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ABSTRACT

The Freudian view of psychopathology suggests that the individual is motivated to distort reality. In contrast, social-cognitive theory views the individual as a naive social scientist, who observes his behavior, others' behavior, and the social context. Out of these observations come meaning structures which organize, guide, and structure behavior in a particular domain. Reality is never viewed directly, but as a construction of the observer. Distortions in social judgment are honest attempts at understanding, rather than the result of deliberate manipulation to protect the individual from self-knowledge. Cognitive errors result from neglecting co-variation and accurate sampling, and through transference. Although these errors may be characteristic of psychopathology, the form of many aspects of psychopathology may be quite general and may not serve motivational purposes. Developmentally, the social-cognitive view implies that adult distortion in judgment occurs as the result of sampling biases that lead to distorted ways of viewing social reality. Sampling errors may begin in childhood; children tend to base generalizations on irrelevant characteristics of exemplars and imagistic forms. Given that the vividness of information unduly influences social cognition, adolescence may be a crucial period for the development of pathology. The constructed world view of the child oftentimes is carried into adulthood, resistant to modification. (BL)

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A SOCIAL-COGNITIVE PERSPECTIVE ON EARLY CHILDHOOD  
INFLUENCES IN PSYCHOPATHOLOGY

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A Social-Cognitive Perspective on Early  
Childhood Influences In Psychopathology

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Recent developments in social cognition (Flavell & Ross, 1981; Nisbett & Ross, 1980) have provided a basis for an alternative view of how early childhood experience may impact on the development of psychopathology. Though this is an alternative perspective to that of Freud, it is not meant to be exclusive of Freud. The social-cognitive mechanisms discussed could be complementary to a Freudian view.

Nevertheless, the social-cognitive and Freudian views are differing perspectives, and I will proceed by contrasting them. Basically the Freudian view of psychopathology ultimately rests on the idea that there are distortions of reality involved in psychopathology. The defense mechanisms and transference both involve distortions of reality. In some sense various kinds of personality structures also lead to distortions in reality. For instance obsessive-compulsives may be excessively concerned with cleanliness, and passive-dependent personalities "construct" reality so that they are always seen as helpless and others are "seen" as strong. Both the social-cognitive and the Freudian views see the individual as constructing a reality. However, for Freud this occurs because the individual's personal reality is shaped and distorted in various ways in order to protect the individual from knowledge of specific unconscious wishes and fantasies. In addition the personal reality is structured in a way designed to allow partial disguised expression of these wishes and fantasies. In other words, the individual's construction of reality serves some motivational purpose.

In contrast, the social-cognitive view is of the person as a naive social scientist. The individual is motivated to make sense out of his/her world. In order to do so he/she must observe his/her own behavior, others' behavior, and the social context. From this an attempt is made to form an orderly and coherent view of social reality. This will include first of all, "characterizing the datum, or identifying and encoding specific events. Events, relationships, and individuals will be categorized, social scripts and schemas will be de-

veloped to guide behavior and interpretation of social situations, and finally more general "knowledge structures" will be constructed. These knowledge structures, or "theories of the world" (Palermo, 1983), "structures of meaning," (Marris, 1974), or "meaning structures" (Mahoney, 1980; Meichenbaum, et. al., 1981), are organized models of reality, or parts of reality, through which the individual interacts with the world. In some sense they can be thought of as functioning like scientific "paradigms" (Kuhn, 1962) in that they organize, guide, and structure behavior in a particular domain.

The social-cognitive perspective seems to imply that an individual never views "reality" directly, or without interpretation. Reality is a construction. From this perspective the concept of a distortion of reality in an absolute sense is probably meaningless, because there is no way to know what "objective" reality is independent of the constructive activities of the observer. However, as Goodman (1978) has pointed out, there are ways of deciding that some constructions are better than others. In this sense we can judge some to be "distorted." However, the social-cognitive perspective also seems to imply that distortions in social judgement are based on honest attempts at understanding, rather than being the result of deliberate (though unconscious) manipulations designed to protect the individual from painful self-knowledge. In fact, the recent debate over "egocentric biases" in attribution deals precisely with this difference (see Nisbett & Ross, 1980, chapter 10) between the social-cognitive and psychodynamic perspectives.

