

Adaptation and Morale:

Predictable Responses to Life Change

W. Walter Menninger, M.D.

From the moment of birth until the moment of death, everyone faces a continuing challenge to cope with change. Sometimes change results from a conscious decision and voluntary action. More often, change is imposed upon us by natural events or the actions of others.

Change always tests our adaptive capacities because it forces us to compare new situations with previous life experiences, to synthesize new relationships to the outside world, and in the process to evolve a new sense of personal self---identity, concept, esteem. The new sense of self may simply be an affirmed self who has successfully mastered a new situation, or it may manifest symptoms which reflect persisting difficulties in adaptation. It is not always possible to anticipate or schedule periods of significant change. While each life stage presents us with such change, the adolescent and late years are marked by events of intense change.

Although morale is not a concept discussed frequently in the psychiatric literature, it is a useful indicator of mental health because it is a reflection of the sense of self going through the process of change. Morale has been defined as "a prevailing temper or spirit in the individuals forming a group, marked by confidence in the group; self-confidence with respect to one's role in the group; group loyalty; readiness to strive for group goals" (English & English, 1958, p. 328). Perk (1951) identified morale as "the barometer of the individual's and the community's capacity for suitable response to the call of duty and of the fortitude and tenacity displayed in

the response" (p. 19). He considered morale to be "the state of preparedness of an individual ... for appropriate reaction to a challenging situation" (p. 39).

The process of adjustment to change passes through a series of stages or phases which have been characterized with different terms by investigators who have focused on one or another particular life event or crisis. For example, in recent years, there has been considerable study and formulation of reactions to change in connection with loss (Marris, 1975; Osterweis, Solomon, & Green, 1984; Parkes, 1972; Parkes & Weiss, 1983; Pollock, 1961), death and dying (Hagglund, 1978; Kubler-Ross, 1969; Weisman 1972), traumatic events (Horowitz, 1983), and stress (Horowitz, 1986). These investigators have studied the patterns of individual response to negative events that were forced on a person by a life situation.

In contrast, several colleagues and I have had the opportunity to observe an adaptational process to a new life situation voluntarily undertaken--in Peace Corps and VISTA Volunteers. These observations have led to the identification and articulation of some common reaction patterns and predictable periods of psychological crisis (English and Colmen, 1966; Menninger, 1975). What is most relevant about these observations is the degree to which they identify a common process of adaptation to change in human beings and offer insights to the application of preventive principles in psychiatry.

In this paper, I will describe four periods of crisis which occur during a process that represents a "morale curve"; discuss the applicability of this process to other life experiences including events occurring during adolescence and aging; suggest a dynamic formulation to explain the psychological reactions during the critical periods; and note some implications of

this model for treatment and prevention.

The Peace Corps and the Morale Curve

In the Peace Corps, under the leadership of Dr. Joseph English, psychiatry had a remarkable opportunity to assist broadly in the entire scope of operations---selection, training, overseas support, and so forth. As the first Peace Corps volunteers were completing their service, the organization sought to enhance their readjustment to coming home. Toward that end, a series of "completion of service conferences" were held in host countries just prior to the end of the two-year tour of duty.

English (1966) noted:

the purpose of these conferences (was) to initiate the psychological preparation of the volunteers for their return from what had been one of the more significant experiences of their lives; to give them the opportunity to verbalize and integrate the impact of this experience through discussions with each other and with the staff conference leaders; and to glean from their experiences information which would help the Peace Corps better prepare, support, and place future volunteers abroad.

(pp. 17-18)

The conference was structured around responses to a questionnaire completed by the terminating volunteers, and summarized and communicated back to the volunteers during the course of the 2-day meeting. One question asked whether they had suffered any "periods of psychological difficulty" during the

2 years; if so, "when in the course of service did the period occur;" what did the volunteer "feel like" during the period; how long did the period last; and what helped the volunteer "to get over it."

From a review of nearly 1,000 questionnaires and reports of the conference discussions, it was possible to identify a consistent pattern of psychological adjustment, a pattern subsequently labeled the "morale curve" (Menninger, 1975; see Figure 1). There were four major periods of psychological difficulty, or "crisis periods," that represented critical points for individual growth and mastery of the situation facing the volunteer. The outcome of the crisis could be positive or negative, depending upon the severity of the stress, the coping resources of the individual and the support received during the period.

