

Chapter 2

Freud: Psychoanalysis

Learning Objectives

After reading this chapter, the students should be able to accomplish the following objectives:

1. Describe how Freud's childhood experiences may have influenced his theory of personality.
2. Discuss whether Freud was scientific in his writings.
3. Describe the three provinces of the mind, and explain how they relate to the three levels of mental life.
4. Explain Freud's concept of the sexual and aggressive instincts.
5. Identify the three types of anxiety, and discuss how they relate to the provinces of the mind.
6. List the Freudian defense mechanisms, and give examples of each.
7. Summarize the psychosexual stages of development and their possible effects on personality development.
8. Trace the development of the Oedipus complex for boys and girls.
9. Explain the significance of Freud's abandonment of the seduction theory.
10. Describe Freud's concept of dreams.
11. Discuss Freud's understanding or misunderstanding of women.
12. Explain why Freud was or was not a scientist.

Lecture Outline

I. Overview of Psychoanalytic Theory

Freud's **psychoanalysis** is the best known of all personality theories because (1) it postulated the primacy of sex and aggression, two universally popular themes; (2) it attracted a group of early followers who were dedicated to spreading the psychoanalytic doctrine; and (3) Freud's brilliant command of language enabled him to present his theories in a stimulating and exciting manner.

II. Biography of Sigmund Freud

To understand Freud's theory of personality, one must know something about his early childhood, including his relationship with his mother, father, and two older half-brothers. Although he was born in the Czech Republic in 1856 and died in London in 1939, Freud spent nearly 80 years of his life in Vienna. A physician who never intended to practice general medicine, Freud was intensely curious about human nature.

He entered the University of Vienna Medical School with no intention of practicing medicine. Instead, he preferred teaching and doing research in physiology, which he continued even after he graduated from the university's Physiological Institute. In 1885, he received a traveling grant from the University of Vienna and decided to study in Paris with the famous French neurologist Jean-Martin Charcot. He spent 4 months with Charcot, from whom he learned the hypnotic technique for treating **hysteria**, a disorder typically characterized by paralysis or the improper functioning of certain parts of the body.

While still a medical student, Freud developed a close professional association and a personal friendship with Josef Breuer, a well-known Viennese physician 14 years older than Freud and a man of considerable scientific reputation (Ferris, 1997). Breuer taught Freud about **catharsis**, the process of removing hysterical symptoms through "talking them out."

But in 1897, he abandoned his seduction theory and replaced it with his notion of the Oedipus complex. Some scholars have contended that Freud's decision to abandon the seduction theory in favor of the Oedipus complex was a major error and influenced a generation of psychotherapists to interpret patients' reports of early sexual abuse as merely childhood fantasies.

Freud's official biographer, Ernest Jones (1953, 1955, 1957), believed that Freud suffered from a severe psychoneurosis during the late 1890s, although Max Schur (1972), Freud's personal physician during the final decade of his life, contended that his illness was due to a cardiac lesion, aggravated by addiction to nicotine. Peter Gay (1988) suggested that during the time immediately after his father's death, Freud "relived his oedipal conflicts with peculiar ferocity" (p. 141). But Henri Ellenberger (1970) described this period in Freud's life as a time of "creative illness," a condition characterized by depression, **neurosis**, psychosomatic ailments, and an intense preoccupation with some form of creative activity. In any event, at midlife, Freud was suffering from self-doubts, depression, and an **obsession** with his own death.

III. Levels of Mental Life

According to Freud, mental life is divided into two levels, the **unconscious** and the **conscious**. The unconscious, in turn, has two different levels, the unconscious proper and the **preconscious**.

A. Unconscious

The unconscious consists of drives and instincts that are beyond awareness, yet they motivate many of people's behaviors. Unconscious drives can become conscious only in disguised or distorted form, such as dream images, slips of the tongue, or certain kinds of forgetting called *repression*. Punishment and **suppression** often create feelings of anxiety, and the anxiety in turn stimulates **repression**, that is, the forcing of unwanted, anxiety-ridden experiences into the

unconscious as a defense against the pain of that anxiety.