Nisbett & Ross (1980) explore a number of cognitive errors made by the average person. The most pervasive error is a tendency for humans to over-rely on their theories in making judgements about social data. For instance, in "characterizing the datum," individuals are highly theory-driven in how they categorize and interpret individuals and social actions. Nisbett & Ross point out that the danger is that people seem to be unaware that they are using theories to interpret events. We also let our theories blind us to accurate assessment of co-variation. In order to establish accurate cause-effect relationships we must be able to correctly assess whether or not event A co-varies with event B. Nisbett & Ross state that we frequently "see" co-variation where there is none if it fits our theories, and miss evidence of true co-variation if it does not fit our theories. Thus if we have the belief that certain kinds of people are "lazy," we will note instances where these people act lazy (in fact, we may even interpret them as acting lazy), and ignore

instances where they do not act lazy. Some of the most disturbing demonstrations of blindness to co-variation have been found in clinical psychologists interpreting projective test data (Chapman & Chapman, 1969). Finally, we tend to "see" cause-effect relationships where none exist because of our theories. The discussion of "lazy" people is also an example of this.

Thus there appears to be a general tendency for individuals to perceive social reality "through" their theories. This would not be so bad if, like good scientists, we held our theories tentatively and were open to evaluating them against data. However, instead, Nisbett & Ross point out that there is a good deal of evidence that our theories and beliefs are highly resistant to modification. This appears to be true even for scientists (Kuhn, 1962).

Nisbett & Ross also discuss another set of errors in social judgement. These all appear to revolve around our insensitivity to issues of sampling. In making judgements about ourselves, others, and social reality in general, we are involved in sampling information in the form of our everyday experiences, from the larger "pool" of social reality itself. Nisbett & Ross point out that people are generally not sensitive to issues such as whether their sample size is large enough for accurate generalization, or whether their sample is unrepresentative and biased or not. This is especially likely to occur when our sample of information is highly vivid. We appear to be unduly influenced by highly vivid information. For instance, we will be more likely to stop smoking if we have a relative die of lung cancer, than if we simply read about the relationship of smoking and lung cancer in the newspapers. Nisbett & Ross suggest that vivid experiences are highly influential because they possess emotional interest, and because they are "imagistic."

The important consequence of the discussion so far is that these kinds of errors are general. They are so pervasive that it would be hard to argue that they serve specific motivational purposes for specific individuals. Yet these errors are supposed to be characteristic of the "psychopathology" of various disturbed individuals. For instance, both paranoids and depressives could be said to be overly influenced in how they encode data and analyze co-variation by their "theories." Paranoids encode people's acts as being directed against them, and delusional beliefs often seem to involve errors in co-variation analysis. For instance, a paranoid client of mine concluded his friend was spying on him because his friend was waiting to meet him at the train station after a trip. In

effect, he noticed the one instance that fit his theory (i.e. "people are spying on me; therefore there should be someone at the station to watch me"), and ignored instances that didn't (i.e. his friend's presence co-varies with situations in which the "spying" hypothesis may not be plausible). This example also illustrates how the paranoid sees causal connections that fits his theories. Similarly, depressives "encode" events as meaning that they have failed, and in developing and maintaining their beliefs that they are incompetent or no good, only notice events of failure while ignoring success experiences.

Finally, as many clinicians have noted, it is not easy to argue paranoids and depressives out of their belief systems.

Transference can also be seen in terms of the cognitive "errors" discussed. In one sense, all social perception is "transference." We are always using a framework derived from past experience to characterize this experience. Even my denoting an individual as a man or as a woman is in some sense "transference." I am transferring onto that individual the category of "man" or "woman" because of similarities between the person and others who have fit that category in the past. Reacting to one's analyst as if he/she were a parent may simply mean that you are including the analyst in the same general category as parents. This category might be "authority figure," or perhaps "wise older figures who provide guidance on how to live one's life." In some sense it is quite reasonable to expect the analyst to act like one's father or mother, since initially at least there is a perceived general similarity because all may be seen as figures of greater knowledge and wisdom who provide guidance. In normal social interaction one initially perceives individuals through "transferences" from past experiences, but then gradually differentiates out this unique individual from others in the general category. Analysts, however, by trying to remain anonymous, force the client to stick with characterizations based on past experience. If these past experiences have been highly distorted (see below), then the client may indeed see the analyst as highly critical or all-perfect and all-powerful.

