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Socializing Anxiety through Narrative: A Case Study

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This paper examines the socialization of anxiety based on analyses of narrative interactions between an agoraphobic woman ("Meg"), her husband, son, and daughter, who has been diagnosed with separation anxiety. Agoraphobia is characterized by irrational fear of panic, feelings of helplessness, and avoidance of situations outside the home. Although children of agoraphobic parents are at risk for developing anxiety, little is known about the socialization process. Analyses of storytelling interactions in the Logan family suggest that anxiety may be socialized in the children as 1) Meg portrays herself or others as protagonists helpless in a world spinning out of control; 2) the children re-enact Meg’s portrayals of anxious moments; 3) children offer solutions to anxiety-ridden scenarios that are rejected as ineffective; 4) the children portray themselves as unable to control or explain their own and others’ emotions and actions; and 5) the children’s portrayals of themselves as successful agents are undermined by subsequent narrative contributions.

INTRODUCTION

This paper examines language practices involved in socializing anxiety based on analysis of storytelling interactions between an agoraphobic woman and her children. The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV, 1994) characterizes agoraphobia as "irrational fear of being in a place where it may be difficult to escape should one panic or develop other potentially incapacitating or extremely embarrassing symptoms." The term agoraphobia means "fear of open spaces," but the disorder entails fear of being any place where one might feel alone and vulnerable to panic. A central feature of agoraphobia is avoidance in response to this fear. Agoraphobic persons often describe feeling trapped by an ever present threat of panic and their belief that they cannot risk leaving safe havens such as home.

Research has shown that children of anxious parents are at heightened risk for developing anxiety: They are seven times more likely to be diagnosed with anxiety than children of non-anxious parents (Breslau, Davis, & Prabucki, 1987; Leckman, Weissman, Merikangas, et al., 1984; Turner, Beidel, & Costello, 1987; Weissman, 1993). Children of agoraphobic parents appear to be most...
vulnerable (Casat, 1988). In my dissertation comparing 16 school aged children of agoraphobic mothers and 16 children of non-anxious mothers, for example, 67 percent of the children of agoraphobic parents were diagnosed with an anxiety disorder, whereas this was not the case among the children of any of the non-anxious mothers (Capps, Sigman, Sena, Henker, & Whalen, in press). Similarly, in another study Silverman and her colleagues found that 71 percent of a sample of school aged children of agoraphobic mothers suffered from an anxiety disorder (Silverman, Cerny, Nelles, & Burke, 1988).

Although these studies show that children of anxious parents are more likely to be anxious, they don't tell us how anxiety is transmitted in families. Various models have been proposed. Although genetics clearly play a role (e.g., Weissman, 1993), additional factors are involved. Research on identical twins, for instance, has shown that usually one twin of an anxious parent develops anxiety while the other does not, and when both twins do become anxious, they do not share the same disorder (Torgersen, 1983). Further, knowing that there is a genetic component does not specify what is passed on or how it happens. Physiological studies suggest that children of anxious parents may inherit physiological predispositions that render them vulnerable to anxiety, such as heightened physiological arousal (Beidel, 1991; Turner, Beidel, & Epstein, 1991).

Although surprisingly little research has focused on environmental influences that might exacerbate or ameliorate these processes, there has been considerable speculation. One hypothesis is that agoraphobic parents model a cautious, fearful stance and that children somehow pick up this stance (Rosenbaum et al., 1994). A variation on this view suggests that children observe their agoraphobic parents avoid fearful situations and that the children adopt the tendency to respond to fear through avoidance, which eventually results in a host of fears and anxieties. This perspective is supported by a study finding positive correlations between the number of situations agoraphobic parents avoid and the severity of their children's anxiety (Silverman et al., 1988). Another hypothesis is that interacting with an agoraphobic parent who feels out of control and uses avoidance to cope undermines the child's sense of control, generating feelings of helplessness (Barlow, 1988; 1990). Additional evidence suggests that children of agoraphobic parents perceive various risk conditions to be less controllable than do comparison children of nonanxious mothers (Capps et al., in press).