The first crisis, characterized as the Crisis of Arrival, occurred at the beginning of the experience. At that point, because the individual had entered this situation with deliberation and conscious intent, the mood or morale was high. But along with the enthusiasm and excitement and sometimes unrealistic euphoria was some degree of apprehension and concern about the ability of the individual to meet the challenge. Although volunteers had extensive advance training, there were unfamiliar situations and unexpected problems that taxed the coping capacity of the individual. The duration of this crisis was from several weeks to several months. Some volunteers were overwhelmed with "gangplank fever" or intolerable levels of anxiety, resulting in an early return to the United States (Menninger and English, 1965).

Anywhere from 3 to 6 or 8 months into the experience, the volunteers experienced the second critical period, the Crisis of Engagement, so called because during this period the individual faced up to the new situation and

became truly engaged with the realities he or she now faced. Morale commonly was at a low ebb, having fallen from the initial high level due to frustrations with and limited supports in the new life situation. Whereas anxiety was the predominant emotional tone in the arrival period, depression was the central feature of this second period. It was a time of acknowledging losses---of what the volunteers had left behind when they entered this new situation, of their great expectations of what this new situation was to be like, of the freedom to express their frustrations outwardly because they were still unsure to whom one could safely complain. During this period, volunteers became discouraged, slowed down, often took less effective care of themselves, became physically ill, and went AWOL; and there was another peak of dropouts at this point in the Peace Corps service.

Roughly midway through the time span of the Peace Corps service commitment, from 11 to 15 months, a third phase was noted, the Crisis of Acceptance. Generally, the morale had been restored, with increased knowledge and mastery of the new life situation. The emotional tone, however, was often one of activism and anger. The volunteer had been in the situation long enough to identify with and accept the new situation as part of his or her own identity. Feeling a legitimate part of the situation, volunteers spoke out more freely and pursued changes they felt desirable to improve the lot of those with whom they worked. They also reflected on the impact of the experience on their sense of self with questions such as: Who am I? What am I doing here? What does it all mean? What right do I have to try to change these people?

The final crisis of the Peace Corps volunteers was the function of the service being a self-limited experience with an end point. Although this

crisis might be viewed as a function of termination, the period was labeled the Crisis of Reentry because the volunteers' adaptation was both to giving up something now a part of the self and to anticipating the return to the culture of origin. Morale was generally on an even keel, although the volunteers experienced some depression associated with giving up an important commitment and ending new relationships, satisfaction at completing a commitment and making positive achievements, and apprehension about facing future uncertainties.

The Universality of the Morale Curve

As ~~the~~ awareness of this pattern of crises and the morale curve increased, it became clear this process was not unique to the Peace Corps experience. Rather, it represents a process all individuals undergo as they enter a new life situation, be it school, job, marriage, parenthood, separation, divorce, widowhood, retirement, and so forth. The timing of the crises varies ^{depending on} ~~in relation to~~ the duration of the new life situation---a 1-week continuing education seminar, a 3-week orientation for new employees, a 6-week summer camp experience, a 9-month academic year, a 2-year Peace Corps commitment, a 4-year college education.

Stafford-Clark (1949) provided an interesting parallel in the morale of flight crews in World War II:

Immediately after beginning a tour, there is a perceptible rise in morale; this is due to the feeling of accomplishment and maturity now that the long months of training are left behind, and to the novelty, excitement and interest of this

final stage of experience and adventure. By about the fifth sortie this surge in morale has begun to give place to the recognition ... of the formidable reality of the tour. This tends to continue, in some cases almost subconsciously, until by the twelfth or fifteenth sortie the man has reached the stage in which the full realization of the danger and unpleasantness of the job has been forced upon him while there stretches in front of him an ominously large succession of repeated sorties before he can achieve the honorable completion of his tour. Indeed, while seeming more desirable than ever before, this [completion of the tour of 30 sorties] now appears so remote as to be an unprofitable and almost impractical goal on which to pin his hopes. At this point, his chances of survival are bound to occupy his mind to a greater or less extent, depending upon his commitments, domestic situation, and temperament, and at this time they must appear at their lowest ebb.

