

Psychoanalytic Schools Contribution of Freud
Degree Course (Three Years)
Psychology Honours
B. A. Part– II Honours Paper IV: Systems of Psychology
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Dr Sigmund Freud 1856-1939

- Oldest of eight children
- Married with 3 girls and 3 boys
- Physician-Biologist – Scientific oriented and Pathology oriented theory
- Jewish-anti-religion-All religion an illusion used to cope with feelings of infantile helplessness
- In Vienna Austria 78 years till 1938
- Based theory on personal experiences
- Died of cancer of jaw & mouth lifelong cigar chain-smoker

Freud's Psychoanalytic Approach:

- Model of personality development
- Philosophy of Human Nature
- Method of Psychotherapy
- Identified dynamic factors that motivate behavior
- Focused on role of unconscious
- Developed first therapeutic procedures for understanding & modifying structure of one's basic character

Determinism

- Freud's perspective
- Behavior is determined by
- Irrational forces
- Unconscious motivations
- Biological and instinctual drives as they evolve through the six psychosexual stages of life

Instincts

- Libido – sexual energy – survival of the individual and human race-oriented towards growth, development & creativity – Pleasure principle – goal of life gain pleasure and avoid pain

- Death instinct – accounts for aggressive drive – to die or to hurt themselves or others
- Sex and aggressive drives-powerful determinants of peoples actions

