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FHS 1500

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**Individual Project:**

**Autobiographical Application of Human Development Concepts**

Demographics and Background Info

I was born in Logan, Utah in 1985, to 18 and 21 year old college students. I am the oldest of four girls, three of whom were born to both of my parents, and one who is my father’s daughter with his second wife. My half-sister was not born until after I graduated high school, so growing up it was just the three sisters. My parents used an authoritative style, with my father leaning more toward the authoritarian side and my mother leaning more toward the permissive side. For the most part it was a democratically run household with flexible boundaries, and I usually felt as if my voice was heard and my needs were met.

My early years were spent living in more than twenty houses across four states. I still, to this day, have no idea why we moved so frequently. My parents gave us various reasons- from new jobs and caring for aging grandparents, to “spring cleaning”. (Yes, my mother really told us that!) We were on the low end of the socioeconomic scale, and my father was often out of a job. We spent many years living in someone’s basement and most of my life on food-stamps; I would venture a guess that the *real* reason for all of the moving and job-changing was a desperate search for an increase in socioeconomic status. We finally stayed in place when we came back to Utah in the late 1990’s where I attended West Jordan Middle School and graduated from West Jordan High School. I was a Gifted and Talented student, and I took advanced classes from elementary school until AP courses in high school

I started working nearly full time when I was only fifteen, and began a career in elderly care, starting with a small nursing home. I pursued a specialty in recreation therapy, and climbed the leadership ranks of my field fairly quickly. I was running the recreation department of one of the largest Alzheimer’s care centers in the country when my disability progressed to the point that I lost my job. Now I have shifted my focus to social work and political science, and I currently support myself by running a disability advocacy website, and selling art and jewelry online.

I now live in Salt Lake City with my husband of two years, my 90 pound black lab/pit bull service dog, a Chihuahua, and three cats. We do not have any children, but we would like to start our family in the next five years or so.

Life Events: Connection to Culture and Reference to Developmental Concepts

* Frequent Moving and Instability (Early and Middle Childhood)

The biggest defining event of my childhood was not a single event, but a series of moves and school-changes over the course of about five years. Starting in first grade, when I attended four different schools in one year, up until the last big move from Portland to Salt Lake City in 6th grade, I attended a total of 17 elementary schools across Wyoming, Washington Oregon and Utah. I knew that it affected me, I became very depressed and withdrawn with self-destructive tendencies, but I am still realizing the reality of the repercussions of that childhood unpredictability. The text talks about cumulative stress and instability, and the concepts apply perfectly to my situation. I was not a very resilient child to start with (prone to overwhelming feelings of guilt and self-blame, very early suicidal tendencies, and with mild autism, I do not fit the definition of “positive adaptation within the context of significant adversity.” (Berger, 2010, p. 276) These repeated moves led to cumulative stress which got more and more detrimental. The final move from Oregon was emotionally devastating. My descent into self-destructive habits like self-injury and disordered eating began after that move; I felt a complete inability to cope, and the instability was taxing. (Berger, 2010, p. 288)

These frequent moves negatively impacted my psychosocial development as well. Erikson’s Industry versus Inferiority stage requires feelings of competence and productivity in order to be fulfilled in a healthy way; moving to more than a dozen cities, interrupting school years, and changing curriculums, led to feelings of self-doubt and incompetence because I often missed crucial material and fell behind in class after coming to a new school. I was smart. I may have had the ability to be a “winner”, but I felt so lost and lonely and insecure that I fell more in the “inferiority” category in this stage. (Berger, 2010, p. 273)

The up-rooting from state to state, city to city, and school to school, led to extreme difficulty in connecting with my culture and community. It was difficult to make friends, and nearly impossible to “fit in” with my peers. I was raised in a very strict LDS household, and I think I became extremely devout, because the church was something that was consistent no matter where I moved, and so I was able to maintain some connections, and to feel some association with those around me, no matter where we lived.

* Parent’s Divorce (Adolescence)

At the age of 14, after years of fighting and infidelity, my parents divorced. I encouraged my mother to make the final split, because even as a young teenager I could see him manipulating her. Because of that, I have always maintained that the divorce had no effect on my mental health or psychological issues. However, in the course this semester, I could see a few areas where their split could have had an impact. It definitely added to the cumulative stress which had built up after so many moves, and certainly increased the detrimental effects of instability.

On a cultural level, the divorce was probably the most harmful. The only source of stable “community” I had was found in the LDS church. Yet, with the split of my parents and the gossip that accompanied it, I found myself more and more at odds with the family-oriented culture. I had friends whose parents would not allow them to come to my house, “friends” who spread viscous and nasty rumors, and church leaders which made me feel guilt and shame because of my “broken” home. I felt a lot of betrayal from my religious community.