... As his total of completed sorties mounts up (if he survives), the end of his tour gradually comes into the sphere of his permitted expectation and the average aircrew member looks forward to this with unconcealed eagerness.... As this prospect increases and his wisdom, experience and confidence deepen, his morale rises steadily. (pp. 19-20)

Everyone is aware of the approach of some predictable life events, such as entering a new educational experience or becoming independent in

adolescence, or retirement in later years. However, not everyone recognizes the predictable adjustment crises which occur in conjunction with these events. When the new life situation occurs unexpectedly, is unwanted, and involves a significant loss, the initial crisis is marked by low rather than high morale. (see Figure 2) Such an event reasonably prompts reactions of shock, numbness, disbelief, outcry and denial---phenomena described by observers of bereavement, death and dying, and stress response syndromes (see Table 1). These reactions reflect a first phase of the crisis of arrival. When the initial impact of the new situation can no longer be avoided, the second phase of this critical period is marked by searching, pining, anger and bargaining, denial and intrusive repetition in thought, emotions, and/or behavior. Paralleling the crisis of engagement are the stages of depression described by the observers of adaptation to other life events, that occur when individuals finally come to grips with the reality of their loss. The crisis of acceptance has been variously identified in these contexts as acceptance, restructuring, resolution, reorganization, and working through to completion. When the new situation has no clear end-point, there is no obvious fourth crisis (reentry); rather, as a general rule, the process will evolve over a two-year period as the individual develops a new sense of self.

Dynamic Formulation

As with any pattern of human behavior, there are exceptions to this formulation of adaptation and morale. These exceptions are determined by dynamic factors in the individual, particularly the striving for mastery and control of oneself and one's life, and the expressing of aggressive and libidinal drives.

The Crisis of Arrival

The struggle for persons in the crisis of arrival is to keep their bearings, and usually they either deny change or desperately look for something familiar to hang onto. The brain struggles to find something in the new experience that "computes" with past experience, which is easier when one has had the opportunity to plan for the change and to become familiar with it. When the capacity to master the change is threatened, the emotional response is anxiety.

Sociologist Peter Marris (1975) put the problem this way:

Since our ability to cope with life depends on making sense of what happens to us, anything which threatens to invalidate our conceptual structures of interpretation is profoundly disruptive.... The impulses of conservatism---to ignore or avoid events which do not match our understanding, to control deviation from expected behaviour, to isolate innovation and sustain the segregation of different aspects of life---are all means to defend our ability to make sense of life. (pp. 13-14)

The crisis of arrival parallels the phenomenon of "culture shock," which anthropologist George Foster (1962) characterized as

the anxiety that results from losing all one's familiar cues. These cues include the thousand and one ways in which we orient ourselves to the situations of daily life.... All of us

depend for our peace of mind and our efficiency on hundreds of cues, most of which we do not carry on a level of conscious awareness. When a person enters a strange culture, these cues are removed; a series of basic props have been knocked out, and frustration and anxiety follow. (p. 188)

During the crisis of arrival, there may be a considerable disruption in the usual outlets for expression of aggressive and libidinal energies. In the case of the Peace Corps volunteers, their work was often ill-defined and unfamiliar and thus did not provide the normal outlet for aggressive strivings. It is well known that successful and effective achievement at work is vital for maintaining and enhancing one's sense of self-esteem and feeling of mastery and control over life. Further, if isolated from the support of friends and family, the individual is cut off from a primary source of affirmative affection needed to counter the sense of potential inadequacy, reducing the opportunity to put the new situation in a larger perspective.

People in this crisis seek ways to control the anxiety provoked by the new situation, evident in the searching and pining of the bereaved identified by Parkes (1972), the anger and bargaining cited by Kubler-Ross (1969), and the denial and intrusiveness observed by Horowitz (1986). At the same time, they experience a persistent internal pressure/expectation that they should be able to master the new situation, and they become discouraged when the new reality persists in spite of their best efforts.

The dilemma of a Peace Corps volunteer assigned to work in Latin America community development exemplifies the struggle in the crisis of arrival. In that activity, the volunteer initially had no well defined work

task. He was expected to develop a project which mobilized the community and was frequently frustrated by the response of host country nationals who politely acknowledged ~~the~~ his proposals and pleas but did not respond. Meanwhile, the volunteer's sublimatory and compensatory recreational activity was limited, if at all present. Language differences limited social relationships; and the necessity to be a respectful guest constrained expressing any criticism or anger. Supportive family and friends were far removed. Yet the ego ideal ever reminded the volunteer that great things were expected of him.

The Crisis of Engagement

The crisis of engagement reflects the realization of the extent of losses---both real and imagined---in the new situation. It occurs at a time of isolation, and for various reasons the anger is internalized. That internalized anger, the sense of hopelessness and helplessness, and the pain of what has been lost all contribute to the emotional experience of depression. With regard to lost expectations, the degree of depression or drop in morale is a function of the disparity between the reality and expectations for the new situation. The closer the new life situation is to what was planned for and anticipated, the less the experienced "loss."

