

From anaclitic Depression to “Toughness” in an infant male Twin

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When Sir Francis Galton (1876) opened the scientific era of twin research with his paper entitled “The History of Twins as a Criterion of the Relative Powers of Nature and Nurture”, the path was laid open for the use of twins in the scientific study of constitutional and environmental factors relating to mental illness and personality development. This path has been and is being actively explored from many different points of view. A comprehensive general review of twin research has been prepared by Gedda (1954). Slater (1953) has compared the incidence of schizophrenia in identical twins with that in dizygotic twins reared together as a way of approaching genetic variables. Dorothy Burlingham (1949) was one of the first to address herself to the unique psychological aspects of being a twin and has stated that the needs of twins for each other makes the relationship the closest known tie between two individuals. Karpman (1953) has described a psychoanalytic study of an adult twin. The American Psychoanalytic Association recently devoted a panel to the study of identical twins which has been reported by Joseph (1961). Leonard (1961), in this panel, described the basic identification conflict in which the identical twin finds himself, that is, either to identify with the opposite twin, or to identify with and relate primarily to the parent. The stronger the bond to the parent, the less opportunity for serious ego pathology which grows out of the strong primary inter-twin-identification process. Jacobs and Mesnikoff (1961) have recently published a paper on alternating psychosis in twins. All of this literature reflects to some extent the way in which twins seduce us into focusing our interests on genetic or environmental qualities of sameness. A recent exception to this trend is a paper by Benjamin (1960) who focuses upon differing parental responses toward each of single ovum twins. This literature also reflects an interest in the twins as a pair rather than as close siblings. Insufficient attention has been directed to the study of non-identical twins and no studies devoted to the psychological implications of boy-girl twins have been reported. I wish to avoid this preoccupation with sameness in twin research and to address this present paper instead to an exploration of differences both in constitutional and environmental factors surrounding the development of a pair of boy-girl twins, the advantage being that parental behavior and attitudes toward each of the differently sexed

twins can be observed while the parent is in the same state of parental development. A depressive episode in the male twin, Don, beginning at 8½ months of age and transformed to "toughness" at 22 months of age, has provided in this case a point of focus around which differences in parental attitudes could be more directly compared.

Methods of study

The Deer family was seen once a month in a Well Baby Clinic as a part of a Family Medicine course at UCLA. Except for four home visits made by the writer during the latter six months of observation, data to be reported were obtained within these limitations. Methods used for obtaining data included unstructured interviewing in the clinic and in the home, and observation of individual behavior of the twins to play media and medical routine in the clinic. Special attention was given to behavioral interactions of the twins with other people.

Observations made prior to Don's depressive episode

When we first met the Deer family the twins were 4½ months of age. Besides the twins, the family consisted of Mrs. Deer, age 22, Mr. Deer, age 23, and Dorothy age 5. There had been a miscarriage 18 months prior to the birth of the twins. The pregnancy with the twins had been planned and medically uncomplicated. The diagnosis of twins had been established by X-ray at 7½ months and was not regarded as unusual by Mrs. Deer since she had twin sisters five years her junior. Mrs. Deer preferred having twin girls and fully expected this to occur. The delivery was rapid and easy, the first born being Donna who weighed 7 lbs. 6 oz., followed by Don who weighed 7 lbs. 4 oz. As Mrs. Deer stated it, "We both got what we wanted. A boy for him (Mr. Deer) and a girl for me." At the first clinic visit Mrs. Deer was emphatic in her conviction that rigid four-hour schedules were optimum not only for twins but for other children and she was anxious to switch to cup feeding, having heard that this was possible. This was discouraged. The twins were awakened at night for regular feedings. Pacifiers were used to keep them satisfied should they awaken prior to feeding time. They slept in separate cribs. Don was described by his mother and by the pediatrician who had seen the twins up to 4½ months of age as the more active, energetic, and noisy of the two. Because of a more frequent, louder cry he was fed first. He required 8 oz. more feeding per day than did Donna. By one month of age he had weighed more than his sister and continued gaining steadily. Mrs. Deer anticipated more difficulty with boys because, "Boys are more difficult, they may get into things, they may get into trouble, and they may be mischievous." When the first immunization shot was given at 4½ months Donna was held close to her mother and comforted without comment. Don was held less close and the mother said, "You can take it."