Not all unconscious processes, however, spring from repression of childhood events. Freud believed that a portion of people's unconscious originates from the experiences of their early ancestors that have been passed on to them through hundreds of generations of repetition. He called these inherited unconscious images one's **phylogenetic endowment** (Freud, 1917/1963, 1933/1964).

B. Preconscious

The preconscious contains images that are not in awareness but that can become conscious either quite easily or with some level of difficulty. The contents of the preconscious come from two sources, the first of which is conscious perception. The second source of preconscious images is the unconscious. Experiences that are forgotten are in the preconscious.

C. Conscious

Consciousness is the only level of mental life directly available to us, but it plays a relatively minor role in psychoanalytic theory. Conscious ideas stem from either the perception of external stimuli; that is, one's **perceptual conscious** system, or from unconscious and preconscious images after they have evaded censorship.

IV. Provinces of the Mind

To Freud, the most primitive part of the mind was *das Es*, or the "it," which is almost always translated into English as **id**; a second division was *das Ich*, or the "I," translated as **ego**; and a final province was *das Uber-Ich*, or the "over-I," which is rendered into English as **superego**.

A. The Id

The id, which is completely unconscious, serves the **pleasure principle** and seeks constant and immediate satisfaction of instinctual needs. As the region of the mind that contains the basic instincts, the id operates through the **primary process**. Because it blindly seeks to satisfy the pleasure principle, its survival is dependent on the development of a **secondary process** to bring it into contact with the external world. This secondary process functions through the ego.

B. The Ego

The ego, or I, is the only region of the mind in contact with reality. It grows out of the id during infancy and becomes a person's sole source of communication with the external world. It is

governed by the **reality principle**, which it tries to substitute for the pleasure principle of the id. As the sole region of the mind in contact with the external world, the ego becomes the decision-making or executive branch of personality.

C. The Superego

In Freudian psychology, the superego, or above-I, represents the moral and ideal aspects of personality and is guided by the **moralistic** and **idealistic principles** as opposed to the pleasure principle of the id and the realistic principle of the ego.

The superego has two subsystems, the **conscience** and the **ego-ideal**. Freud did not clearly distinguish between these two functions, but, in general, the conscience results from experiences with punishments for improper behavior and tells people what they *should not do*, whereas the ego-ideal develops from experiences with rewards for proper behavior and tells people what they *should do*.

V. Dynamics of Personality

The term dynamics of personality refers to those forces that motivate people. To Freud, people are motivated to seek pleasure and to reduce tension and anxiety. This motivation is derived from psychological and physical energy that springs from their basic drives.

A. Drives

Freud used the German word *Trieb* to refer to a drive or a stimulus within the person. According to Freud (1933/1964), the various drives can all be grouped under two major headings: sex or Eros and aggression, distraction, or Thanatos. Each drive has its own form of psychic energy: Freud used the word **libido** for the sex drive, but energy from the aggressive drive remains nameless.

The aim of the sexual drive is to seek pleasure, which can be gained through the **erogenous** zones, especially the mouth, anus, and genitals. The ultimate aim of the sexual drive (reduction of sexual tension) cannot be changed, but the path by which the aim is reached can be varied. Both the aim and the object are flexible, so that many sexually-motivated behaviors may seem to be unrelated to sex. For example, narcissism, love, sadism, and masochism all possess large components of the sexual drive even though they may appear to be nonsexual.

Infants are primarily self-centered, with their libido invested almost exclusively on their own ego. This condition, which is universal, is known as **primary narcissism**. During puberty, however, adolescents often redirect their libido back to the ego and become preoccupied with personal appearance and other self-interests. This pronounced **secondary narcissism** is not universal, but a

moderate degree of self-love is common to nearly everyone (Freud, 1914/1957). **Sadism** is the reception of sexual pleasure from inflicting pain on another. **Masochism** is the reception of sexual pleasure from painful experiences, satisfies both sexual and aggressive drives.

Partially as a result of his unhappy experiences during World War I and partially as a consequence of the death of his beloved daughter Sophie, Freud (1920/1955a) wrote *Beyond the Pleasure Principle*, a book that elevated **aggression** to the level of the sexual drive. The aim of the destructive drive, according to Freud, is to return the organism to an inorganic state. The aggressive drive also explains the need for the barriers that people have erected to check aggression.