Bibring (1953) defined depression as "the emotional expression (indication) of a state of helplessness and powerlessness of the ego, irrespective of what may have caused the breakdown of the mechanisms which established his self-esteem" (p. 23). He suggested that depression results from the tension between highly charged narcissistic aspirations---the wish to be worthy, loved, appreciated, not inferior or unworthy; the wish to be strong, superior, great, secure, not weak and insecure; and the wish to be good, and loving, not

aggressive, hateful and destructive--and the ego's acute awareness of its real and imaginary helplessness and incapacity to live up to them.

The crisis of engagement involves coming to grips with a changed pattern of relationships. As Marris (1975) observed:

When a pattern of relationships is disrupted in any way for which we are not fully prepared, the thread of continuity in the interpretation of life becomes attenuated or altogether lost. The loss may fundamentally threaten the integrity of the structure of meanings on which this continuity rests, and cannot be acknowledged without distress. But if life is to go on, the continuity must somehow be restored. (p. 24)

The Crisis of Acceptance

The crisis of acceptance reflects the achievement of a new sense of self, with a restructuring of emotional forces and relationships. For most people, this restructuring represents a new equilibrium with greater freedom to vent their frustrations by words and actions, with improved sublimatory activity in work and play, and with stable support from family and friends. In persons who have experienced a significant loss or trauma, the scars of the experience may still be evident. In many cases, time does not heal the wound totally, but the intense affect and memory may be sufficiently dissociated to allow the individual to function effectively, free of limiting symptomatology.

The Crisis of Reentry

As noted previously, the fourth and final crisis occurs only when

there is a clear end point to the new situation, such as the conclusion of a time-limited educational or work commitment. The emotional tasks include working through separation from the experience, grieving that which one is giving up. In addition, there is the anticipation and planning for the next life experience. Experiences with no clear end point generally achieve some resolution after 2 years, with a new and strengthened sense of self.

Implications for Treatment and Prevention

In a study of persons who handled stress effectively, Kobasa (1979) noted that persons who have a greater sense of control over what occurs in their lives will remain healthier than those who feel powerless in the face of external forces. Part of that control is cognitive control, "the ability to interpret, appraise, and incorporate various sorts of stressful events into an ongoing life plan and, thereby, deactivate their jarring effects" (p. 3).

One of the approaches of preventive psychiatry is anticipatory guidance, which utilizes the healthy defense mechanism of anticipation to improve the capacity of the individual to adapt to a new life situation. Insofar as people can become familiar with future likelihoods and thus make unknowns known, they are more able to cope with these situations. Increased knowledge improves the human capacity to interpret and appraise events, and contributes to a sense of mastery that diminishes the anxiety provoked by the new situation. In this sense, being aware that adaptation to change is associated with a predictable pattern of morale and expectable periods of crisis, can increase the tolerance to that process. As a general rule, the objective is not to obviate the normal emotional reactions to the new life situation. Some anxiety is optimal in prompting adaptational behavior; some depression and grief work

are necessary to work through losses prompted by the change.

During critical periods, the goal is to help individuals put the situation in proper perspective and reduce the sense of isolation and helplessness that they may experience. Self-help groups with persons who are going or have gone through a similar experience can be beneficial. Distancing from the immediate crisis situation can likewise be helpful. For example, most employers do not grant annual leave until a new employee has been on the job for 6 months; ideally, the employee would benefit from time off 3 to 4 months into the new job, early in the crisis of engagement. However, taking a "vacation" may be counter-productive if the person feels completely undeserving of it. More beneficial may be a "working" vacation, with work-related activities or continuing education that enhance the coping skills of the individual at this stage.

It is important for victims of traumatic violence to regain a sense of control over their lives, and it is no less true for persons struggling with other life adjustment crises. As Kobasa found, "hardy" individuals are more in control, more committed, and more oriented to challenge. Successful support programs should foster opportunities for individuals to be in control of their lives, to be committed to some activity and to address the challenge in ways that permit sublimation of the conflictual feelings generated by the life change---through work, play and personal relationships.

