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Learning Outcomes

- Describe Freud's theory of psychosexual development

The Psychodynamic Perspective: A Focus on the Inner Person

Freud and Psychoanalysis

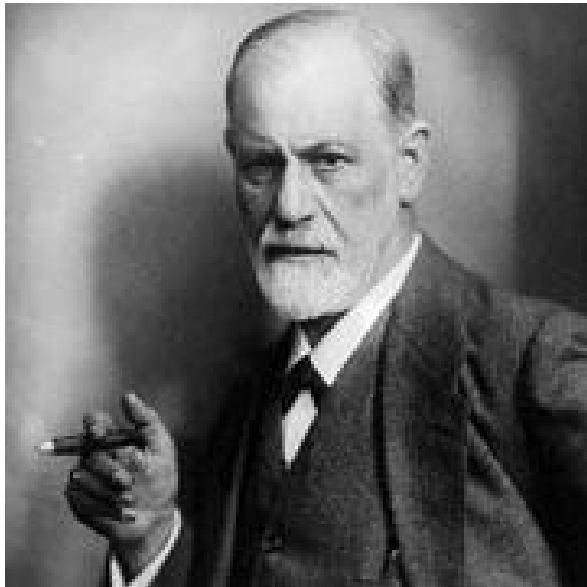


Figure 1. Sigmund Freud.

We begin with Sigmund Freud, one of the most well-known pioneers and early founders of psychology who has been a very influential figure in the area of development. His **psychodynamic perspective** of development and psychopathology dominated the field of psychiatry until the growth of behaviorism in the 1930s and beyond. His assumptions that personality forms during the first few years of life and that the ways in which parents or other caregivers interact with children have a long-lasting impact on children's emotional states have guided parents, educators, clinicians, and policy-makers for many years. We have only recently begun to recognize that early childhood experiences do not always result in certain personality traits or emotional states. There is a growing body of literature addressing resiliency in children who come from harsh backgrounds and yet develop without damaging emotional scars

(O'Grady and Metz, 1987). Freud stimulated an enormous amount of research and generated many ideas. Agreeing with Freud's theory in its entirety is hardly necessary for appreciating the contribution he has made to the field of development.

Background

Sigmund Freud (1856-1939) was a Viennese doctor who was trained in neurology and asked to work with patients suffering from hysteria, a condition marked by uncontrollable emotional outbursts, fears, and anxiety that had puzzled physicians for centuries. He was also asked to work with women who suffered from physical symptoms and forms of paralysis which had no organic causes. During that time, many people believed that certain individuals were genetically inferior and thus more susceptible to mental illness. Women were thought to be genetically inferior and thus prone to illnesses such as hysteria, which had previously been attributed to a detached womb traveling around in the body (the word "hyster" means "uterus" in Greek).

However, after World War I, many soldiers came home with problems similar to hysteria. This called into question the idea of genetic inferiority as a cause of mental illness. Freud began working with hysterical patients and discovered that when they began to talk about some of their life experiences, particularly those that took place in early childhood, their symptoms disappeared. This led him to suggest the first purely psychological explanation for physical problems and mental illness. What he proposed was that unconscious motives, desires, fears, and anxieties drive our actions. When upsetting memories or thoughts begin to find their way into our consciousness, we develop defenses to shield us from these painful realities, called defense mechanisms. Freud believed that many mental illnesses are a result of a person's inability to accept reality.

Freud emphasized the importance of early childhood experiences in shaping our personality and behavior. In our natural state, we are biological beings. We are driven primarily by instincts. During childhood, however, we begin to become social beings as we learn how to manage our instincts and transform them into socially acceptable behaviors. The type of parenting the child receives has a very powerful impact on the child's personality development. We will explore this idea further in our discussion of psychosexual development, but first, we must identify the parts of the "self" in Freud's model, or in other words, what constitutes a person's personality and makes us who we are.

Theory of Personality/Self

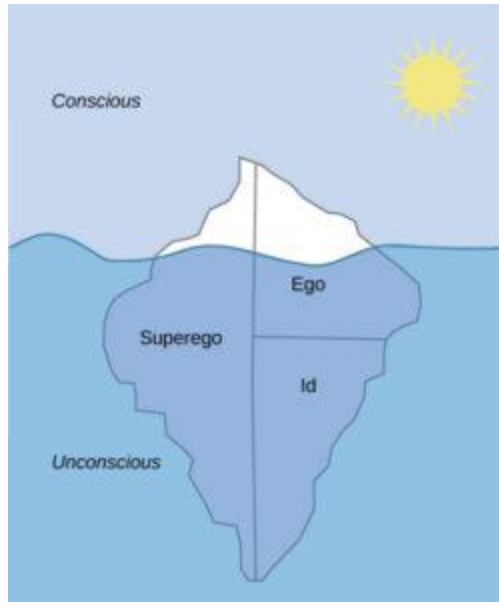


Figure 2. According to Freud's model of the psyche, the id is the primitive and instinctual part of the mind that contains sexual and aggressive drives and hidden memories, the superego operates as a moral conscience, and the ego is the realistic part that mediates between the desires of the id and the superego.