* Eating Disorder and Self-Harm: Progression, Treatment, and Recovery (Adolescence and Early Adulthood)

As the text mentions, most teens experience struggles with body image, insecurity, and self-acceptance. Yet, my self-destructive problems began much earlier and much more severely. I have obsessive compulsive disorder, and it manifest around age 6 or 7 in the form of an obsession with suicide. This progressed with my cumulative stress and reached a pinnacle during adolescence with anorexia, bulimia, and self-injury. I ended up spending six months in an eating disorder treatment center when I was 19 and reached full recovery by age 22-23. My disordered eating was triggered by childhood psychiatric issues, stress, instability, and also factors mentioned in the book- like genetic predisposition, unpredictable parental control, cultural norms, social stress, and hormone shifts due to puberty. (Berger, 2010, pp. 318, 319) (Alexandra, 2013)

This course, and this text, helped me to realize that my adolescent experience was not that unique. I have often felt “crazy” in regards to my history, but now I can see how common my story is. I was surprised to read that the most common age for sexual abuse is between twelve and fifteen. I experienced abuse during this time, and had no idea that my situation was such a common one. The description of rumination, suicidal ideation and parasuicide was also very relevant to my experiences. I believe that the concept of adolescent ego-centrism and the imaginary audience ties into all of this as well. I think that teenager’s problems, which adults scoff at as “no big deal”, are paralyzing to young people, because they feel like the entire world is watching them and judging them. Growing up and realizing that people do not notice as much as you think you do, is an eye-opening moment, which can be very freeing and a step toward recovery. (Berger, 2010, p. 326)

* Leaving the Church (Early Adulthood)

During my eating disorder recovery and my journey to get to know myself, I realized that I had foreclosed very early on my religion, and that it was not the right fit for me. I long depended on my faith to provide me not only with spiritual comfort and guidance, but with a sense of community and belonging as well. I had never even considered the idea of anything but a devout and faithful life. However, as I began to heal and work on self-love and self-forgiveness, I realized how much my interpretation of my religion had led to my feelings of inadequacy, worthlessness, guilt, and shame. As I lost more and more of my “friends” with my parents’ divorce and my own mental health problems and treatment center stay, I began to question the quality of those relationships to begin with. When I realized that I could sacrifice the cultural connections, in order to help develop my own sense of self-worth, I began to make the split.

This decision, and the process that followed, was probably the single most influential event in leading to where my life is today. The initial effect was an extreme sense of loss, but in the years that followed I have developed a strong cultural connection through political involvement, and now disability activism, and so the space that emptied with the loss of the LDS community has been filled. The culture I am involved in now feels much more authentic and real, rather than the result of foreclosing on the identity chosen by my parents. This early-adulthood shift resolved Erikson’s psychosocial stage of Identity versus Role Confusion. I spent a long time in the latter category, and it took making a dramatic lifestyle change to help me truly find my identity. (Berger, 2010, pp. 348, 350)

* Meeting and Marrying my Husband (Early Adulthood)

I have been a serial monogamist, with a string of not-nice partners. My husband was introduced to my online profile after a friend who knew both of us separately insisted that we meet. He messaged me in late 2008, and I ignored his pursuits until after a horrible New Year’s date in 2009. Our first date turned into a marathon 10 hour event, and we have been inseparable ever since. We cohabitated for two years, and were married in a very small, beach-side ceremony in April of 2011. He has contributed to my sense of cultural and community acceptance, and identity development. I hate the “other half” phrase, but our relationship *did* help me feel complete. Since my health has declined severely in the past few years, our relationship has been even more important to me. Especially since my husband is now my full-time caregiver, as well as my business partner, best friend, and lover. This supportive, stable, relationship has been crucial to my positive development in the Intimacy versus Isolation stage. Disability and illness are isolating enough already, if I were not married before my health decline I am sure that I would be dealing with *far* more isolation than I am already experiencing now. (Berger, 2010, p. 411) (Christine J McPherson, 2011)

* Accident, Illness and Disability (Early Adulthood)

I developed a vocational identity very early on. I was working full time in management positions in my teens, and my resume was an outstanding laundry list of achievements, awards, and experience by the time I was 25. In July of 2010 we were in a serious car accident, which damaged my back and led to an array of progressive health complications from herniated disks to Dysautonomia, to the newest diagnosis of a progressive brain disorder (like Parkinson’s Disease). I ended up leaving my career in 2011, and have since returned to school and have started a small online business and advocacy website. This interruption in vocational identity was a big contributor to the depression which followed my disability.

My social clock was shattered with the failure of my health. I have had to pause and rethink everything from my plans for children to my available career paths. It’s been challenging, but I am learning to re-think my plans and accommodate my physical, cognitive, and emotional limitations.

Future Direction

I am confident that my future path will be healthier, more fulfilled, and more well-balanced than my past. I am aware of the challenges that wait ahead with my health, but I am armed with an excellent support network and a wealth of knowledge. I intend to pursue my dreams of a Social Welfare Policy career, I intend to continue writing and publishing my work, I intend to fulfill my husband’s desire to be a father and find a way to have children and raise them effectively in spite of my disability. I am certain that I will be able to maintain positive fulfillment in the Intimacy versus Isolation stage, and that I will remain vital as long as I am able, in spite of a degenerative prognosis.

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