

The Role of Identifications in Women Psychopathology

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Abstract—Family identification has the potential to play a very decisive role in psychopathology. In this study we aimed to investigate the impact of family identifications on female psychopathology. A community sample of 101 women (mean age 20.81 years, SD = 0.91 ranged 20-25) participated to the present study. The girls completed a) the Symptom Check-List Revised (SCL-90) and b) questionnaire concerning socio-demographic information and questions for family identifications. The majority of women reported that they matched to the father in terms of identifications (47.1%). Age and birth order were not contributed on family identifications ($F(5) = 2.188$, $p = .062$ and $F(3) = 1.244$, $p = .299$ respectively). Multivariate analysis by using MANCOVA found statistical significant associations between family identifications and domains of psychopathology as provided by SCL-90 ($P < .05$). Our results highlight the role of identifications especially on father and female psychopathology as well as replicate the Freudian perception about the female Oedipus complex.

Keywords—Family Identification, Psychoanalysis, Psychopathology, Women.

I. INTRODUCTION

IN Freud's work, according to Laplanche & Pontalis, the concept of identification comes little by little to have the central importance which makes it, not simply one psychical mechanism among others, but the operation itself whereby the human subject is constituted. This evolution is correlated chiefly, in the first place, with the coming to the fore of the Oedipus complex viewed in the light of its structural consequences, and secondly, with the revision effected by the second theory of the psychical apparatus, according to which those agencies that become differentiated from the id are given their specific characters by the identifications of which they are the outcome [1]. The results of the study of Bojczyk et al. [2] showed many levels of identification—mothers identifying with their own mothers, their adult daughters, and with their younger adult selves. Also showed that daughters identify with their mothers—a notion found in psychoanalytic interpretations of narratives of mother–daughter relationships [3]. The developmental trajectories of each family member

influence the other [4] and the childhood affects adulthood primarily through the prism of adult reconstructions and integrations of the past [2]. The processes of identification in adults observed and interpreted more difficult than in children because intermingled within the dynamics of relationships and their components [5].

Family identification is defined as the congruence, or similarity, between an individual's self-concept and his or her concept of a specific other [6] across several domains, including emotional reactivity, personality, intellect, sociability, beliefs, and other characteristics and attitudes as well. As a result, family identification can lead the subjective emotional response of an individual and has the potential to play a very decisive role in psychopathology.

II. THEORETICAL BACKGROUND AND HYPOTHESIS DEVELOPMENT

The present study aims to contribute to knowledge in this topic by investigating the role of identification patterns on female psychopathology. It was hypothesized that women with face and nature identifications, character identifications as well as weakness identifications to a family member would strongly associated with increasing psychopathology. Furthermore we hypothesized that female who matched to their father would provide lower levels on psychopathology compared to female who matched to another family member.

III. METHOD

A cross sectional design was used to test the proposed hypotheses. The participants recruited from the Nursing Department, Higher Technological Educational Institution of Epirus and Nursing Department, Higher Technological Educational Institution of Thessaly in Greece. The participants were 1st, 2nd, 3rd or 4th-year students. All female students gave written informed consent for this study.

A. Participants

Overall, a student sample of 101 women participated to the present study. The average age of the participants was 20.81 years old, ranging from 20 to 25.

B. Procedure

Female then answered a questionnaire to measure their self-concept in terms identifications to a family member along with a valid instrument measured psychopathology. They completed the instruments in a place and time of their choice, and returned them by post in a week period.

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IV. Materials

The female participants completed two questionnaires for:

1. Family Identifications

All the participants who fulfilled the study's requirements and accepted to participate in it were informed about the procedure of the study. A self-report questionnaire, asking for certain socio-demographic information (e.g. gender, age, education, etc.), was enriched with a three open questions concerning the family identifications: According to your opinion a) which of the members of your family look like on the face and nature? b) which of the members of your family look like in character? and c) which of the members of your family have more weakness?