As adults, our personality or self consists of three main parts: the **id**, the **ego**, and the **superego**. The id, the basic, primal part of the personality, is the part of the self with which we are born. It consists of the biologically-driven self and includes our instincts and drives. It is the part of us that wants immediate gratification. Later in life, it comes to house our deepest, often unacceptable desires, such as sex and aggression. It operates under the pleasure principle which means that the criteria for determining whether something is good or bad is whether it feels good or bad. An infant is all id.

Next, the ego begins to develop during the first three years of a child's life. Finally, the superego. The superego, the last component of personality to develop, starts to emerge around the age of five when a child interacts more and more with others, learning the social rules for right and wrong. The superego acts as our conscience; it is our moral compass that tells us how we should behave. It strives for perfection and judges our behavior, leading to feelings of pride or—when we fall short of the ideal—feelings of guilt.

In contrast to the instinctual id and the rule-based superego, the ego is the rational part of our personality. It's what Freud considered to be the self, and it is the part of our personality that is seen by others. Its job is to balance the demands of the id and superego in the context of reality; thus, it operates on what Freud called the "reality principle." The ego helps the id satisfy its desires in a realistic way.

The id and superego are in constant conflict because the id wants instant gratification regardless of the consequences, but the superego tells us that we must behave in socially acceptable ways. Thus, the ego's job is to find the middle ground. It helps satisfy the id's desires in a rational way that will not lead us to feelings of guilt. According to Freud, a person who has a strong ego, which can balance the demands of the id and the superego, has a healthy personality. Freud maintained that imbalances in the system can lead to **neurosis** (a tendency to experience negative emotions), anxiety disorders, or unhealthy behaviors. For example, a person who is dominated by their id might be narcissistic and impulsive. A person with a dominant superego might be controlled by feelings of guilt and deny themselves even socially acceptable pleasures; conversely, if the superego is weak or absent, a person might become a psychopath. An overly dominant superego might be seen in an over-controlled individual whose rational grasp on reality is so strong that they are unaware of their emotional needs, or, in a neurotic who is overly defensive (overusing ego defense mechanisms).

Try It

According to Freud, which part of a person's personality represents primitive drives related to sex, hunger, aggression, and irrational impulses?

☐ neurosis

[See this interactive in the course material.](#)

Freud believed that the _____ is the part of the personality that is rational and reasonable.

☐ ego

[See this interactive in the course material.](#)

Theory of Psychosexual Development

Freud believed that personality develops during early childhood and that childhood experiences shape our personalities as well as our behavior as adults. He asserted that we develop via a series of stages during childhood. Each of us must pass through these childhood stages, and if we do not have the proper nurturing and parenting during a stage, we will be stuck, or fixated, in that stage even as adults.

In each **psychosexual stage** of development, the child's pleasure-seeking urges, coming from the id, are focused on a different area of the body, called an erogenous zone. The stages are oral, anal, phallic, latency, and genital (Table 1).

Table 1. Freud's Stages of Psychosexual Development

Stage	Age (years)	Erogenous Zone	Major Conflict	Adult Fixation Example
Oral	0–1	Mouth	Weaning off breast or bottle	Smoking, overeating
Anal	1–3	Anus	Toilet training	Neatness, messiness
Phallic	3–6	Genitals	Oedipus/Electra complex	Vanity, overambition
Latency	6–12	None	None	None
Genital	12+	Genitals	None	None

For about the first year of life, the infant is in the **oral stage** of psychosexual development. The infant meets needs primarily through oral gratification. A baby wishes to suck or chew on any object that comes close to the mouth. Babies explore the world through the mouth and find comfort and stimulation as well. Psychologically, the infant is all id. The infant seeks immediate

gratification of needs such as comfort, warmth, food, and stimulation. If the caregiver meets oral needs consistently, the child will move away from this stage and progress further. However, if the caregiver is inconsistent or neglectful, the person may become stuck in the oral stage. As an adult, the person might not feel good unless involved in some oral activity such as eating, drinking, smoking, nail-biting, or compulsive talking. These actions bring comfort and security when the person feels insecure, afraid, or bored.