Mrs. Deer was a tall, thin, alert, neatly dressed, moderately well groomed, relatively active, and openly friendly woman. She smiled and laughed frequently in response to almost all questions. There was relatively little reflection interposed between question and response. Her voice was rather high-pitched, moderately loud, and moderately tense. She spoke of things in a relatively offhand manner. Her vocabulary and sentence structure were rather simple.

During the monthly visits from 4½ to 8½ months of age, Donna was consistently the quieter, more contemplative, less active, and relatively more placid of the twins, while Don was stronger, could do more things and reached out in great eagerness for the toys presented to him in a pan. He was more vocally expressive and “bounced with delight” toward almost any kind of stimulation. Don sat steadily at 5½ months of age, one week ahead of his sister.

Depressive episode: age 8½ to 22 months

It was in the fifth clinic interview when the twins were eight months, three weeks of age, that a sudden dramatic change in Don's expression and behavior was observed. When I presented Don a pan of toys as I had on previous occasions, he held his hands closed with his arms partially flexed and close to his side. His body stiffened. His expression was serious and his eyes were held wide open. There was a wrinkle of worry on his forehead as he turned slowly to the left to look into his mother's face. I said nothing. There was a short silence. Mr. Deer offered him verbal encouragement to reach for the toys saying, “It's all right, Don.” Then she explained that she had been slapping his hands and saying “No” in order to teach him to leave things alone, especially the knobs on the television set. She found his behavior irritating because he was always getting into things. He had just learned to stand and had become more active in pursuing his interests. Don remained serious and quiet throughout this interview while Donna showed continuation of her usual calmness, showed more expression, more verbal responsiveness than her brother and was more eager to reach out and grasp toys than was Don. I suggested to Mrs. Deer that she try to keep things out of Don's way. She replied that it would not teach him to leave things alone when she took him visiting.

From 8½ to 22 months of age, Don showed a persistence of his serious worried expression. He was less active than his sister. His speech developed more slowly. He moved within a smaller radius and he played with fewer objects. When weaning occurred at 16 months, he became more attached to the pacifier than did Donna. While his sister easily attained toilet training at 16 months, he would not produce when placed on the toilet by his mother. At about 16 months of age he began to have what the mother described as “crying fits”. He was difficult to satisfy, became angered and frustrated by not getting what he wanted or by not being able to do what he wanted. His motor development continued to be in advance of that of his sister, however, and on one occasion he climbed over the fence and ran away from home. His appetite

also remained good throughout this period, he was always more eager to eat, and he ate more than did his sister. During this period he would allow his weaker and less assertive twin sister to take his toys from him without protest. Mrs. Deer reported that his behavior at home was very similar to that in the clinic. Mrs. Deer always carried Donna into the clinic and left Don to walk by himself or to come in with the medical student. During the physical examinations Don was very submissive and cooperative. He was, however, very apprehensive when I placed the tongue blade further in his mouth to see his throat. He was obviously upset and deeply hurt, hanging his head and closing his mouth firmly as if to fight back a cry. Donna, on the other hand, actively resisted physical examination, clung to her mother, cried openly, but recovered quickly and then smiled.

"Recovery": age 22 to 28 months

A home visit, when the twins were 22 months of age, revealed that Don was somewhat more active, competed successfully with his sister for objects and was more self-assertive than he had been during the period from 8½ months to 22 months. At 24 months of age, Don was able to smile but his predominant expression was still one of seriousness. He and his sister were presented with paper and pencil. Don's drawings demonstrated greater intensity and productivity. Mrs. Deer attempted to instruct Don in the correct holding of the pencil while drawing. His speech was still not as understandable as that of his sister and he made nine spontaneous verbal comments compared to twenty for his sister during a 25-minute period in the clinic. Mrs. Deer made fewer spontaneous physical contacts with Don than with Donna. Don made several overtures for physical contact with his mother which she did not accept. Donna showed a much wider variety of expression than did Don. Don was very observant of Donna sitting on her mother's lap and often looked up from his play when Mrs. Deer spoke to Donna. He made several attempts to get his mother's attention by bringing some toys or a book to her which she ignored. He watched closely as his mother mimicked his "fits" which by 24 months of age had diminished somewhat.