The Structure of Personality

■THE ID — The Demanding Child

- Ruled by the pleasure principle

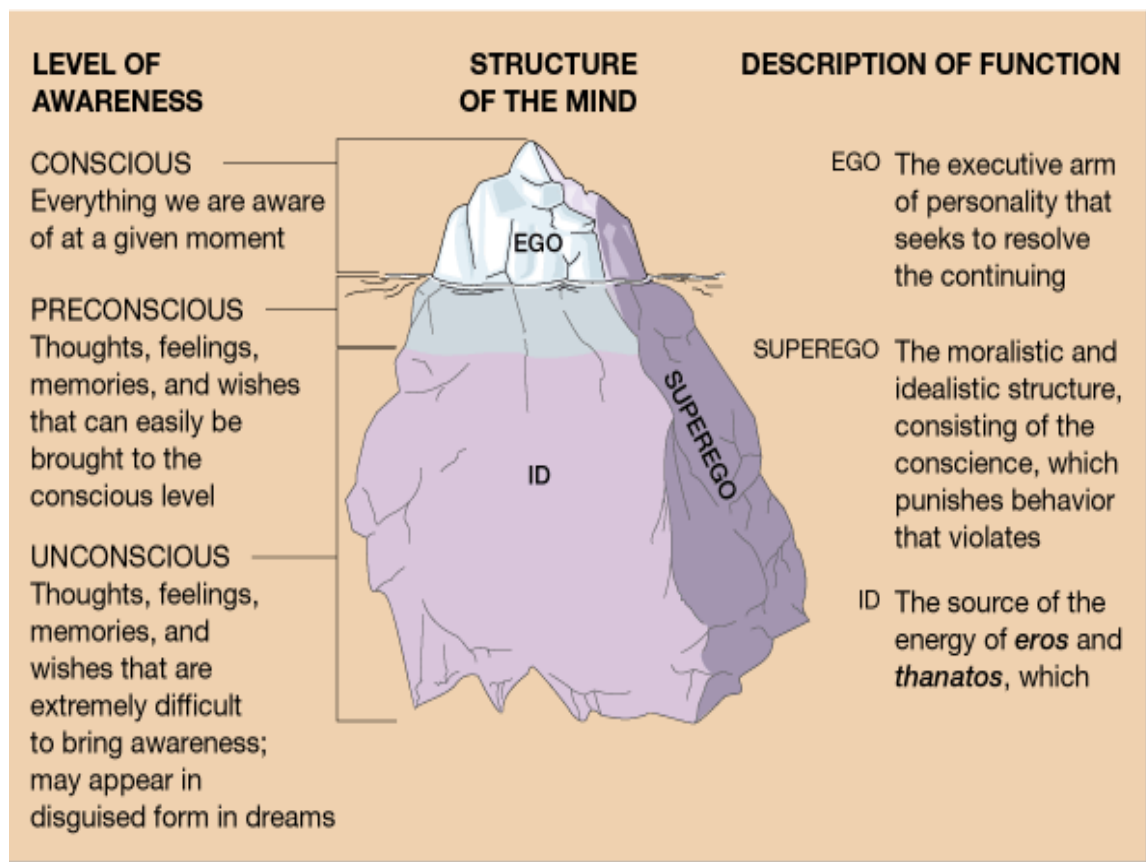
■THE EGO — The Traffic Cop

- Ruled by the reality principle

■THE SUPEREGO — The Judge

- Ruled by the moral principle

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Id

- Basic psychic energy and motivations
- Operates to demands of ***Pleasure Principle*** - strive to satisfy desires and reduce inner tension
- Sea around an Island

Ego

- Deals with real world

- Operates to demands of **Reality Principle** solves problems by planning & acting
- City Hall on island roots and foundation in sea - id

Superego

- Internalized social norm & moral forces pressing on and constraining individual action
- The “over-I” over ego
- Church on island roots and foundation in sea - id

Psychosexual Theory of Development

- Five Stages of Development
- Oral Stage
- Anal Stage
- Phallic Stage
- Latency Period
- Genital Stage

STUDY CHART

Freud's Stages of Psychosexual Development

Stage	Approximate Ages	Erogenous Zones	Major Characteristics
Oral	Birth to about 18 months	Mouth	Focus on oral gratification from sucking, chewing, eating, and biting
Anal	End of oral stage to 3 years	Anus	Gratification from holding and expelling feces at the time when these desires for gratification must meet societal demands to control the the bladder and bowels (toilet training)
Phallic	End of anal stage to about 6 years	Genitals	Gratification focused on manipulation of genitals; development of sexual interest in the parent of opposite biological sex
Latency	End of phallic stage	None	Sexual desires not of paramount importance
Genital	Adolescence to adulthood	Genitals	Resurgence of sexual interests; focus on mature sexual adulthood relationships

The Development of Personality

- ORAL STAGE (First year)
- Related to later mistrust and rejection issues
- ANAL STAGE (Ages 2-4)
- Related to later personal power issues
- PHALLIC STAGE (Ages 4-6)

- Related to later sexual attitudes

- LATENCY STAGE (Ages 5-11)

- A time of socialization

- GENITAL STAGE (Ages 12-60)

- Sexual energies are invested in life

Oral Stage: Birth to 2 year

- Satisfy drive of hunger and thirst by breast or bottle

- If fixated after weaned:

- Over Dependency

- Over Attachment

- “Intake” of interesting substances/ideas

Anal Stage: 2- 4 years

- Id wants pleasure of reducing tension by defecating & urinating

- Toilet training – get superego to impose societal norms

- Self-control

- Holding back

- Freedom of action no control

Fixated at Anal Stage

- Enjoy bathroom humor-making messes-even of other people’s lives

- Neatness, order & organization and Obstinance & Stinginess – Anal retentive- passive aggressive

Phallic Stage: 4 – 6 years

- Sexual energy focused on genitals

- Masturbation

- Differences between boys and girls

- Emerging sexual gender identity

- Personality fixed by end of this stage

Oedipus Complex

- A boy’s sexual feeling for his mother and rivalries with his father

- Psychological defenses against these threatening thoughts and feelings

- Form reaction pattern used throughout life

- Form personality through identification with father

- Diminish fear of castration-vicariously obtain mother through father

Castration Anxiety

- Unconscious fear of loss of penis and becoming like a female

- Fear of powerful people overcoming them

- Fear of revenge of the powerful people

Penis Envy

- A girl’s feelings of inferiority and jealousy

- Turns affections from mother to father since blame mom for no penis

- Although can’t have penis can have baby

- Wants to find a good man like her father and produce a baby

Latency Period: 5-11 years of age

- Time between resolution of Oedipus complex and puberty
- Usually not possible for sexual urges to be directly expressed
- Sexual energies are channeled into school and friends