The general implication of this is that the form of many aspects of psychopathology may be quite general, and may not involve serving motivational purposes. Take resistance as an example. Nisbett & Ross's discussion appears to make resistance seem to be a quite general phenomenon. While paranoids and depressives "resist" changing their belief systems, so does everyone. It may not be the resistance that



is particularly pathological, as it is the content of the belief systems. In fact, what looks like resistance in the paranoid or the depressive may look like "the courage of one's convictions," or "sticking to one's guns" in someone whose beliefs we do not see as crazy.

Developmentally, the social-cognitive view would imply that adult distortions in judgement occur because of sampling biases that lead to the development of distorted ways of cognizing social reality. Once developed, these belief systems, like the belief systems of others, resist modification. If sampling biases are pervasive in adults, it seems reasonable they may be even more pervasive in children. Of particular import will be experiences in the nuclear family. Prototypes for people and social relations of a variety of kinds may be learned in the nuclear family. This would include the development of self schemas and self perceptions, and the development of scripts and action schemes for social interaction. To the extent that the family provides a nonrepresentative sample of experiences in these areas the child may grow up with distorted social schemes and meaning structures. In addition, this tendency may be exacerbated to the extent that children do not always know the relevant dimensions of experience to focus on. Kosslyn & Kagan (1981, p. 92) state: "...it would not be surprising if children were not very good at attending to only the relevant aspects of exemplars when computing a prototype...children (might) base generalizations on irrelevant characteristics of these exemplars more often than adults." Thus, for instance, a harsh, critical parent may severely punish any sign of the child's seeing the parent as harsh and critical instead of loving. In effect, the script being modeled may be "parents are to be seen as loving and caring." The child may "see" the parent as loving, then, even if the parent is "really" cruel, and this may simply be an error in "characterizing the datum," instead of representing an unconscious avoidance of repressed hostility, as Freudians might claim.

Kosslyn & Kagan also point out that "...young children are more likely to represent information solely in an imagistic form..." (p. 92). This may account as much as repression for an inability to verbalize various feelings, thoughts, and perceptions. In addition, it suggests that the error of being unduly influenced by vivid information may be even more pronounced in children. I suggest that highly vivid experiences play a major role in the child's constructing the "architecture of his/her experience" (Paulhe, 1984). As with Freudian theory, conflict-filled family interactions might be highly influential



in molding an individual's concept of social reality, because such interactions will be highly vivid. Thus a highly critical parent may lead a child to place an inordinate weight on "getting along," or "being nice," as an adult. Or it may lead the individual to be overly sensitive to cues from others that "sound like" criticisms. However, the current perspective suggests that not only negative experiences may be highly influential. Thus an individual may cling rather rigidly to a model of the family that was vividly experienced as highly positive, or a family tradition that was vivid and positive.

The vividness concept suggests that highly vivid experiences at any age may be unduly influential. An example of how a highly vivid experience may fundamentally alter an individual's perception of reality is that of some rape victims, who turn off completely to sex or to men afterwards. The vividness concept suggests that adolescence, with its host of new, vivid experiences, may be a crucial period for the development of pathology. Thus, one might have the example of the high school "star" whose life thereafter never quite "lives up."

While the above considerations provide an alternative way of viewing early childhood experiences in psychopathology, this alternative is not really incompatible with Freud. The mechanisms discussed could, for instance, be used to serve motivational purposes. In addition, this discussion is quite compatible with recent "cognitive" views of Freud (Schafer, 1978, for example). Schafer sees the child as constructing a world view which is then carried into adulthood. Though he does not put it that way, this world view is based on highly vivid experiences involving various bodily events. The world view is resistant to modification because it is held nonconsciously.

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