B. Anxiety

Sex and aggression share the center of Freudian dynamic theory with the concept of **anxiety**. **Neurotic anxiety** is apprehension about an unknown danger and stems from the ego's relation with the id. **Moral anxiety** is similar to guilt and results from the ego's relation with the superego. **Realistic anxiety** is closely related to fear and it is defined as an unpleasant, nonspecific feeling involving a possible danger.

VI. Defense Mechanisms

Freud first elaborated on the idea of **defense mechanisms** in 1926 (Freud, 1926/1959a), and his daughter Anna further refined and organized the concept (A. Freud, 1946). The principal defense mechanisms identified by Freud include repression, reaction formation, displacement, fixation, regression, projection, introjection, and sublimation.

A. Repression

The most basic defense mechanism, because it is involved in each of the others, is *repression*. Whenever the ego is threatened by undesirable id impulses, it protects itself by repressing those impulses; that is, it forces threatening feelings into the unconscious (Freud, 1926/1959a). Many repressed experiences remain unconscious for a lifetime but others become conscious in a disguised form.

B. Reaction Formation

One of the ways in which a repressed impulse may become conscious is through adopting a disguise that is directly opposite its original form. This defense mechanism is called a **reaction formation**. An example of a reaction formation can be seen in a young woman who deeply resents and hates her mother. Because she knows that society demands affection toward parents, such

conscious hatred for her mother would produce too much anxiety. To avoid painful anxiety, the young woman concentrates on the opposite impulse—love.

C. Displacement

Displacement is the redirecting of unacceptable urges and feelings onto people and objects in order to disguise or conceal their true nature. For example, a woman who is angry at her roommate may displace her anger onto her employees, her pet cat, or a stuffed animal.

D. Fixation

Psychical growth normally proceeds in a somewhat continuous fashion through the various stages of development. The process of psychologically growing up, however, is not without stressful and anxious moments. When the prospect of taking the next step becomes too anxiety provoking, the ego may resort to the strategy of remaining at the present, more comfortable psychological stage. Such a defense is called **fixation**.

E. Regression

Once the libido has passed a developmental stage, it may, during times of stress and anxiety, revert back to that earlier stage. Such a reversion is known as **regression** (Freud, 1917/1963).

F. Projection

Projection can be defined as seeing in others those unacceptable feelings or behaviors that actually reside in one's own unconscious (Freud, 1915/1957b). When carried to extreme, projection can become **paranoia**, which is characterized by delusions of jealousy and persecution.

G. Introjection

Whereas projection involves placing an unwanted impulse onto an external object, **introjection** is a defense mechanism whereby people incorporate positive qualities of another person into their own ego. Hero worship might be a good example.

H. Sublimation

Sublimation is the repression of the genital aim of Eros by substituting a cultural or social aim. The sublimated aim is expressed most obviously in creative cultural accomplishments such as art, music, and literature, but more subtly, it is part of all human relationships and all social pursuits.

VII. Stages of Development

Although Freud had little firsthand experience with children (including his own), his developmental theory is almost exclusively a discussion of early childhood. To Freud, the first 4 or 5 years of life, or the **infantile stage**, are the most crucial for personality formation. This stage is followed by a 6- or 7-year period of **latency** during which time little or no sexual growth takes place. Then at puberty, a renaissance of sexual life occurs, and the **genital stage** is ushered in. Psychosexual development eventually culminates in **maturity**.