2. Psychopathology

Psychopathology was measured by using The Symptom Checklist-90-R [7]. The SCL-90-R was designed to assess a wide range of psychological factors and symptoms of psychopathology. It consists of 90 items that measure 9 primary symptom dimensions (that is: somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation and psychoticism). It is rated on a 5-point scale (0-4), indicating the frequency of experiencing the symptoms described at a specific point in time. The SCL-90 is constructed to provide an overview of a patient's symptoms and their intensity by providing three global indices [8]. It has been standardized for the Greek population and provided satisfactory psychometric properties [9].

IV. RESULTS

Table I shows the percentages of the sample responses in terms of family identifications. The half of female subjects reported that they matched to the father in terms of face-nature and character identifications (48% and 47.1% respectively).

TABLE I
FAMILY IDENTIFICATIONS OF THE SAMPLE

Variables	Face and Nature Identifications	Character Identifications	Most strongly weakness to a family member
Father	49 (48.0%)	48(47.1%)	27(26.5%)
Mother	40(39.2%)	27(26.5%)	26(25.5%)
Both parents	10(9.8%)	20(19.6%)	12(11.8%)
Paternal Grandmother	3(2.9%)	0(0.0%)	8(7.8%)
Brother	0(0.0%)	0(0.0%)	23(22.5%)

Age and birth order were not contributed on family identifications ($F(5) = 2.188$, $p = .062$ and $F(3) = 1.244$, $p = .299$ respectively). Multivariate analysis by using MANCOVA found statistical significant associations between family identifications and domains of psychopathology as provided by SCL-90. The results are summarized in Table II. Furthermore in order to clarify the potential differences in psychopathology we performed multivariate contrasts by group of identifications.

TABLE II
IMPACT OF FAMILY IDENTIFICATIONS ON FEMALE PSYCHOPATHOLOGY

Variables	Face and Nature identifications	Character identifications	Most strongly weakness to a family member
Somatization	.004**	.045*	.010**
Obsessive-compulsive	.079 ^{MS}	.088	.234
Interpersonal sensitivity	.363	.234	.000***
Depression	.235	.050*	.014**
Anxiety	.157	.425	.030**
Hostility	.063 ^{MS}	.113	.000**
Phobic anxiety	.006**	.007**	.044*
Paranoid ideation	.925	.339	.005**
Psychoticism	.634	.347	.000***

Table III presents the results of analysis of comparisons by group on all domain of psychopathology as measured by SCL-90. We did not found statistical significant differences in the girls that reported mother identifications vs. father identifications ($p > .05$) on all primary symptoms of psychopathology in terms of face and nature identifications and in terms of character identifications as well. Furthermore statistical significant differences were found in terms of somatization ($p < .001$), obsessive-compulsive ($p < .05$), anxiety ($p < .05$), hostility ($p < .005$) and phobic anxiety ($p < .05$) when we compared both parents identifications vs. mother identifications vs. father identifications regarding face and nature domain. Statistical significant differences ($p < .05$) were observed also for the same domain of identifications when compared paternal grandmother vs. Previous Levels of identifications on somatization, obsessive-compulsive, anxiety and hostility.

Regarding character identifications girls did not provide any significant difference ($p > .05$) on psychopathology in all comparisons that we performed.

In the last level we performed all comparisons among girl's identifications regarding weakness to a family member. The results of our analysis showed that statistical significant differences ($p < .05$) were found on major symptoms of psychopathology such as somatization ($p < .05$), interpersonal sensitivity ($p < .05$), depression ($p < .05$) and psychoticism ($p < .05$) when we compared mother vs. father identifications. When we compared both parents vs. mother vs. father identifications we found statistical significant differences on somatization ($p < .05$), interpersonal sensitivity ($p < .05$), depression ($p < .05$), anxiety ($p < .05$), hostility ($p < .05$), phobic anxiety ($p < .05$), paranoid ideation ($p < .05$) and psychoticism ($p < .05$). Comparisons among paternal grandmother vs. any previous levels found statistical significant differences ($p < .05$) on major psychopathology symptoms as shown in Table III.

V. CONCLUSION

In this study we aimed to investigate the impact of family identifications on female psychopathology and we found that female identifications to a family member influence psychopathology.

To our knowledge this is the first study that investigates this

hypothesis. The fact that half of the participants are matching to father has face validity. Likely, girls who present more

weakness to a family member were found to correlate significantly with psychopathology.

