

Interrelationship of Microsocial Conditions and Peculiarities of Development with Specific Character of Psychic Infantilism of Patients with Neurotic Disorders

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Abstract: The problem of premorbid peculiarities of personality and their influence on degree of psychic adaptation remains one of the most actual problem for medical psychology. One of the predisposing factors of neurotic disorders are infantile traits of personality and infantilism as psychopathologic syndrome. Insufficient level of psychological maturity of personality may have negative influence on the prognosis and course of neurotic disorders. In the capacity of causes of juvenilism the following disorders are considered: constitutional-genetic predisposition, slight cerebral affection, somatic (serious somatic diseases in childhood, frequent hospitalization, operative interventions) and psychosocial factors, the latter of which are less examined. The aim of this research is a study of correlation of microsocial conditions and psychophysiological peculiarities of development with specific character of juvenilism of the patients with neurotic disorders. Clinical-Psychopathological Method has been used as a main technique of studying of clinical peculiarities of psychic infantilism. The following characteristics of psychic infantilism have been studied: dependence, suggestibility, credulity, egocentrism, susceptibility to pathologic fantasy generation, prognostic competence, maximalism, impatience, fear of rejection, emotional instability, rigidity. The study deals with the specific character of the structure of juvenilism of patients with neurotic disorders (adaptation disorders, anxiety-phobic disorder and dissociation disorder). Correlations of characteristics of juvenilism by neurotic disorders with microsocial conditions and peculiarities of patients' developments have been presented. The results of investigation are: there are significant differences between microsocial data and peculiarities of the development in different groups of patients, the similar correlations between characteristics of juvenilism and microsocial data of the development in different groups of patients with anxiety-phobic and dissociative disorders have been revealed. The materials of the study may be useful for psychologists and psychotherapist by providing psychotherapy of the patients with neurotic disorders.

Key words: Psychic infantilism juvenilism, neurotic disorders, microsocial conditions, pattern of education, premorbid

INTRODUCTION

For the first time, the notion of psychic infantilism was introduced by E. Lacer. The term of "juvenilism" towards the children with hypogenesis was introduced at the beginning of the 20th century by German psychiatrist G. Anton (Tiganov, 1996).

As the analysis of medical and psychological literature has shown modern treatment of the notion of juvenilism has almost no differences (Tiganov, 1998; Reber, 2000). Psychic infantilism of adults is considered as retention in psyche and behavior the peculiarities inherent in childhood.

Prevalence of psychic infantilism, according to the psychic epidemiologic evidence of childhood, consists in 1.6%, one can encounter 10% of teenagers with not full degree of intensity (Peter, 2004). The data of prevalence of psychic infantilism in more later life is absent.

The majority of classifications of psychic infantilism has been developed for infancy and adolescence (Gurieva, 1981; Lebedinskaia, 1980; Sukhareva, 1959). The problem of juvenilism of adult population has somewhat revealed in the researches of Semke (2001) and Tsirkin (2004).

Lindberg (1953) was first to attempt to distinguish the traits that characterize infantile personality. Chakhkiyeva described in her work semiology of psychic infantilism in terms of psychopathies. Seryogina, studying the peculiarities of psychic infantilism of the unemployed youth, suggested structure-dynamic pattern of infantilism, including psychological, social components (lack of initiative in decisions and actions, dependence of personality on the others, chaotic behaviour, the position of dependant, hedonism, unformed coping behavior) and physical component.

Mendelevich (2001, 2002) has proposed the conception of dependent personality. The main feature of

the dependent personality is psychic infantilism, manifestations of which along with dependence are suggestibility, emotional instability, fear of rejection, prognostic competence, credulity, rigidity, egocentrism, maximalism, impatience, susceptibility.

In the capacity of juvenilism one considers: constitutional-genetic predisposition; slight cerebral affection of infectious, toxic, traumatic nature, psychogenic factors (one's family upbringing) and frequent or long hospitalizations (Lebedinsky, 1985).

As the analysis of the literature has shown, the problem of juvenilism has been studied as basis in terms of different psychopathies in terms of schizophrenia (procedural infantilization) and psychic developmental retardation, as the risk factor of early use of alcohol and psychoactive substances (Gurieva, 1981; Mendelevich, 2001, 2002).