A. Infantile period

The infantile stage encompasses the first 4 to 5 years of life and is divided into the following three subphases:

- Oral phase: During the **oral phase**, an infant is primarily motivated to receive pleasure through the mouth. Weaning is the principal source of frustration during this stage.
- Anal phase: The **anal phase** occurs at about the second year of life, when toilet training is the child's chief source of frustration. If parents use punitive training methods, a child may develop the **anal triad** of *orderliness*, *stinginess*, and *obstinacy*, all of which mark the **anal character**. However, most children escape the detrimental effects of this stage.
- Phallic phase: During the **phallic phase**, boys and girls begin to have differing psychosexual development, which occurs around 3 or 4 years of age. For both genders, suppression of masturbation is the principle source of frustration. At this time, young children experience the **Oedipus complex** in which they have sexual feelings for one parent and hostile feelings for the other. The male **castration complex**, which takes the form of **castration anxiety** or fear of losing the penis, breaks up the male Oedipus complex and results in a well-formed male superego. For girls, however, the castration complex, in the form of **penis envy**, precedes the female Oedipus complex, a situation that leads to only a gradual and incomplete shattering of the female Oedipus complex and a weaker, more flexible female superego.

B. Latency Period

Freud believed that psychosexual development goes through a latency stage—from about age 5 until puberty—in which the sexual instinct is partially suppressed.

C. Genital Period

The genital period begins with puberty when adolescents experience a reawakening of the genital aim of Eros, and it continues throughout adulthood.

D. Maturity

Freud hinted at a stage of psychological maturity in which the ego would be in control of the id and superego and consciousness would play a more important role in behavior.

VIII. Applications of Psychoanalytic Theory

Freud was an innovative speculator, probably more concerned with theory building than with treating sick people. He spent much of his time conducting therapy not only to help patients but to gain the insight into human personality necessary to expound psychoanalytic theory.

A. Freud's Early Therapeutic Technique

During his early years as a therapist, Freud used a very aggressive technique whereby he strongly suggested to patients that they had been sexually seduced as children. He later abandoned this technique, along with his belief that most patients had been seduced during childhood.

B. Freud's Later Therapeutic Technique

Beginning in the late 1890s, Freud adopted a much more passive type of psychotherapy, one that relied heavily on free association, dream interpretation, and transference. The goal of Freud's later psychotherapy was to uncover repressed memories, and the therapist uses dream analysis and **free association** to do so. With free association, patients are required to say whatever comes to mind, no matter how irrelevant or distasteful. Successful therapy rests on the patient's **transference** of childhood sexual or aggressive feelings onto the therapist and away from symptom formation. Positive transference permits patients to more or less relive childhood experiences within the nonthreatening climate of the analytic treatment. However, **negative transference** in the form of hostility must be recognized by the therapist and explained to patients so that they can overcome any **resistance** to treatment (Freud, 1905/1953a, 1917/1963).

Freud (1933/1964) noted several limitations of psychoanalytic treatment. First, not all old memories can or should be brought into consciousness. Second, treatment is not as effective with **psychoses** or with constitutional illnesses as it is with phobias, hysterias, and obsessions. A third limitation, by no means peculiar to psychoanalysis, is that a patient, once cured, may later develop another psychic problem. Recognizing these limitations, Freud felt that psychoanalysis could be used in conjunction with other therapies. However, he repeatedly insisted that it could not be shortened or modified in any essential way.

C. Dream Analysis

Freud used **dream analysis** to transform the manifest content of dreams to the more important latent content. The **manifest content** of a dream is the surface meaning or the conscious description given by the dreamer, whereas the **latent content** refers to its unconscious material.

The basic assumption of Freud's dream analysis is that nearly all dreams are *wish fulfillments*. Some wishes are obvious and are expressed through the manifest content, as when a person goes to sleep hungry and dreams of eating large quantities of delicious food. Most wish fulfillments, however, are expressed in the latent content and only dream interpretation can uncover that wish. An exception to the rule that dreams are wish fulfillments is found in patients suffering from a traumatic experience. Dreams of these people follow the principle of **repetition compulsion** rather than wish fulfillment. These dreams are frequently found in people with **posttraumatic stress disorder** who repeatedly dream of frightening or traumatic experiences (Freud, 1920/1955a, 1933/1964).

D. Freudian Slips

Freud believed that slips of the tongue or pen, misreading, incorrect hearing, misplacing of objects, and temporarily forgetting of names or intentions are not chance accidents but reveal a person's unconscious intentions. In writing of these faulty acts, Freud (1901/1960) used the German *Fehlleistung*, or "faulty function," but James Strachey, one of Freud's translators, invented the term **parapraxes** to refer to what many people now simply call "Freudian slips."