Psychoanalytic models propose a dynamic in which agoraphobic parents depend on their children to alleviate their fears of being alone. According to this model children are socialized into caregiving roles in which they assure their parents that they will not become autonomous and leave, which creates conflict in children as they grow older and face situations that require separation from parents (Bacciajaluppi, 1985; Bowlby, 1973). In support of this theory, the rate of separation anxiety among children of agoraphobic parents is very high—not only higher than that among children of non-anxious parents (Capps et al., in
press) but also higher among children of parents with other anxiety disorders (Casat, 1988).

Each of these models of anxiety transmission is supported by research that relies on structured diagnostic interviews and true-false or multiple choice questionnaires. Responses to these questions are used to identify characteristics of anxious parents and their children, and the relationships among these characteristics. In this sense, traditional psychological research looks through language to get at underlying dynamics, not at language. Despite the fact that these questionnaires are called "All About Me" (Kovacs, 1983) and "What I Think and Feel" (Reynolds & Richmond, 1978), they are insufficient tools for understanding the experience and socialization of anxiety.

The present project is based on the following premises: 1) Understanding the socialization of anxiety in families requires observation of children and parents interacting in naturalistic settings, looking at language, not through it; 2) Language is the greatest human resource for constructing and socializing emotions, actions, and identities and no language practice has more impact in this direction than storytelling (Bruner, 1990; Feldman, 1989; Heath, 1982, 1983; Miller, Potts, Fung, Hoogstra, & Mintz, 1990; Miller & Sperry, 1988; Nelson, 1989; Ochs & Taylor, 1992, 1994; Schieffelin, 1990); 3) When we tell stories with children we socialize them into particular, enduring ways of creating themselves. Storytelling interactions not only influence the children's interpretations of past events, they socialize ways of "doing language" that construct enduring self-portraits and world views. In the words of Nobel Laureate Toni Morrison, "We die. That may be the meaning of life. But we do language. That may be the measure of our lives... Narrative is radical, creating us at the very moment it is being created" (1994, p. 22).

**METHODOLOGY**

This socialization study is part of a larger project carried out by Capps and Ochs (see Capps & Ochs, 1995a, 1995b) involving 36 months of video- and audio-recorded participant observations and interviews in the home of an agoraphobic woman we refer to as "Meg Logan"; her husband, "William"; eleven-year-old daughter, "Beth"; and five-year-old son, "Sean." At the time of this study, Meg had not left a two mile radius of her house for the previous six years. In addition, Beth was diagnosed with separation anxiety disorder. The present analyses are drawn from a corpus of 53 narratives, 17 of which were told during family dinners, and 36 during conversations with Meg and Beth.
SOCIALIZING HELPLESSNESS

At the heart of agoraphobia is a sense of fear, helplessness, and the absence of control. Despite Meg's desire to spare her children her suffering, her interactions with them may socialize these emotions when: 1) Meg portrays herself or others as helpless protagonists in a world spinning out of control; 2) The children enact, complete, or repeat Meg's portrayals of anxious moments; 3) The children offer solutions to anxiety-ridden scenarios which are then rejected as ineffective; 4) The children portray themselves as unable to control or explain their own and others' emotions and actions and Meg's responses affirms or augment these portrayals; 5) The children's portrayals of themselves as successful agents are undermined by subsequent narrative contributions.

Meg frequently introduces narratives about being overwhelmed by uncontrollable fears and anxieties. In the telling, it seems that these emotions are not contained in the past, but continue to plague her. Meg, like all of us, relates narratives about situations that provoke these emotions in an effort to regain control by obtaining validation for her emotional responses. That is, if others ratify her construction of danger, they provide a warrant for her distressing emotions, rendering them normal and less overwhelming.

The following excerpt comes from a story about Meg's encounter with two menacing pit bulls during a routine visit to her father-in-law's house, near her own home.1

(1.1) Meg: Oh my gosh I- I was standing there talking to your dad
by the back wall
and I just happened to remember these dogs.
(1.6)
I looked over the wall and this dog, it came AT me.
(1.3)
I mean thank God it was aTached- to the chain.
But I went EEYQ;iW
and I jumped back off the stump.

In reporting this incident, Meg displays her distress, flinging her arms above her head to intensify her sense that she is off balance and out of control. Such storytelling moments socialize anxiety by modeling uncontrollable emotional responses to life events.