TABLE III
COMPARISONS BY IDENTIFICATIONS TO A SPECIFIC FAMILY MEMBER

Variables	1	2	3	4	5	6	7	8	9
Face and Nature Identifications									
Mother vs. Father	.113	.381	.482	.479	.495	.660	.450	.168	.604
Both Parents vs. Previous	.001***	.028*	.113	.173	.030*	.003**	.013*	.811	.370
Paternal Grandmother vs. Previous	.010**	.049*	.137	.210	.032*	.014*	.109	.885	.207
Character Identifications									
Mother vs. Father	.581	.806	.871	.893	.823	.124	.646	.662	.500
Both Parents vs. Previous	.792	.737	.641	.438	.778	.938	.318	.910	.974
Most strongly weakness to a family member									
Mother vs. Father	.036*	.091	.020*	.050*	.241	.449	.220	.972	.050*
Both Parents vs. Previous	.016*	.136	.001***	.003**	.011*	.000***	.013*	.004**	.000***
Paternal Grandmother vs. Previous	.077	.277	.001***	.170	.016*	.000***	.080	.011**	.008***
Brother vs. Previous	.097	.860	.173	.471	.471	.066	.567	.063	.043*

Notes: 1= Somatization, 2= Obsessive-compulsive, 3= Interpersonal sensitivity, 4= Depression, 5=Anxiety, 6= Hostility, 7= Phobic anxiety, 8= Paranoid ideation, 9=Psychoticism

More analytically with regard to analysis of variance among groups of identifications we did not find statistical significant differences in psychopathology compared female matched to father vs. female matched to mother in terms of face and nature identifications. We also found statistical significant differences on somatization, obsessive-compulsive, anxiety, hostility as well as phobic anxiety in female matched to both parents than matched to mother vs. father. Moreover statistical significant differences were observed on between girls identified with parental grandmother compared to other identifications somatization, obsessive-compulsive, anxiety and hostility.

In our study, even we found that character family identifications were associated with somatization, depression, and phobic anxiety the comparisons between groups did not show any statistical significant differences.

The most strongly association was found only to the dimension of most strongly weakness to a family member. Comparison between mother and father identification revealed that female who matched to mother presented greater levels on somatization, interpersonal sensitivity, depression and psychoticism vs. girls who identified to their father. Female also who identified to both parents presented greater levels on almost all primary symptom dimensions of psychopathology, with exception of obsessive-compulsive. This finding put forward the assumption that undifferentiated identifications in terms of weakness to both parents might be a key factor of woman psychopathology and a major cause of concern. Sexuality and aggressive female competition to both father and mother might reflect along different representation of anxiety in castration imagery lines. However the whole representation of anxiety in castration imagery is a phase-specific, constitutionally determined aspect of cognitive development [10].

Comparison between parental grandmother and other family identifications showed lower levels on interpersonal sensitivity, anxiety, hostility, paranoid ideation and

psychoticism. Finally, girls who matched to their brother showed lower levels on psychoticism than girls matched with other family member in terms of identifications.

The finding that those female choosing to match with their mother reported greater level of psychopathology is consistent with our primary hypothesis. On the whole our results highlighted the role of family identifications, especially on father and increasing female psychopathology. This finding replicates the Freudian perception about Oedipus complex and the development of neuroticisms on women who did not resolve these issues [11]. In the oedipal struggle between the generations, the descendant's assuming or asserting responsibility and authority that belonged to the ascendants arouses guilt in the descendant (although not only guilt). It looks as if opponents are required with whom the drama of gaining power, authority, autonomy, and the distribution of guilt can be played out [12]. Further studies should include the role of name to the girls because in Greece is a tradition to name their girls with same name of paternal grandmother or grandfather.

The limitations of the current study have to do with the relatively small sample size that limits the potential to generalize the findings to female populations across different contexts. However, the strengths of the current study relates to the fact that it provides an initial understanding of key issues relating to women's psychopathology, highlights this as an important phenomenon for research and further identifies the need for more studies to be undertaken as to gain a better and in-depth understanding of related issues.

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