At a series of home visits made from 24 months of age to 28 months, Don was observed to be more active. His voice was higher in pitch. He spoke more and his speech was as clear as that of his sister. His expression was still generally sober, but he showed a great deal of silly provocative behavior and occasionally silly grimacing and laughter while his sister's predominant expression and mode of relating was that of sustained interest and quiet friendliness. She nuzzled herself into physical contact with her mother and with the guests at the home.

Behavioral interaction of the twins with the parents at home at 24 months of age further illustrates the differences in parental attitude and behavior toward the twins:

1. On one occasion Don reached for his mother's lap. She immediately placed her hand against his outstretched hand, held her skirt down and pushed his hand away in the same gesture. On another occasion while Don was sitting in his mother's lap facing

her, he began to reach up in the direction of her breasts. Mrs. Deer's pushing away action began simultaneously and it was obvious that she was ready to fend him off from physical contact. At one point he actually did grasp his mother's right breast with his left hand for an instant as she pulled away and pushed him away. During one visit in the home Don made many attempts to reach his mother's lap, was successful in only two of these and spent a total of four minutes on her lap while Donna spent about fifteen minutes on her mother's lap during the hour interview. Don was faced with a great many prohibitive statements such as, "Don't spit the cookies," "Don't put your feet on the furniture," "Use your own book," "You can't take the paper off the crayons. That's so they won't break," "Don't write in the book."

2. Mrs. Deer wanted to demonstrate how Don could look tough so she said to him, "Put down your pencil and show them how tough you are." This having been an often repeated experience, Don put down his pencil, held his arms stiff, made fists of his hands, opened his eyes widely, held his mouth in a rigid "O" fashion, and stared out into space, motionless but fiercely for about five seconds. Mrs. Deer said gently and warmly to Donna, "Do you want to look tough too?" Donna did not respond. Instead she went close to her mother who extended out her arms in a gesture of warm acceptance and then said, "Oh, you don't want to look tough." At a home visit made by Dr. Dickerson when the twins were 22 months of age, Don was told "Be tough Don," by his father to which he responded as described during the last visit. Then by contrast Mrs. Deer said to Donna, "Be pretty Donna." To this she responded by flexing elbows and wrists and by lifting one foot at a time and trying to be as light-footed as is possible for a two-year old.

The most recent observations on the family were made when the twins reached 28 months of age. The family had moved to a home of their own in a smaller, more rural community when the twins were 26 months of age. Don gained three pounds in three weeks after the move. He was even more aggressively provocative in his behavior than previously and this now gave him more physical contact with and more verbal exchange with his mother. He continued to use the tough expression. He appeared as strong, active, noisy, impulsive, and fearless as his sister did cuddly, petite, graceful, endearing and careful.

Don has consistently shown more fever, acted sicker, and showed fewer objective signs of infection (colds, roseola, and ear infections) than has Donna. He also had a brief episode of wheezing and croup in association with a respiratory infection which Donna did not show.

Family background

Mrs. Deer was the second of five children. She has an unmarried sister, three years her senior who is a school teacher; an unmarried brother, thirteen months younger; and unmarried non-identical twin sisters, five years younger. Both of her parents have been school teachers. Her father now supports the family by farming and her mother continues to teach school. Her father maintained very rigid controls over family fi-

nances and social mobility among the children. Anger was never expressed openly in Mrs. Deer's home. Mrs. Deer's mother remained submissive to her husband. Early independence and self-sufficiency were stressed by both parents and affection was rarely expressed.

Mr. Deer is tall, powerfully built, has a deep resonant voice which he uses infrequently, and his speech is limited to the use of a few words and phrases. His expression is less tense than his wife's. Despite his position of physical strength he occupies a passive role in the family. His father worked as a laborer and a truck driver, an occupational choice which he has adopted for himself. He was the youngest of three children with two older sisters. There was a considerable expression of both affection and anger in his home. He was close to his mother and frightened of his father as a youth but his father has become more of a companion to him as he has grown up. Mr. and Mrs. Deer met when they were in junior high school. Mrs. Deer became pregnant with their oldest child at age 16. They were married three months following the pregnancy during their senior year in high school. Both of the Deers are Baptists. They have very limited social contacts with people in Southern California because of the "drinking that goes on", and their real ties are with their larger family group who live in a small city in the San Joaquin Valley. In the home situation it is obvious that Mrs. Deer occupies the pivotal position. All of the incidents in the home were overlooked, supervised and commented on by Mrs. Deer while Mr. Deer's position was that of occasionally supplying a reinforcing statement. Mr. Deer was observed to be much more solicitous of Don than was his wife.

