stage). However the adolescent is not yet an adult and does not know how to handle all of the changes that take place in her/his body and mind. Cognitive changes lead to the development of hypothetical and **abstract thinking**. Questions around the meaning of life and one’s own role in it are prominent. The adolescent is starting to form an **identity** as a unique being and

has to face up to the task of claiming responsibility for her/his life. Can s/he face up to this difficult task? Does s/he feel the strength to stand up for herself/himself? We, as adults often shy away from responsibilities and prefer to claim that others are responsible for what happens in our life. How then, can we expect a teenager not to be overwhelmed by the difficulty of this endeavor? How much respect, acceptance and support have we given to the teenager all along? How competent and skillful does s/he feel? How much does s/he have a sense of **belongingness** and acceptance by peers, which is essential for self-esteem and the process of breaking away from the family? Is the family there to provide the support and guidance that is necessary? Can the family let go of the adolescent and allow for individuation? Will s/he develop the **virtue of fidelity** and be ready to form commitments so necessary for success in early adulthood?

The teenager needs us to be there. To care and to give for what is necessary, while respecting the desire to experiment by doing things on her/his own. Compliance to treatment becomes a lot more difficult. How the family has handled the issue of responsibility from early on will have a great impact in this stage. Is the adolescent willing and capable to take over the responsibility for her/his treatment? Is s/he slowly capable to take over the responsibility for her/his whole life?

As we enter adult life our ability to commit ourselves gains primary importance. Commitment in love and work is essential for success in either aspect of our life. Forming **intimate** relationships and establishing a family of our own is related to life satisfaction, as long as this is not done as another duty or as

a means of proving that we are “normal” and we can do what others do. How serious we are with our choices and the responsibility they imply relates to our level of consciousness and self-awareness. Are we just driven by life and by expectations or are we in command of our life? Our ability to be in command of our life’s journey depends on the development of many skills. [The development of the virtue of love and of self-esteem are necessary for believing that we are worthy and that we deserve to be treated well.](#)

[First and foremost we have to learn how to treat our own self well. How much we care for our well being is essential in our struggle to become the best that we can be.](#) Self-care and self-love must not be confused with narcissism, self-centeredness and egoism, but must be conceived as the basic dictate of “love thy neighbor like thy self”. This positive attitude towards our self and towards others is the only remedy for alienation and **isolation**. Our positive outlook on life, our self and other people can improve both our intrapsychic and our interpersonal isolation. The awareness of our existential isolation, as discussed by Yalom in his book “Existential Psychotherapy”(1980), although incurable, can help us increase our awareness of the responsibility we carry for our life and for the course it is going to take. No one else can live our life for us and no one else will die in our place. So what we do with our life is purely a personal matter. As Sartre said “we are equally responsible for the things we do and for the things we decide not to do”.

The realization of the responsibility we have for our life and our choices is important for both love and work commitments. It is often the case that

our choices are veiled by what others (primarily our parents) desire and by what we believe will bring acceptance and recognition. Marriage that is motivated by reasons of prestige, or the pressure of social and familial demands, can have detrimental effect for the life both of the couple and the children they may decide to bring into this life. Similarly work commitments which are motivated by reasons other than our feelings of love for what we do can lead to dissatisfaction and unhappiness. A large amount of our time and energy is devoted to work. And if the latter is not satisfying in a deeper and more personal level, it very often leaves us with a feeling of emptiness. It is this existential void that Victor Frankl describes so well in his book "Man's Search for Meaning"(1984). **Finding meaning** is an essential part of our struggle in life. This quest for meaning is intimately related to the spiritual nature of human beings. As Nietzsche suggests, "the one who has a why can bear any how". But if we do not have a reason for which we find life worth living it can become unbearable. As I have mentioned in the conference in Nice, I believe that acceptance of our illness and reason for living are the two most important aspects for adjustment to treatment requirements.

For most people arrival at middle age is a fearful point because it brings unpleasant physical changes and an increasing awareness of the unavoidable death awaiting us. For thalasseemics arrival at middle age is a celebration and a fit since no one believed we would actually make it so far. Physical changes that are normal for our age are often attributed to thalassemia but we are generally much better prepared for feeling weak or dealing with an

increasingly frail health than most healthy individuals are. Equally we are well accustomed to the idea of death and to a large extent we usually realize that our physical, material existence is not the one that can provide for happiness or eternity. Both happiness and eternity are much desired, by at least most human beings, but neither can be brought about by a larger bank account or by more material possessions.