Anxiety may also be socialized as Beth and Sean are drawn into anxious scenarios. When Meg tells stories of anxious experiences she recruits her spouse's and her children's participation by directing her gaze, body, and utterances toward them (cf. Goodwin, 1981). In so doing she solicits validation for her perception of uncontrollable danger in the world. While she seems most eager for validation from her spouse, in general Meg's children are far more responsive to her tales. They gaze more consistently at her during the course of the storytelling, they answer her questions, provide consistent, often escalated
assessments of the events, and they display empathy with her narrated predicaments.

The following sequence takes place after Meg claims that pit bulls are not pets, but are barbaric beasts who threaten the safety of everyone in the neighborhood and should be outlawed. This excerpt shows how Meg’s children closely attend to her description of her response to the advancing dogs.

(1.2) Meg: ((leaning forward, looking at Sean))

<table>
<thead>
<tr>
<th>Pit bulls have been known to <strong>attack</strong> and <strong>kill</strong> people</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>(.4)</em></td>
</tr>
<tr>
<td>They’re so st- they have such <strong>growling jaws</strong></td>
</tr>
<tr>
<td><strong>((frames mouth with hands, juts out chin))</strong></td>
</tr>
</tbody>
</table>

Sean: **((juts out lower jaw))**

Meg: that if they (.2) attack somebody they could just=

Beth: =**ONE** bite that’s just about all it would take.

Meg: Yeah **((vertical head shakes))**

Here we see Meg leaning forward toward Sean, speaking slowly and deliberately. Sean is mesmerized by her dramatic rendition of the pit bulls’ strong jaws, and mimics her re-enactment: When she frames her mouth with her hands and moves her jaws back and forth, he opens his mouth and juts out his chin.

In addition, when Meg hypothesizes about the consequences if the dogs attack, Beth is moved to complete her mother’s utterance, asserting “**One bite**, that’s just about all it would **take**.” This seamless collaboration is made possible in part by Meg’s beginning an “if-then” format (“If they attack...”) which has a projectable grammatical structure and is therefore open to completion by another speaker. As Lerner (1991; see also Sacks, 1992) notes, collaborative completions are an especially effective way of demonstrating shared understanding and co-authorship of an utterance. This exchange exemplifies how the children engage in the process of building uncontrollable worlds in which menaces roam free, with the intent to destroy anybody who might cross their path—including those present at the table.

Indeed, the children not only help build, but narratively inhabit this potentially lethal terrain. Beth, for example, inserts herself into the perilous pit bull scenario after Meg states that neighbors fear for their grandchildren’s safety:

(1.3) Meg: Well Frank and Ruth=  
Beth: =**if** put them in a shelter=  
Meg: =don’t want to let their **grandchildren** in the back yard  
because if this dog ever got **loose** (**looks at Beth**)  
Beth: **((vertical head nods))**  
Meg: it could just  
(.6)  
**((5 lines of transcript omitted))**  
Meg: This is a **residential** area.  
It isn’t just **some**-  
Beth: Yeah and the neighbors have **grandkids** too.  
And what **if** (.2) you know **WE** come over.  
We’re **Barra’s** grandkids.

Will: Well stay away from the fence.
In this excerpt Beth augments Meg's assertion that the dogs pose a threat to (grand)children by identifying herself as a likely victim.

In addition to amplifying Meg's perspective, Beth and Sean attempt to assuage narrated anxiety by offering solutions. In the previous example, Beth pipes up with a solution, saying she'd put the pit bulls in a shelter. This suggestion is ignored. In the following example, Beth and Sean offer another solution.

(1.4) Meg: I couldn't help but wonder what would happen if (2) you know (4)
Will: (looks down at her food, scratches the top of her head)
Meg: They'd be in big trouble
Beth: if he really did get into your dad's yard.
Scan: I'd call the pound.
Meg: Me too
Sean: Well [the problem is (looks at Beth)]
Meg: [to come get him
Sean: (looks at William)]
Meg: [you can't report them
until they actually harm somebody
(looks at Beth)]
Will: but by then it's too late.
Scan: (looks at William)
Will: Yeah.

In proposing solutions, Beth and Sean attempt to display that they are capable of handling such problems. However, Meg and William undermine the children's sense of control, both by negating the efficacy of the children as agents and by reinforcing the inevitability of harm.

These excerpts illuminate how anxiety might be socialized as children participate in the telling of past problems that kindle present anxieties about future experiences. And the children, compelled to offer solutions that might stave off mounting distress, become further mired in insoluble predicaments.