IX. Related Research

In recent years, many researchers have investigated hypotheses inspired by psychoanalytic theory. This research includes such topics as (1) unconscious mental processing, (2) pleasure and the id: inhibition and the ego, (3) the defense mechanisms, and (4) dreams.

A. Unconscious Mental Processing

Many scientists and philosophers have recognized two different forms of consciousness. First is the state of not being aware or awake, and second is the state of being aware. The former is referred to as "core consciousness," whereas the latter is referred to as "extended consciousness." The brain stem, and the ascending activating system in particular, is the part of the brain most directly associated with core consciousness, or unconsciousness in the sense of not being awake.

For instance, comas come from damage to this region of the brain stem and render a person unconscious. In contrast, being aware and able to reflect on one's knowledge and self is more a function of activity in the prefrontal cortex (the dorsal frontal cortex) (Solms, 2004; Solms and Turnbull, 2002).

Moreover, a major theme of cognitive psychology over the last 20 years has been the phenomenon of nonconscious mental processing, or what is referred to as “implicit,” “nonconscious,” or “automatic” thought and memory (Bargh and Chartrand, 1999; Schacter, 1987).

B. Pleasure and the Id, Inhibition and the Ego

Findings from many different neuroscientific programs of research have established that the pleasure-seeking drives have their neurological origins in two brain structures, namely the brain stem and the limbic system (Solms, 2004; Solms and Panksepp, 2012; Solms and Turnbull, 2002). Moreover, the neurotransmitter dopamine is most centrally involved in most pleasure-seeking behaviors. In Freud’s language, these are the drives and instincts of the id.

C. Repression, Inhibition, and Defense Mechanisms

Some research on defense mechanisms has focused on projection and identification in childhood and adolescence (Cramer, 2007), while some has investigated targets of projection (Govorun, Fuegen, and Payne, 2006). Solms (2004) reported cases from the neuropsychological literature demonstrating repression of information when damage occurs to the right-hemisphere and if this damaged region becomes artificially stimulated, the repression goes away; that is, awareness returns.

The first study to report on the neurophysiological underpinnings of repression is by Howard Shevrin et al (Shevrin, Ghannam, and Libet, 2002). They found that the more repressive style people have, the longer it takes them to perceive a stimulus consciously. This finding is a first step in showing how repression may operate to keep things unconscious.

D. Research on Dreams

Research by Wegner and colleagues (Wegner, Wenzlaff, and Kozak, 2004) tested Freud’s hypothesis that wishes repressed during the day will find their way into dreams during the night. Results showed that people dreamed more about their repressed targets than their non-repressed ones; that is, they were more likely to dream about people they spend some time thinking about, a finding quite consistent with Freud’s hypothesis.

Other studies show that exposure to nightmare content and imaginary modification of bad dream storylines reduces nightmares (Hansen et al., 2013). Consistent with Freud’s theorizing, then, and particularly relevant to nightmares, this line of research suggests that concentrating on and then actively avoiding or trying to suppress negative thoughts lends itself to rebound in dreams, which are likely to take on a distressing and even recurring quality.

X. Critique of Freud

In criticizing Freud, one must first ask two questions: (1) Did Freud understand women, gender, and sexuality? (2) Was Freud a scientist?

A. Did Freud Understand Women, Gender, and Sexuality?

A frequent criticism of Freud is that he did not understand women and that his theory of personality was strongly oriented toward men. There is a large measure of truth to this criticism, and Freud acknowledged that he lacked a complete understanding of the female psyche.

Like many other men of his day, Freud regarded women as the “tender sex,” suitable for caring for the household and nurturing children but not equal to men in scientific and scholarly affairs. Freud continually grappled with trying to understand women, and his views on femininity changed several times during his lifetime.

During the early years of his career, Freud viewed male and female psychosexual growth as mirror images of each other, with different but parallel lines of development. However, he later proposed the notion that little girls are failed boys and that adult women are akin to castrated men. Freud originally proposed these ideas tentatively, but as time passed, he defended them adamantly and refused to compromise his views.