The older child, Dorothy, now seven, is a passive, fearful, shy child who shows her affectional hunger by bursting into breathless, fast flowing speech when any encouragement is offered. She wets the bed, has nightmares and does poorly in school. Parental restrictions have been excessive. She has been forced into the role of surrogate mother for the twins and most of her difficulties have been worse since that time. Mrs. Deer has attempted to urge her to achieve the role of self-sufficient adult prematurely.

Discussion

It is apparent from the data that Mrs. Deer would have preferred to have twin girls and she had established in her mind the conviction that boys were more difficult to rear because of their aggressiveness which she equated with male sexuality. From 4½ to 8½ months of age Don did indeed show more aggressive behavior and more rapid physical, motor and social development than did Donna. At about 8½ months of age there was a sharp reversal of his behavioral and developmental pattern. His facial expression changed from one of animated smiling interest and mobility to one depicting seriousness, worry and immobility with eyes held wide open. His posture became more rigid and vocalization became much less and he developed "crying fits". His relationships with people were less secure. The picture was one of depression associated with anxiety.

This depressive episode in Don can be ascribed to at least three factors. First is the mother's suppression of Don's motor activity. As Spitz (1946) has pointed out, the young infant in whom the normal motor outlet for aggressive drive is suppressed, has available only one route through which aggressive drive may be directed, back to the self. A second factor, one which I feel is perhaps more crucial and would explain the onset of difficulty at this age rather than at an earlier age, is that at 8½ months of age Don entered a *critical period* in which he began to achieve what Winnicott (1958) calls "unit status." It is probable that the achievement of "unit status" at this age in Don may have been accelerated by the strengthening of libidinal drive. His mother's identity as someone separate from himself would therefore become more obvious and important to him. This made it possible for Don to experience more keenly the psychological loss of mother which resulted in his depression. Furthermore, Mrs. Deer's premature attempts to foster independence in Don prior to 8½ months of age may have made him more vulnerable to psychological loss of her. Thirdly, constitutional variables may have influenced this reversal in Don's behavior at 8½ months of age. When it is recalled that Don tolerated the frustration of hunger less easily, required more food, grew more rapidly, and responded more vigorously to the stress of infection than his sister, the possibility that he may have been constitutionally more susceptible to the loss of his mother who met these bodily needs must be considered. Thus, in attempting an explanation of Don's sudden change in behavior we must consider the psychological factors mentioned (suppression of motor activity by the mother and psychological loss of the mother made possible through his achievement of "unit status") operating upon a susceptible constitutional endowment at a critical period in development. These factors combined to produce a depressive episode which lasted 12 months. While Don's general reaction was not sufficiently profound to produce the complete picture of anaclitic depression described by Spitz in infants who have been subjected to actual physical loss of the mother during the second half year of life, the major features of Don's development during this period all suggest a similar depressive process. Important differences were that Don did not *actually* lose the mother, nor was there direct and continuous limitation of motor activity as was the case of the Spitz infants confined to a crib in an impersonal hospital setting. These factors were present for Don more as psychic equivalents than as actual traumata.

While Donna's development has presented less cause for alarm than Don's and has conformed more closely to normal children, there are features which invite our interest. Donna did not show evidence of the kind of depression which Don showed. Why? The answer seems simple enough. Her mother was more prepared to accept and communicate easily with a girl. Donna herself was constitutionally less aggressive and she did not receive the trauma of motor suppression as did Don. Quite possibly she would not have reacted so dramatically as Don to such suppression because of her good communication with the mother in other ways. She was able to show her feelings and cry freely when separation from the mother was threatened and currently has shown herself capable of substituting doll play for mother on arising from naps. Earlier fears and a sleep disorder, which were probably part of her struggle with separation

anxiety, are not beyond that seen in many normal children and now seem to be resolving.