We now shift our focus to interactions in which Beth portrays herself as unable to explain her emotions and behavior in an effort to illuminate another way in which anxiety might be socialized in the Logan family. The following excerpts are taken from audio-taped conversations with Beth and Meg in which I asked them to talk about meaningful experiences. In these interviews, Beth's stories often parallel Meg's accounts of distressing events. Previous analyses of Meg's narratives of panic experience delineate a set of grammatical constructions that Meg routinely uses to build a portrait of herself as helpless and out of control (Capps & Ochs, 1995a; 1995b). In narrating panic, Meg consistently depicts anxious moments as coming on "all of a sudden," or "unaccountably," constructing such negative emotional experiences as inexplicable and therefore unavoidable. Beth appropriates a similar set of grammatical resources when she describes emotionally significant events. Specifically, Beth uses "for some reason" and "just" to portray herself as carrying out actions and experiencing
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emotions without reason. In narrating seeing a boy who had a shaved head, Beth comments:

(2) Beth: For some reason, it just scared me.

Similarly, in describing one of her baby dolls Beth recalls:

(3.1) Beth: For some reason I would like to love her for a while
Lisa: Uh huh
Beth: and then I'd get mad at her.
((45 lines of transcript omitted))
Lisa: Do you remember why you hated her?
Beth: No. I'd just get mad at her.
I'd go 'SHUT UP!' 'BE QUIET!' And I'd shake her.
I'd just go 'BE QUIET!' 'BE QUIET!'

In addition to Beth's appropriation of some of the grammatical resources Meg uses in building a portrait of herself as helplessness, anxiety may be socialized through interactions between Meg and Beth. In narrating past events, Beth often poses questions about why she behaved or felt as she did. Meg's subsequent narrative contributions may socialize feelings of helplessness by attributing these distressing actions and emotions to enduring psychological traits. This is the case, for example, in the unfolding narrative about Beth's doll:

(3.2) Beth: I'd get annoyed with her when company left. And I'd just go OOH!
Meg: I didn't know you had these sadistic tendencies.
((12 lines of transcript omitted))
Meg: Well I think it was a good thing you had her.
(3) If you had a baby sister or something, you might have beaten up on her instead.

In this narrative Meg responds to Beth's search for an explanation by attributing her behavior to an enduring character trait, the expression of which is both inevitable and transferable to more devastating scenarios.

In addition to portraying her own emotions and actions as inexplicable, Beth often portrays herself as the innocent victim of others' actions and emotions. In many such cases Meg and Beth collaboratively solicit an explanation and propose a generic or inalterable reason for the aggressor's conduct. In telling a story about being bullied by a girl at school, for example, Meg and Beth co-construct a rationale for the girl's behavior.

(4.1) Beth: You know I come to school and it's like the first week
Lisa: Umhm
Beth: and this girl starts bothering me.
I don't know why.
Meg: Hmm. I wonder why she seemed to take such a-
Beth: When she- she would stop singing she would look at me,
Meg: Didn't you wonder why she was being so mean to you when you hadn't done anything
Beth: I know. It's just like my existence bothered her.
Meg: Umhm. Maybe she was a little bit jealous of you.
Beth: I don't know.
Meg: She's older, right.
Beth: She was like one-
Meg: Is she?
Beth: She looks much older though. She looks like she's in seventh or eighth. Maybe she was held back.
Meg: Now that could be.
Beth: I think she just had her thirteenth birthday too.
Meg: So she's a little older. Maybe she was held back. That could make her especially sensitive or uh you know-
Beth: Yeah.
Meg: To think that somebody is doing better than her.
Beth: Yeah.
Meg: And you're just a sixth grader, and you maybe could sing better or whatever, or you're more popular. I mean that could be pretty threatening to somebody.
Beth: Hmm. Meg: I don't think it was anything you did.
Beth: It was just being me.
Meg: [Yeah.
Beth: [Oh gosh (softly)].

In this narrative of Beth's victimization, Meg elicits reasons from Beth (e.g., "I wonder why?...?")). Similarly, Meg suggests that Beth must be wondering why she was receiving such treatment (e.g., "Didn't you wonder why she was being so mean to you"). And Beth also poses such questions to herself and Meg (e.g., "I don't know why..."). In response to these queries, Meg and Beth collaboratively identify enduring circumstances that might make the girl unhappy (Beth is younger, perhaps more popular, and/or a better singer; the girl may have been held back), and determine that Beth did nothing to incite the girl's obnoxious behavior. This sequence is likely to undermine Beth's sense of control by simultaneously marking the importance of knowing why one has been victimized and concluding "it was nothing you did," and that there is
nothing that can be done because the distressing situation is attributable to traits or conditions that persist. This narrative framing renders Beth innocent yet helpless.