B. Was Freud a Scientist?

Although he repeatedly insisted that he was primarily a scientist and that psychoanalysis was a science, Freud’s definition of science needs some explanation. When he called psychoanalysis a science, he was attempting to separate it from a philosophy or an ideology. He was not claiming that it was a natural science.

Despite serious difficulties in testing Freud’s assumptions, researchers have conducted studies that relate either directly or indirectly to psychoanalytic theory. Thus, one can rate Freudian theory about average in its ability to *generate research*. A useful theory should be *falsifiable*. Because much of the research evidence consistent with Freud’s ideas can also be explained by other models, Freudian theory is nearly impossible to falsify.

Another criterion of any useful theory is its ability to *organize knowledge* into a meaningful framework. Unfortunately, the framework of Freud’s personality theory, with its emphasis on the unconscious, is so loose and flexible that seemingly inconsistent data can coexist within its

boundaries. Compared with other theories of personality, psychoanalysis ventures more answers to questions concerning why people behave as they do. But only some of these answers come from scientific investigations—most are simply logical extensions of Freud's basic assumptions.

A useful theory should serve as *a guide for the solution of practical problems*. Because Freudian theory is unusually comprehensive, many psychoanalytically trained practitioners rely on it to find solutions to practical day-to-day problems. However, psychoanalysis no longer dominates the field of psychotherapy, and most present-day therapists use other theoretical orientations in their practice.

A useful theory deals with *internal consistency*, including operationally defined terms. Psychoanalysis is an internally consistent theory, if one remembers that Freud wrote over a period of more than 40 years and gradually altered the meaning of some concepts during that time. However, at any single point in time, the theory generally possessed internal consistency, although some specific terms were used with less than scientific rigor.

Does psychoanalysis possess a set of operationally defined terms? Here the theory definitely falls short. Such terms as id, ego, superego, conscious, preconscious, unconscious, oral stage, sadistic-anal stage, phallic stage, Oedipus complex, latent level of dreams, and many others are not operationally defined; that is, they are not spelled out in terms of specific operations or behaviors. Researchers must originate their own particular definition of most psychoanalytic terms. Also, psychoanalysis is not a simple or parsimonious theory, but considering its comprehensiveness and the complexity of human personality, it is not needlessly cumbersome.

XI. Concept of Humanity

Freud's view of humanity was deterministic and pessimistic. He also emphasized causality over teleology, unconscious determinants over conscious processes, and biology over culture, but he took a middle position on the dimension of uniqueness versus similarities of people.

Teaching Suggestions

1. Freud's theories have influenced Western civilization for nearly a century, but during the past 40 years, they have been subject to severe criticism. The students may debate the relevancy of his theories in the twenty-first century. Students who wish to take an anti-Freudian position may read Richard Webster's *Why Freud Was Wrong: Sin, Science, and Psychoanalysis* (1995) or Louis Breger's *Freud: Darkness in the Midst of Vision* (2000). Proponents of Freudian theory may wish to look at Peter Gay's *Freud: A Life for Our Time* (1988). Another area that the students can investigate is the recent emergence of

neuroscientific research findings that support many of Freud's theoretical assumptions *ex post facto*. Students taking a pro-Freud position can look at these findings as new empirical evidence for many of Freud's previously unproven ideas.

2. Another interesting topic of debate is the accuracy of repressed memories. Materials for such a debate include Leon Jaroff's *Lies of the Mind* (1993), Janice Haaken's *The Debate Over Recovered Memory of Sexual Abuse* (1995), and Elizabeth Loftus's *The Repressed Memory Controversy* (1994).
3. An interesting video of the life of Freud is *Sigmund Freud: Analysis of a Mind*, a 50-minute A and E biography available from New Video Group, 126 Fifth Avenue, New York, NY 10011