The similarity of Don's immobile serious facial expression and stiff bodily attitude observed at 8½ months and the "tough look" which he demonstrated first on request from his parents at 22 months and then spontaneously at 28 months invites our interest. The earlier and later expressions had in common the wide open motionless eyes, wrinkled forehead, closed mouth, closed hands, stiff arms and generally stiff body. The interesting observation is the fact that these modes of expression were first developed and used as a means of expressing fear and worry at age 8½ months when his self-assertive strivings had been suppressed by his mother and were his predominant modes of expressing depressive affect from 8½ to 22 months of age. At about 22 months of age Don was able to modify the expression and/or his parents were already able to read into the expression elements of "toughness". This was reinforced by their approval of him in this role and later Don spontaneously used the "fierce look" to entertain his mother and also used aggressively provocative behavior to achieve a closer relationship with her. One may thus postulate that the set of expressions and bodily attitudes which became established at the time of emotional crisis at 8½ months became an important part of his emotional and behavioral armamentarium as an affective discharge channel and as a means of communication undergoing slight modifications during the process of growth and new experience but also retaining the basic elements of the original expression.

One must try to understand why the relationship between Mrs. Deer and Donna was a more loving one than that which transpired between her and Don. First, Mrs. Deer had experienced over-restriction and control as well as affectional estrangement from her own father. She had anticipated having twin girls. On discovering that she had produced instead a boy and a girl, she designated the boy as her husband's and the girl as hers. The boy was perceived from the beginning as sexually and aggressively threatening. Her need for rigidity and control and renunciation of instinctual expression is illustrated by her rigid feeding schedules and her emphasis on conformity for her older daughter. Don's own more active disposition, demanding cry, and rapid growth served to reinforce Mrs. Deer's conviction that boys were more difficult to manage and had to be watched. To this mother whose concepts of good and bad, right and wrong, were so clear cut and who could so easily identify sexual and aggressive drives as the bad and wrong and posit them in the male, the advent of boy-girl twins provided an expeditious solution to her own inner struggle with these impulses. Love could be freely expressed to the girl since she was seen as the good child and restriction and disapproval could be imposed upon the boy since he was seen as the bad child, an outer representation of her own bad self. One may ask why is it that Mrs. Deer had such difficulty with her older daughter, Dorothy. This may be explained by the fact that Dorothy was conceived out of wedlock and thus, like Don, came to represent the sinful bad part of herself which must be controlled through the rigid and suppressive handling which has been described.

The final point I wish to consider for discussion is the many faceted problem of

how the experience of depression in Don from age 8½ months of age to 22 months may have affected his infantile ego, and what the implications are on future development. Don seems to have made a recovery from the depressive episode and his general development is not deviant. He has recovered his capacity for aggressive action and for exploratory and acquisitive behavior. Such behaviors are manifested in bursts and at times with less control and modulation than his sister's (He has had several accidents while his twin sister has had none). He has used denial and a counter phobic attitude to achieve freedom from anxiety precipitated by external danger. His capacity for steady affectional contact is still diminished and is associated with slow speech development and difficult toilet training. The use of motor activity and pantomime for purposes of expression and communication may be considered a substitutive compensation for deficiencies in speech.

It is postulated that these primordial defensive maneuvers developed by Don's infantile ego will either become a part of his character or will become ego defenses. If in the course of future development, particularly during the full blossoming of the oedipal conflict, the ego is faced with unusual demands either from the external world or from within, these early modes of adaptation by the ego will be used as the central models for the formation of fully developed defensive mechanisms to deal with the demands. One could also predict character traits such as excessive independence, pseudo-masculine attitudes and behavior, some difficulties in establishing steady affectional relationships and a tendency to act out inner struggles, particularly the search for secure objects. Under greater stress one may anticipate regression with the turning of aggressive feelings upon the self, resulting in depression as the predominant manifestation. Caution in accepting the above prediction is needed because Don is still in a state of rapid psychological growth and from data obtained at the most recent home visit at age 28 months he is just beginning to struggle with some early oedipal problems. Continued follow-up of this family is planned.