Finally, anxiety may be socialized when the children portray themselves as exerting control over challenging circumstances, and these self-portraits are undermined by subsequent narrative contributions. We have seen how Beth and Sean attempted to exert control in the pit bull story by providing solutions to the problem—either calling the shelter or the pound—the first of which was ignored, and the second rejected. Similarly, when Beth frames herself as a capable agent in a distressing situation, Meg frequently reframes these narrated events in ways that undermine Beth's control.

Meg may undermine Beth's portrayal of herself as gaining control over threatening circumstances by reframing such circumstances as not at all or less threatening. For example, when Beth describes getting help after being attacked by a bully who "bites, kicks, scratches and punches," Meg asserts that he "does not bite," then deems such attacks rare, and goes on to provide counter examples of the bully's sociability.

Additionally, in the story below, about Autumn the Alto, Beth recounts how she confronted this bully, and solicited the Vice Principal's help in handling the situation. But Meg reframes the scenario, attributing resolution of the problem to the Vice Principal's agency and portraying Beth as culpable, along with the bully:

(4.2) Beth: I'd just say, I can't take it. Stop BOtherING me.
Lisa: Finally I had to take it to the vice principal,
Beth: Uhm
Meg: Actually he had you both in there talking.

This reformulation undermines Beth's attempt to construct herself as a capable protagonist who is beyond reproach and in control of the situation. Further, Meg's reformulation renders Beth as a somewhat unreliable narrator.

In conclusion, these narrative interactions illuminate how anxiety might be socialized in one family. In their roles as protagonists and co-tellers, Beth and Sean participate in storytelling interactions that may socialize anxiety: sometimes by validating Meg's recurrent assertions that distress is a fundamental property of life, sometimes by searching for solutions which are subsequently rejected, sometimes by offering up for family approbation parallel portrayals of themselves as victims of indiscriminate actions and uncontrollable emotions, and sometimes by offering portrayals of themselves as competent problem-solvers, only to find themselves recast as not truly in control of the situation.

Meg's contributions to stories are likely designed to protect her children from future devastation in the face of uncontrollable negative experiences—experiences she deems inevitable. Yet these storytelling interactions may unwittingly undermine the children's sense of control by implying that even if
they overcame a particular trial, their actions and emotions and those of others in the world cannot be controlled. Furthermore, such interactions socialize the psychological and communicative resources that perpetuate these identities and world views, resources that children draw on in creating themselves long after the stories end. Whether these observations apply to the socialization of anxiety more generally remains open to investigation, but the method used is reproducible to that end. This study points to the importance of looking at language, not through it, to understand the perpetuation of psychological conditions.

NOTES

1 Following Jefferson (1974), this paper's transcription notation uses the following symbols: Brackets denote the onset of simultaneous and/or overlapping utterances; equal signs indicate contiguous utterances, in which the second is latched onto the first; pauses within the stream of talk are timed in tenths of a second and inserted in parentheses; short untimed pauses within utterances are indicated by a dash; one or more colons represent an extension of the sound or syllable it follows; underlining indicates emphasis; capital letters indicate loudness; arrows indicate rising and falling intonation; audible aspirations (hhh) and inhalations (hhh) are inserted where they occur; and details of the conversational scene or various characterizations of the talk are italicized and inserted in double parentheses.

2 While Beth's apparent desire to determine why she behaved and felt as she did may be interpreted in association with Meg's preoccupation with inexplicable actions and emotions it is important to emphasize that the present excerpts are taken from interviews in which I was present. Interviews are themselves interactions with their own organization and relevances (Baker, 1982; Suchman & Jordan, 1990). Particularly, because I identified myself as a clinical psychologist, it may be that some of Beth's apparent concern over "why?" is more generally characteristic of laypersons/trainees' accounts of their own experiences when speaking to relative experts. That is, the demand characteristics of the interview situation may have significantly influenced the family interactions captured on tape.

REFERENCES