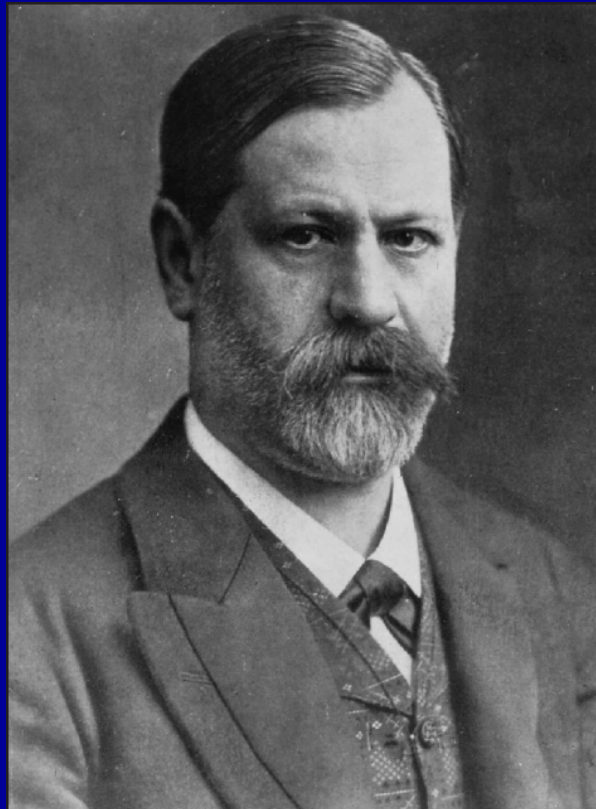
References

- Aron, A. R., & Poldrack, R. A. (2005). The cognitive neuroscience of response inhibition: Relevance for genetic research in Attention-Deficit/Hyperactivity Disorder. *Biological Psychiatry*, *57*, 1285–1292.
- Bargh, J. A., & Chartrand, T. L. (1999). The unbearable automaticity of being. *American Psychologist*, *54*, 462–479.
- Boag, S. (2006). Freudian repression, the common view, and pathological science. *Review of General Psychology*, *10*, 74–86.
- Breger, L. (2000). *Freud: Darkness in the midst of vision*. New York: Wiley.
- Chow, T. W., & Cummings, J. L. (1999). Frontal-subcortical circuits. In B. L. Miller and J. L. Cummings (Eds.). *The human frontal lobes: Functions and disorders*, (pp., 3–26). NY: Guilford Press.
- Gay, P. (1988). *Freud: A life for our time*. New York: Norton.
- Govorun, O., Fuegen, K., & Payne, B. K. (2006). Stereotypes focus defensive projection. *Personality and Social Psychology Bulletin*, *32*, 781–793.
- Gray, P. (1993). The assault on Freud. *Time*, *142*, 46–51.
- Haaken, J. (1995). The debate over recovered memory of sexual abuse: A feminist-psychoanalytic perspective. *Psychiatry*, *58*, 189–198.

- Hobson, J. A. (2004, May). Freud returns? Like a bad dream. *Scientific American*, 290, 89.
- Horgan, J. (1996, December). Why Freud isn't dead. *Scientific American*, 275, 106–11.
- Jaroff, L. (1993, November 29). Lies of the mind. *Time*, 142, 52–59.
- Kandel, E. R. (1999). Biology and the future of psychoanalysis: A new intellectual framework for psychiatry revisited. *American Journal of Psychiatry*, 156, 505–534.
- Loftus, E. F. (1994). The repressed memory controversy. *American Psychologist*, 49, 443–445.
- Pincus, J.H. (2001). *Base instincts: What makes killers kill?* New York: W.W. Norton.
- Praamstra, P., & Seiss, E. (2005). The neurophysiology of response competition: Motor cortex activation and inhibition following subliminal response priming. *Journal of Cognitive Neuroscience*, 17, 483–493.
- Raine, A., Buchsbaum, M., & LaCasse, L. (1997). Brain abnormalities in murderers indicated by positron emission tomography. *Biological Psychiatry*, 42, 495–508.
- Schacter, D. L. (1987). Implicit memory: History and current status. *Journal of Experimental Psychology: Learning, Memory, and Cognition*, 13, 501–518
- Shevrin, H., Ghannam, J. H., & Libet, B. (2002). A neural correlate of consciousness related to repression. *Consciousness and Cognition*, 11, 334–341.
- Solms, M. (2004, May). Freud returns. *Scientific American*, 290, 87–88.
- Solms, M., & Turnbull, O. (2002). *The brain and the inner world: An introduction to the neuroscience of subjective experience.* New York: Other Press.
- Webster, R. (1995). *Why Freud was wrong: Sin, science, and psychoanalysis.* New York: Basic Books.
- Wegner, D. M., Wenzlaff, & Kozak, M. (2004). Dream rebound: The return of suppressed thoughts in dreams. *Psychological Science*, 15, 232–236.