In a number of researches, juvenilism is considered as the basis for formation of complex neurotic reactions and neurotic development (Semke, 2006). Some of the works are dedicated to the study of individual psychological phenomena of the patients with neurotic disorders (Nichiporenko, 2006; Frolova, 2014).

Thus as the analysis of the literature has shown, there is no clear boundaries between the notions of juvenilism and infantilism, the clinical-psychological content of infantile traits has not been revealed yet. The problem of correlation of microsocial conditions and peculiarities of the development with specific character of psychic infantilism of the patients with neurotic disorders has become actual and requires new research approaches.

MATERIALS AND METHODS

The aim of this research is to study interrelations of microsocial conditions and peculiarities of the development with specific character of psychic infantilism of the patients with neurotic disorders.

At the first stage of the research, it has been revealed and corroborated for certain the specific character of psychic infantilism of the patients with adaptation disorders, anxiety-phobic and dissociation disorders. Total 72 subjects under consideration have been examined: 27 patients with anxiety-phobic disorders; 28 with adaptation disorders; 17 with dissociation (conversion) disorders. It has not been included: the patients with organic pathology of the brain, endocrinic and somatic deceases that attend similar psychopathologic symptomatology. The age of the examined patients is from 20-45. Methodological basis of

the research is the conception of dependant personality, the basis of which is the notion of psychic infantilism (Mendelevich, 2001, 2002). Clinic-psychopathological method has been used as basic one for studying clinic peculiarities of juvenilism. In terms of clinic-psychopathological approach the revealed phenomena and symptoms of juvenilism have been described and ranged on intensity (weak, average and strong). In case of revealing all or majority of phenomena indications (>4 from 5) its intensity has been estimated as strong, in case of 3 as average and by revealing <2 as weak. The obligatory factor for adding the phenomenon to the manifested one is the absence of its relation with situations. The phenomenon of dependency has been diagnosed on the basis of presence of:

- Signs of inability to make decisions without concurrence of the people around
- Inability to resist group pressure (absence of autonomy)
- Conformity and majority opinion orientation
- Disinclination to make even reasonable demands on the people who an individual depends on
- Small decision-making abilities without intensified advice and reassurance from outsider

The phenomenon of suggestibility if revealed, has been diagnosed on the following signs:

- Lightness of assimilation by an individual of overt motives, intentions, desires, attitudes, estimates, behavioral forms and styles to him
- Hypersusceptibility to psychic effect from outsiders without critical trying to find the sense of the reality and desires for resisting this effect
- Desire for developing gained in the process of communication ideas and thoughts from other people
- An individual's belief in that the ideas and thoughts are the products of his own thoughts and analytical inferences
- Inclination to "psychic infectivity", imitative behavior

The phenomenon of credulity has been registered in the diagnosis of the following traits:

- Naivety
- Simple-heartedness
- Sensual immediacy
- Lack of information in human relationship
- Openness to communication

The phenomenon of egocentrism has been estimated on the basis of the presence of:

- Fixation of attention to one's own interests, feelings
- Hedonistic orientation of activity
- Superiority feeling over the people around, selectness
- Publicity behaviour
- Failing to take into account the interests of the people around

The phenomenon of mythomania has been diagnosed if revealed:

- Yearning for vivid impressions
- Life in imaginary situations
- High level of search activity
- Pseudologia
- Lightness in communication

The phenomenon of prognostic incompetence has been estimated on the basis of:

- Diminished ability to anticipate life situations
- Desire for focusing (considering) on "only correct" decision
- Frequent susceptibility to offence, inclination to be disappointed in people
- Lowered ability to anticipate one's own reactions to important situations
- Frequent finding oneself in "unexpected situations"

The phenomenon of maximalism has been estimated on the basis of the following signs as:

- Unreasonable demands on the people around
- Uncompromising stand
- Categoricalness in judgement
- Inclination to show alternative sentiments toward one and the same person
- Lowered ability to have subtle emotional experience

The phenomenon of impatience has been characterized:

- Absence of self-control
- Inability to expect
- Focus on immediate achievement of the planned
- Fussiness
- Lowered ability to focus on one and the same

The phenomenon of fear to be rejected has been estimated on the basis of:

- Yearning for being with important people
- Poor tolerance of "separation"
- Yearning for "feeling as one who belongs here" like at home
- Fear for being rejected
- Readiness to do the most undesired actions in response of isolation threat