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Summary

The present report is of an infant male twin (Don) who developed a depressive illness with onset at 8½ months of age. At 22 months of age, Don's depressive expression and attitude gave way to an expression of toughness which was rewarded by the mother's increased attention to him when he would show his «though look». Such a transformation of affect in Don is understood as partly adaptational (object capturing), partly defensive (denial of object loss), and partly characterological (counter-phobic attitudes developed). The twin sister, Donna, toward whom the mother was much closer, was spared such an illness. The presence of depression in Don and the lack of it in Donna is understood on the basis of interrelated experiential and constitutional (genetic and maturational) factors in development.

The study is reported in order to illustrate the use of twins in the exploration of differences, both constitutional and environmental, which surround development in boys and girls, while the parents's stage of development remains constant.

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RIASSUNTO

Viene riportato il caso di un gemello maschio (Don) affetto da malattia depressiva dall'età di 8 mesi e mezzo. A 22 mesi l'espressione ed attitudine depressiva di Don si manifestò in una certa severità dell'aspetto, che fece sì che la madre gli prestasse più attenzione quando gli vedeva il suo « sguardo severo ». Tale trasformazione dell'affetto in Don può essere ritenuta in parte adattativa (attrattiva degli oggetti), in parte difensiva (diniego della perdita di oggetti) ed in parte caratteriologica (sviluppo di atteggiamenti anti-fobici). La cogemella, Donna, cui la madre era più attaccata, non presentò tale malattia. La presenza della depressione in Don e la sua assenza in Donna vanno spiegate sulla base di una relazione fra i fattori costituzionali (genetici e di maturazione) e quelli ambientali nello sviluppo.

Tale studio viene riportato per illustrare l'uso dei gemelli nella ricerca di differenze, sia costituzionali che ambientali, nello sviluppo dei bambini di ambedue i sessi, mentre lo stadio di sviluppo dei genitori resta costante.

RÉSUMÉ

L'on rapporte le cas d'un jumeau (Don) atteint d'une maladie dépressive dès l'âge de 8 mois et demi. A 22 mois cette-ci se manifesta dans une gravité de l'expression, qui augmenta l'attention de la mère, lorsqu'elle lui voyait le « visage grave ». Cette transformation affective chez Don est expliquée comme étant en partie adaptative (attirait des objets), en partie défensive (déli de la perte d'objets) en partie caractérolologique (développement d'aptitudes anti-phobiques). Sa jumelle Donna, à laquelle la mère montrait plus d'affection, ne fut pas atteinte par la maladie. La présence de la dépression chez Don et son absence chez Donna peuvent être expliquées sur la base d'une corrélation entre les facteurs constitutionnels (génétiques et de maturation) et exogènes du développement.

Cette étude est rapportée dans le but d'illustrer l'usage des jumeaux dans la recherche des différences endogènes et exogènes du développement des garçons et des filles, tandis que le stade de développement des parents reste constant.

ZUSAMMENFASSUNG

Es wird über ein männliches Zwillingskind (Don) berichtet, das im Alter von 8½ Monaten begann, eine Depression zu entwickeln. Mit 22 Monaten zeigte sich an Stelle des depressiven Ausdrucks und Verhaltens ein Hang zur Widerpenstigkeit. Diese wurde dadurch belohnt, dass die Mutter dem Kind grössere Aufmerksamkeit zuteil werden liess, sobald es seine « böse Miene » aufsetzte. Eine solche Affektverwandlung bei Don muss zum Teil als anpassungsgemäss (um das Objekt einzufangen), zum Teil als defensiver Schachzug (Weigerung, das Objekt zu verlieren) und schliesslich auch als charaktergemäss (Entwicklung von anti-phobic-Verhalten) angesehen werden. Der Zwillingschwester

Donna, zu der die Mutter viel strenger war, wurde eine solche Krankheit erspart. Das Auftreten einer Depression bei Don und das Fehlen derselben bei Donna lässt sich auf Grund der in der Entwicklung befindlichen gegenseitig abhängigen Erfahrungs- und Konstitutionsfaktoren (genetische und Reifungsfaktoren) erklären.

Die Untersuchung wird angeführt, um die Nützlichkeit der Zwillingsuntersuchungen bei Erforschung der sowohl konstitutionellen als umgebungsbedingten Unterschiede zu erläutern, die sich im Laufe der Entwicklung von Jungen und Mädchen ereignen, während die Entwicklungsstufe der Eltern dabei konstant bleibt.