Theories of Personality

Freud: Psychoanalysis



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Outline, 1

- Overview of Psychoanalytic Theory
- Biography of Freud
- Levels of Mental Life
- Provinces of Mind
- Dynamics of Personality
- Defense Mechanisms

Outline, 2

- Stages of Development
- Applications of Psychoanalytic Theory
- Related Research
- Critique of Freud
- Concept of Humanity

Overview of Psychoanalytic Theory

What Made This Theory Interesting

- Cornerstones: Sex and aggression
- Spread by a dedicated group
- Freud's brilliant command of language

Biography of Freud, 1

- Born in Freiberg Moravia (now part of the Czech Republic) in 1856
- Spent most of his life (80 years) in Vienna, Austria
- Was interested in medicine, science, and psychiatry
- Learned the hypnotic technique for treating hysteria with Charcot and catharsis with Breuer

Biography of Freud, 2

- Published *Studies on Hysteria* with Breuer
- Abandoned seduction theory in 1897 and replaced it with the Oedipus complex
- In 1900, he wrote *Interpretation of Dreams*
- Was driven out of Austria by the Nazis in 1938
- Died in London in 1939

Levels of Mental Life, 1

Unconscious

- Beyond awareness
 - Includes drives, urges, and instincts
 - Is known only indirectly
- Two sources of unconscious processes
 - Repression
 - Phylogenetic endowment

Levels of Mental Life, 2

Preconscious

- Contains elements that are not conscious but can become conscious

Conscious

- Only level of mental life that is directly available

Provinces of the Mind, 1

The Id

- Pleasure Principle
- Primary Process

The Ego

- The Reality Principle
- Secondary Process

Provinces of the Mind, 2

The Superego

- The Idealistic Principle
- Conscience
- Ego-Ideal

Dynamics of Personality

Drives

- Libido or Sex Drive
- Thanatos or Aggression/Distraction Drive

Anxiety

- Neurotic Anxiety
- Moral Anxiety
- Realistic Anxiety

Defense Mechanisms

- Repression
- Reaction Formation
- Displacement
- Fixation
- Regression
- Projection
- Introjection
- Sublimation

Stages of Development, 1

Infantile Period (Birth–5 years)

- **Oral Phase**
- **Anal Phase**
- **Phallic Phase**
 - **Male Oedipus Complex**
 - **Castration Complex**
 - **Female Oedipus Complex (Electra)**
 - **Penis Envy**

Stages of Development, 2

- Latency Period (from 5 years until puberty)
- Genital Period (puberty to adulthood)
- Maturity

Applications of Psychoanalytic Theory

Free Association

- Transference
- Resistance

Dream Analysis

- Manifest and latent content

Freudian or Unconscious Slips (Parapraxes)

Related Research, 1

Unconscious Mental Processing

- Automatic, implicit, or nonconscious processing

Inhibition and the Ego

- Limbic system

Related Research, 2

Defense Mechanisms

- Neurophysiological underpinnings of repression

Research on Dreams

- Activation-synthesis theory

Critique of Freud, 1

Did Freud Understand Women, Gender, and Sexuality?

Was Freud a Scientist?

- Theories are difficult to test
- Generated considerable research
- Difficult to falsify

Critique of Freud, 2

- Very loose organizational framework
- Not a good guide to solve practical problems
- Internally consistent theory

Freud's Concept of Humanity

- Determinism over free choice
- Pessimism over optimism
- Causality over teleology
- Conscious versus unconscious
- Biological over social influences
- Equal emphasis on uniqueness and similarities