Genital Stage Adolescence - Adulthood

- Normal sexual relations
- Marriage
- Child-rearing

Ego-Defense Mechanisms

- Ego-defense mechanisms:
- Are normal behaviors which operate on an unconscious level and tend to deny or distort reality
- Help the individual cope with anxiety and prevent the ego from being overwhelmed
- Have adaptive value if they do not become a style of life to avoid facing reality

Defense Mechanisms

- To protect the ego against the painful and threatening impulses arising from the id we distort the reality
- The processes that distort the reality for the ego are called defense mechanisms

Types of Defense Mechanisms

- Repression
- Reaction Formation
- Denial
- Projection
- Displacement
- Sublimation
- Regression
- Rationalization

TABLE 12-5 Defense Mechanisms

Defense mechanisms protect the ego by distorting or otherwise altering reality. Although everyone uses defense mechanisms, excessive use of them is considered a sign of abnormality.

DEFENSE MECHANISM	DESCRIPTIONS	EXAMPLES
Denial	Refusing to acknowledge an undesirable experience, memory, or internal need that is anxiety-arousing and behaving as if it did not exist.	A physician tells a parent that her son has terminal cancer. Despite overwhelming evidence that the cancer is not treatable, the parent remains convinced that the child will recover.
Displacement	Shifting feelings from one object to a substitute that is not as gratifying but is less anxiety-arousing.	You want to retaliate against your boss for something she said to you during a performance evaluation. The ego, being relatively wise and in contact with reality, recognizes that such a course of action would be ill-advised. Later in the day, you find yourself yelling at the grocery clerk, cutting off other drivers on the way home, and hanging up on callers soliciting funds for a local charity. Each of these innocent bystanders is a safer outlet for aggression than your boss and hence is less threatening to the ego.

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DEFENSE MECHANISM	DESCRIPTIONS	EXAMPLES
Reaction formation	Defending against unacceptable feelings and behavior by exhibiting the opposite of one's true wishes or impulses.	A person may be attracted to pornographic material (Id) yet be repulsed by the thought of such material (superego). Such a person may become involved in a censorship campaign that places him or her in the position of having to review pornographic material.
Regression	Returning to forms of behavior that are indicative of an earlier level of development such as childhood (usually in response to an overwhelming stressor).	An adult has a temper tantrum (a common behavior of 3- or 4-year-olds).
Sublimation	A form of displacement in which a sexual or aggressive impulse is moved from an unacceptable object to one that is acceptable and ultimately has value to society.	A typical example of sublimation involves the direction of sexual energy toward the creation of works of art. Another example involves turning aggressive energy toward socially desirable goals such as surgery to save lives, rather than harming others.

Repression

- Pushes threatening thoughts back into the unconscious
- Posttraumatic Stress Disorder- PTSD – Common with veterans and victims of sexual abuse
- False memories – suggested through psychotherapist intentionally or unintentionally

Reaction Formation

- Process of pushing away threatening impulses by overemphasizing the opposite in one's thoughts and actions
- Examples: Jim Bakker & Jimmy Swaggart

Denial

- Refusing to acknowledge anxiety-provoking stimuli
- Mind's means of keeping its own sensations out of conscious awareness
- Or
- That fabulous river which runs down the middle of Egypt which many of us sail on

Projection

- Anxiety-arousing impulses are externalized by placing them, or projecting them, onto others.
- A person's inner threats are attributed to those around them
- Newt Gingrich: public diatribe against infidelity of president while engaged in own long term infidelity out of public eye

Displacement

- The shifting of the targets of one's unconscious fears or desires

■Hydraulic Replacement Model

■Some release valve must be found for the bottled-up aggressive impulses triggered by frustration and humiliation

■Example: Man angry at boss kicks dog, kids

■*Tools for Anger Workout*-www.coping.org

Sublimation

■Transforming of dangerous urges into positive, socially acceptable motivation

■Turns sexual energy away from sexual ends and towards societal goals

■It is possible that as society becomes more sexually liberated, art, creativity and even civilization will suffer?