The phenomenon of emotional instability has been diagnosed on the basis of such signs as:

- Heightened susceptibility
- Vulnerability
- Heightened emotionality
- A kaleidoscopic change of feelings influenced by external conditions
- Low tolerance to frustration

The phenomenon of rigidity has been registered if there are:

- Inflexibility in communication
- Straightforwardness
- Inclination to follow rituals, patterns
- Stability of expectations concerning the behaviour of the people around
- Sluggishness in making decisions

At the second stage, there have been revealed interrelations between microsocial conditions and peculiarities of the development and specific character of psychic infantilism. In the capacity of microsocial conditions, we have studied: family composition (two-parent family/broken family), number of children in family, relationship of parents, professional and educational level of parents, family upbringing, parents' temperament. When studying psychophysiological peculiarities of patients' development somatic conditions in childhood were taken into account: frequent acute respiratory infections, somatic diseases, required to be hospitalized, emotional and behavioral responses at preschool age, junior school age and juvenile age, psychic traumas (parental divorce, the loss of the close relatives, rejection by peers, lack of friends).

Statistic comparison of the results has been conducted on the basis of the criterion of Student's test, Pearson's calculation of the linear correlation.

The specific character of the structure of psychic infantilism of the patients with neurotic disorders:

The specific character of the structure of psychic infantilism of the patients with fear-phobic disorders has been distinguished in emotional instability, dependence, credulity, impatience, suggestibility, inclination to mythomania, prognostic incompetence to a lesser extent. The specific character of psychic infantilism with adaptation disorders has been characterized by dependence, fear to be rejected, suggestibility, credulity, emotional instability and rigidity. The structure of psychic infantilism with dissociative (conversion) disorders has been represented by impatience, egocentrism, suggestibility, inclination to mythomania, rigidity, maximalism, dependence. The comparative characteristic of the revealed structures of juvenilism in certain nosological groups is in Table 1.

Interrelation of microsocioal conditions and peculiarities of psychic development with characteristics of psychic infantilism:

In Table 2, there are microsocioal conditions and peculiarities of psychophysiological development that have certain distinctions.

Correlation analysis of characteristics of psychic infantilism and data of microsocioal conditions and peculiarities of development in the group within anxious-phobic disorders has revealed the following important relations:

- “Emotional instability” had positive correlation, relation with negative emotional treatment of the father in childhood ($r = 0.54$; $p < 0.01$)
- “Dependence”, “credulity” and “suggestibility” had correlation with dependent, weak character of the father ($r = 0.42$; $p < 0.05$), ($r = 0.49$, $p < 0.01$) and ($r = 0.62$; $p < 0.001$)
- “Impatience” had correlation with hyperprotection behaviour of the mother ($r = 0.42$; $p < 0.05$)
- “Inclination to mythomania” correlated with higher professional status of the mother ($r = 0.48$; $p < 0.01$) and the father ($r = 0.56$; $p < 0.01$)
- “Prognostic incompetence” was interrelated with lack of friends in school years ($r = 0.67$; $p < 0.001$), being rejected by the peers ($r = 0.46$; $p < 0.05$) and mockeries of the peers ($r = 0.40$; $p < 0.05$)
- “Fear to be rejected” correlated with close relatives’ death in childhood ($r = 0.43$; $p < 0.05$), with frequent fears at pre-school age ($r = 0.40$; $p < 0.05$), with upbringing in broken family ($r = 0.40$; $p < 0.05$)

In the group of patients with adaptation disorders there were revealed important interrelations:

Table 1: Characteristics of psychic infantilism of the patients with neurotic disorders

Characteristics of psychic infantilism	Student’s t-criterion ($p < 0.05^*$, $p < 0.01^{**}$, $p < 0.001^{***}$)
Egocentrism	t (t-i) = -6.25*** t (d-i) = -4.90*** t (d-i) = -2.76**
Inclination to mythomania Maximalism	t (t-i) = -5.36*** t (d-i) = -5.52***
Impatience	t (t-d) = 2.47* t (t-i) = -3.68*** t (d-i) = -5.64***
Fear to be rejected	t (t-d) = -3.38** t (t-i) = -2.16*
Emotional instability	t (t-d) = 4.72*** t (t-i) = 6.81*** t (d-i) = 2.26*
Rigidity	t (t-i) = -2.3**

t: the group of patients with anxious-phobic disorders; d: the group of patients with adaptation disorders; i: The group of patients with dissociative (conversion) disorders