Existential theorists believe that “although the physicality of death destroys us the idea of death can save us”. [Our awareness of the ultimate and unavoidable end can help us live in an authentic way and thus aid in the attainment of our ultimate goal --becoming the best that we can be.](#) Death awareness is usually heightened in middle age. However, chronic and life threatening illnesses, accidents and other serious life threats can help us increase our awareness of the end which most often results in the realization of the value of life. Such realization leads to dramatic life changes, to an appreciation of the here and now and of what one has rather than what one lacks

Whether we will develop a feeling of **generativity** instead of a feeling of **stagnation** depends on how well we feel with our self. It is now that our struggle to be true to our self will bear its fruits. We can feel joyful and satisfied; we can **care and give**. In addition our desire for knowledge, beauty and order, as defined by Maslow (1970) in his hierarchy of needs, can move us to a higher way of functioning. Our quest for understanding the meaning of our life and the cultivation of our higher aesthetic needs lead us to a higher form of morality, what Kohlberg (1969) defined as the **universal ethical orientation**. Thus, we develop

beyond what is personal to a more universal outlook. We can let go of our ego and our selfishness and understand that we are part of a greater whole.

Equipped with all the skills and virtues that we acquire throughout the journey of our development, we can truly be **wise** and make up for the lost physical vigor and beauty. [External beauty and strength can be replaced by internal.](#) Thus, we can reach a stage of self-fulfillment and satisfaction that are necessary for the feelings of **integrity** that Erikson suggests. Personally I believe that there is nothing more tragic than dying unhappy and unfulfilled. There is nothing more painful than the realization that one has not lived her/his life well. That if s/he was to live again s/he would make different choices and lead life differently. The older we get the more difficult and more painful it is to realize that we have taken a wrong path and the more strength it requires in order to decide to change it. [So the sooner we begin our journey of self-awareness the better off we are.](#)

For most people it usually takes something tragic to happen before they realize the value and impermanence of life. As I have mentioned in the past I believe that thalasseemics are privileged in this respect. We have the added advantage of realizing the importance of life at an early age. We do not take health for granted. We can be grateful for our painless days. We can give priority to what is truly important. We can have the wisdom to appreciate every moment and live life as fully as possible. Of course oftentimes we fall into the trap of believing that what it means to live life fully is to smoke, drink and party until morning. However, I believe that as we move beyond our adolescent rebellion,

which often takes a while, we reach a more mature stage than other adults of our age do.

Acceptance is one of the most important ingredients of successful adjustment not only to the illness but also to life per se. To the extent we can accept the conditions that life presents us with we can succeed in making the best that we can of our life. Existential theorists believe that humans are not free of conditions but they are free to choose their stance, their attitude, towards them. So although we have not chosen to be born with thalassemia what we will end up doing with our life is utterly our own choice. No doubt, as I have already presented, the influences we have received as children are great. It often feels as if they are part of our skin, our genetic make up. However, during adolescence and especially during early adulthood we can become increasingly aware of how our thinking, feeling and behaving has been influenced by significant others and alter it. It is in our own will power to make changes, to grow and mature. To become happier and wiser as we grow older, rather than bitter and dissatisfied. It is in the power of each individual to die fulfilled and content with what s/he has achieved in this short span between birth and death that we call life.

References

- Erikson, E. (1963). **Childhood and Society**. New York: Norton and Company.
- Erikson, E. (1980). **Identity and the Life Cycle**. New York: Norton and Company.

- Frankl, V. (1984). **Man's Search for Meaning**. New York: Touchstone.
- Freud, S. (1973). **An Outline of Psychoanalysis**. London: The Hogarth.
- Freud, S. (1976). **Introductory Lectures on Psychoanalysis**. London: Pelican Books.
- Kohlberg, L. (1969). Stage and Sequence: The Cognitive-Developmental Approach to Socialization. In Goslin, D.A. (ed.) **Handbook of Socialization Theory and Research**. Chicago: Rand McNally.
- May, R. and Yalom, I. (1995). Existential Psychotherapy. In Corsini, R. and Wedding, D. (Eds.) **Current Psychotherapies**. Illinois: Peacock, Inc.
- Maslow, A. (1970). **Motivation and Personality**. New York: Harper and Row.
- Sullivan, H. S. (1953). **The Interpersonal Theory of Psychiatry**. New York: Norton and Company.
- Vaillant, G. (1977). **Adaptation to Life**. Boston: Little Brown and Company.
- Yalom, I. (1980). **Existential Psychotherapy**. New York: Basic Books.