Regression

■Returning to earlier, safer stages of our lives

■There may be regression to the stage where there was previous fixation

Rationalization

■A mechanism involving post hoc logical explanations for behaviors that were actually driven by internal unconscious motives

■Explanation for behavior not even remotely related to the true causes

What is the Unconscious

■That portion of the mind inaccessible to usual, conscious thought

■Get to unconscious through **Free Association**: spontaneous free flowing associations of ideas and feelings

The Unconscious

■Clinical evidence for postulating the unconscious:

■Dreams

■Slips of the tongue

■Posthypnotic suggestions

■Material derived from free-association

■Material derived from projective techniques

■Symbolic content of psychotic symptoms

■NOTE: consciousness is only a thin slice of the total mind

Dream Interpretation

■Manifest Content: what a person remembers and consciously considers-only a partial representation

■Latent Content: underlying hidden meaning-vast underlying

■Unconscious can manifest itself symbolically in a dream

Dream Interpretation

■“Royal road to the unconscious”

■What is important in dreams is the infantile wish fulfillment represented in them

■Freud assumed every dream has a meaning that can be interpreted by decoding representations of the unconscious material

■Dream symbol = represents some person, thing, or activity involved in the unconscious process

Dream Interpretations

■Knife, umbrella, snake = Penis

- Box, oven, ship = Uterus
- Room, table with food = Women
- Staircase, ladder = Sexual intercourse
- Water = Birth, mother
- Baldness, tooth removal = castration
- Left (direction) = crime, sexual deviation
- Children playing = masturbation
- Fire = bedwetting
- Robber = father
- Falling = anxiety

Freudian Slip

- Psychological error in speaking or writing
- Evidence of some unconscious urge, desire, or conflict & struggle
- When ego or superego are not doing their job properly elements of id slip out or are seen

Memory

- Fact: every person experiences every event from a unique, individual perspective that depends on a person's needs, goals, assumptions and other experiences
- Fact: individualized memory is a complex, multifaceted, constantly changing representation -What is reported about the event varies tremendously with the circumstances under which the memory is probed

Hypermnnesia

- “Excessive memory” situation in which a later attempt to remember something yields information that was not reportable on an earlier attempt to remember.
- Memory flooding

Infantile Amnesia

- Most adults cannot remember much of what happened to them before age three or four
- Adults cannot remember any things be they traumatic or not
- Still not clear why

Subliminal Perception

- Very weak stimuli could be perceived and processed without conscious awareness of such stimulus having occurred.
- Not consciously aware of stimuli that are nevertheless being processed by some parts of our brain

Explicit vs Implicit Memory

- Explicit memory: can recall or recognize something
- Implicit memory: change how think or behave as a result of some experience that do not consciously recall

Procedural Memory vs Declarative Memory

- Representation of the skill itself can be present in memory even in the absence of conscious memory for the event during which the skill was acquired.
- Procedural: Memory for how to do the task
- Declarative: Memory for facts about a task or event

Psychoanalytic Techniques

- Free Association
- Client reports immediately without censoring any feelings or thoughts
- Interpretation
- Therapist points out, explains, and teaches the meanings of whatever is revealed
- Dream Analysis
- Therapist uses the “royal road to the unconscious” to bring unconscious material to light
- Transference and Countertransference
- Transference
- The client reacts to the therapist as he did to an earlier significant other
- This allows the client to experience feelings that would otherwise be inaccessible
- ANALYSIS OF TRANSFERENCE — allows the client to achieve insight into the influence of the past
- Countertransference
- The reaction of the therapist toward the client that may interfere with objectivity
- Resistance
- Resistance
- Anything that works against the progress of therapy and prevents the production of unconscious material
- Analysis of Resistance
- Helps the client to see that canceling appointments, fleeing from therapy prematurely, etc., are ways of defending against anxiety
- These acts interfere with ability to accept changes which could lead to more satisfying life

Contributions of Freud

- First personality & psychotherapy theory
- Emphasis on sexuality as influence
- Importance of early childhood experience
- Concept of unconscious
- Emphasis on Helper Role in therapeutic relationship
- Scientific approach to mental health on continuum from physical health

Limitations of Freud's Work

- Pessimistic and deterministic approach to personality
- Pathology based theory
- Hydraulic model of psychic energy exaggerated
- No controlled studies-poor research
- Overemphasis on differences between men and women
- Unconcerned with interpersonal relations, individual identity and adaptation over one's lifetime