Table 2: Microsocioal conditions and peculiarities of psychophysiological development

Indicators	t ($p < 0.05^*$, $p < 0.01^{**}$, $p < 0.001^{***}$)
Two-parent family	t(t-d) = 2.2* t(t-i) = 2.42*
Single child in a family	t (d-i) = -3.34**, t(t-i) = -2.41*
Professional level of a mother Educational level of a mother	t (d-i) = -2.1* t (d-i) = -2.2*
Professional level of a father Educational level of a father	t (t-d) = 2.4* t (t-d) = 2.1*
Hyperprotection (family upbringing)	t (t-d) = 3.3** t (d-i) = -3.94***
Treatment of a mother (hyper anxiety, attention) Nervous temperament of a mother	t (d-i) = -2.16* t(t-i) = -2.42* t (d-i) = -2.1*
Frequent ARD (acute respiratory disease) in childhood	t (d-i) = -2.95**
Emotional reactions in schooldays	t (t-d) = 2.4*
Syndrome of vasoneurosis at teenager age	t (t-d) = 3.10**
Lack of friends	t (t-i) = 2.93** t (d-i) = 2.11*

*, **, ***, $p < 0.05$, 0.01 , 0.001

- “Dependence” was interrelated with emotional rejection of the parents ($r = 0.50$; $p < 0.01$)
- “Fear to be rejected” correlated with rejection of the peers ($r = 0.42$; $p < 0.05$)
- “Suggestibility” had correlation with mockeries of the peers ($r = 0.48$; $p < 0.01$)
- “Rigidity” and “impatience” correlated with domineering character of the mother ($r = 0.40$; $p < 0.05$), ($r = 0.43$; $p < 0.05$); negative or formal treatment of the mother ($r = 0.38$; $p < 0.05$), ($r = 0.49$; $p < 0.01$)

In the group of patients with dissociative disorders the following important interrelations were revealed:

- “Impatience”, “egocentrism”, “rigidity” and “maximalism” were correlated with hyperprotection of the mother ($r = 0.48$; $p < 0.05$) ($r = 0.51$; $p < 0.05$), ($r = 0.62$; $p < 0.01$), ($r = 0.48$; $p < 0.05$)

- “Inclination to mythomania” correlated with higher status of the mother ($r = 0.53$; $p < 0.05$)
- “Dependence” correlated with dependent, weak character of the father ($r = 0.47$; $p < 0.05$)

RESULTS AND DISCUSSION

As the comparative analysis of microsocial and psychophysiological data of the development has shown, the patients with dissociative disorders are in more cases the only children in the family, their mothers have rather high educational level and social status. The family upbringing was hyperprotection. Their mothers have nervous temperament. The patients in their childhood were often ill with acute respiratory diseases.

The patients from the group of anxious-phobic disorders were often upbrought in two parents family, their family upbringing was “hyperprotection”, at teenager age there were more often emotional reactions, in school days there was lack of friends. In past history, there was the syndrome of vasoneurosis.

In the group of the patients with adaptation disorders, there has been failure in revealing prevailing family upbringing. There was rare “hyperprotection” in family upbringing. In school days there was lack of friends.

The correlation analysis has revealed similar interrelations between the characteristics of psychic infantilism and microsocial data of the development in the groups of patients with anxious-phobic and dissociative disorders: the patients, whose fathers have dependent, weak character have dependence. We may suppose that the patients have got the same behavioral style of the parent. Impatience in both groups is interrelated with hyper protective behaviour of the mother, “inclination to mythomania” has correlations with higher status of the parents.

In the group of the patients under subject with adaptation disorder the character of interrelations between characteristics of psychic infantilism and microsocial data of the development differs from the previous groups: dependence, fear to be projected, impatience have been conditioned by insufficient emotional relations of both parents and peers.

CONCLUSION

Thus as a result of research major number of interrelations, characteristics of psychic infantilism with reference to psychosocial conditions of the development as parents’ traits, family upbringing, emotional character of relationship of children and their parents, relations with peers, presence of psychic traumas have been revealed.

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