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TABLE I

*The timeframes listed here are rough approximations for a two-year period, which was the actual duration of the Peace Corps experience but which has also been observed to be the general length of time for individuals to adapt to a significant life change which does not have a specific end point. In activities where there is a given end point, the sequence of crises is proportionately the same in relation to the duration of the commitment. For example, in a five-day seminar, the anxiety of arrival occurs on the first day; the crisis of engagement at some point toward the end of the second; the crisis of acceptance between the third and fourth; and the crisis of re-entry the last day. In an academic year of nine months, the crisis of arrival is in the first week of the new school year in the Fall; the crisis of engagement comes around the holiday season; the crisis of acceptance is in the early Spring; and the crisis of re-entry as the year comes to a close. In a full college career, there is the freshman anxiety, the sophomore slump, the junior activism, and the senior preparing to leave.

**The crisis of re-entry occurs where there is a clear end point to the experience. It may not be apparent in the adaptation to life experiences which do not have such a clear termination.

MORALE

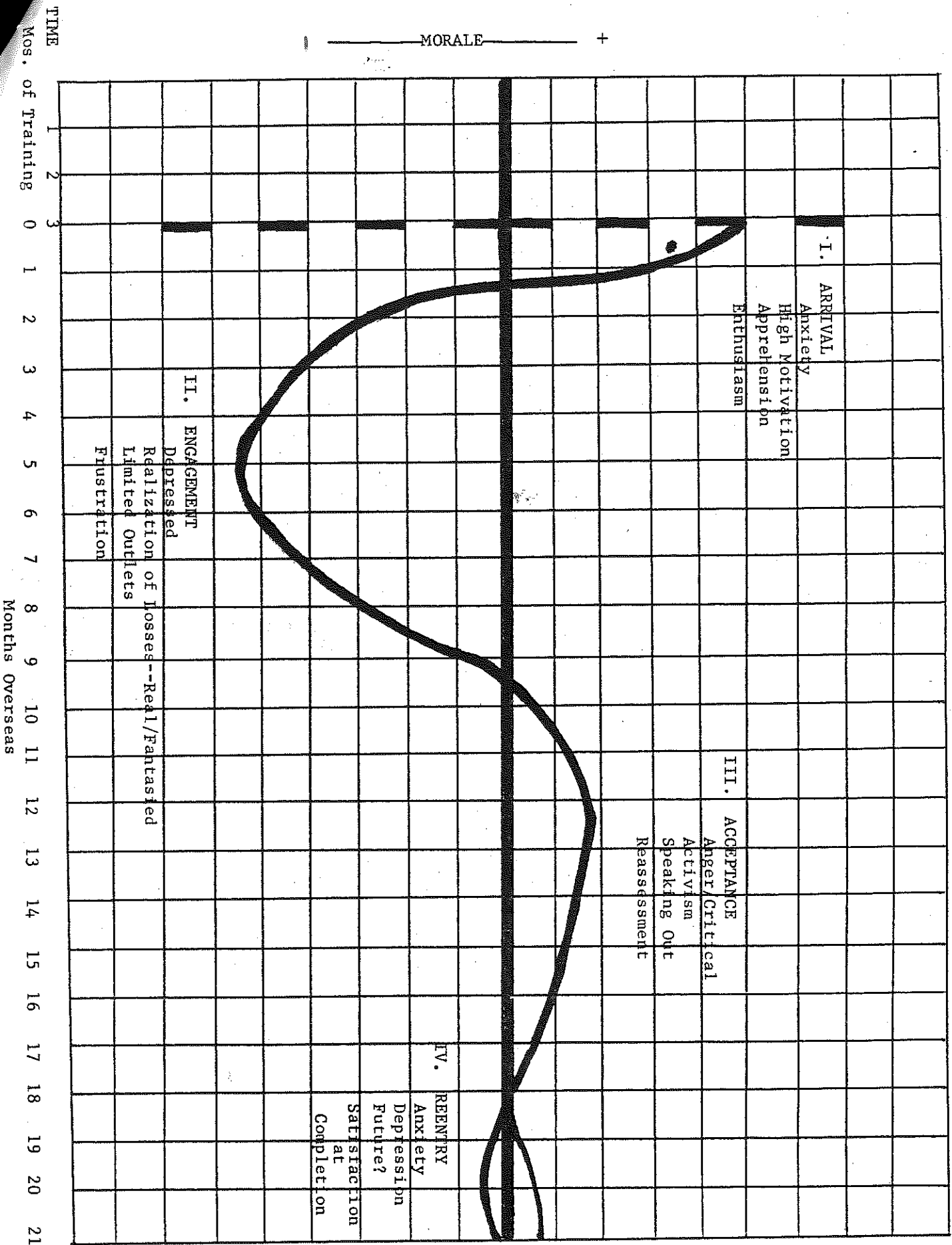


TABLE I--MORALE CURVE