During the **anal stage**, which coincides with toddlerhood and potty-training, the child is taught that some urges must be contained and some actions postponed. There are rules about certain functions and when and where they are to be carried out. The child is learning a sense of self-control. The ego is being developed. If the caregiver is extremely controlling about potty training (stands over the child waiting for the smallest indication that the child might need to go to the potty and immediately scoops the child up and places him on the potty chair, for example), the child may grow up fearing losing control. He may become fixated in this stage or “anally retentive”—fearful of letting go. Such a person might be extremely neat and clean, organized, reliable, and controlling of others. If the caregiver neglects to teach the child to control urges, he may grow up to be “anal expulsive” or an adult who is messy, irresponsible, and disorganized.

The **phallic stage** occurs during the preschool years (ages 3-5) when the child has a new biological challenge to face. The child will experience the Oedipus complex which refers to a child’s unconscious sexual desire for the opposite-sex parent and hatred for the same-sex parent. For example, boys experiencing the Oedipus complex will unconsciously want to replace their father as a companion to their mother but then realize that the father is much more powerful. For a while, the boy fears that if he pursues his mother, his father may castrate him (castration anxiety). So rather than risk losing his penis, he gives up his affections for his mother and instead learns to become more like his father, imitating his actions and mannerisms, thereby learning the role of males in his society. From this experience, the boy learns a sense of masculinity. He also learns what society thinks he should do and experiences guilt if he does not comply. In this way, the superego develops. If he does not resolve this successfully, he may become a “phallic male” or a man who constantly tries to prove his masculinity (about which he is insecure), by seducing women and beating up men.

Girls experience a comparable conflict in the phallic stage—the Electra complex. The Electra complex, while often attributed to Freud, was actually proposed by Freud’s contemporary, Carl Jung (Jung & Kerenyi, 1963). A little girl experiences the Electra complex in which she develops an attraction for her father but realizes that she cannot compete with her mother and so gives up that affection and learns to become more like her mother. This is not without some regret, however. Freud believed that the girl feels inferior because she does not have a penis (experiences “penis envy”). But she must resign herself to the fact that she is female and will just have to learn her inferior role in society as a female. However, if she does not resolve this conflict successfully, she may have a weak sense of femininity and grow up to be a “castrating female” who tries to compete with men in the workplace or in other areas of life. The formation of the superego takes place during the dissolution of the Oedipus and Electra complex.

During middle childhood (6-11), the child enters the **latency stage**, focusing their attention outside the family and toward friendships. The biological drives are temporarily quieted (latent) and the child can direct attention to a larger world of friends. If the child is able to make friends, they will gain a sense of confidence. If not, the child may continue to be a loner or shy away from others, even as an adult.

The final stage of psychosexual development is referred to as the **genital stage**. From adolescence throughout adulthood, a person is preoccupied with sex and reproduction. The adolescent experiences rising hormone levels and the sex drive and hunger drives become very strong. Ideally, the adolescent will rely on the ego to help think logically through these urges without taking actions that might be damaging. An adolescent might learn to redirect their sexual urges into a safer activity such as running, for example. Quieting the id with the superego can lead to feeling overly self-conscious and guilty about these urges. Hopefully, it is the ego that is strengthened during this stage and the adolescent uses reason to manage urges.

Freud's psychosexual development theory is quite controversial. To understand the origins of the theory, it is helpful to be familiar with the political, social, and cultural influences of Freud's day in Vienna at the turn of the 20th century. During this era, a climate of sexual repression, combined with limited understanding and education surrounding human sexuality heavily influenced Freud's perspective. Given that sex was a taboo topic, Freud assumed that negative emotional states (neuroses) stemmed from the suppression of unconscious sexual and aggressive urges. For Freud, his own recollections and interpretations of patients' experiences and dreams were sufficient proof that psychosexual stages were universal events in early childhood.

Watch It

Watch this video to better understand Freud's theory of psychosexual development.



[See this interactive in the course material.](#)

You can [view the transcript for “Freud’s Psychosexual Development” here \(opens in new window\)](#).

Try It

If a child develops into a person who integrates into society and maintains a good awareness of safety, Freud may say that person has a well-developed _____.

☐ id

[See this interactive in the course material.](#)

Defense mechanisms

Freud believed that feelings of anxiety result from the ego’s inability to mediate the conflict between the id and superego. When this happens, Freud believed that the ego seeks to restore balance through various protective measures known as **defense mechanisms**. When certain events, feelings, or yearnings cause anxiety, the individual wishes to reduce that anxiety. To do that, the individual’s unconscious mind uses ego defense mechanisms, unconscious protective behaviors that aim to reduce anxiety. The ego, usually conscious, resorts to unconscious strivings to protect the ego from being overwhelmed by anxiety. When we use defense mechanisms, we are unaware that we are using them. Further, they operate in various ways that distort reality. According to Freud, we all use ego defense mechanisms.

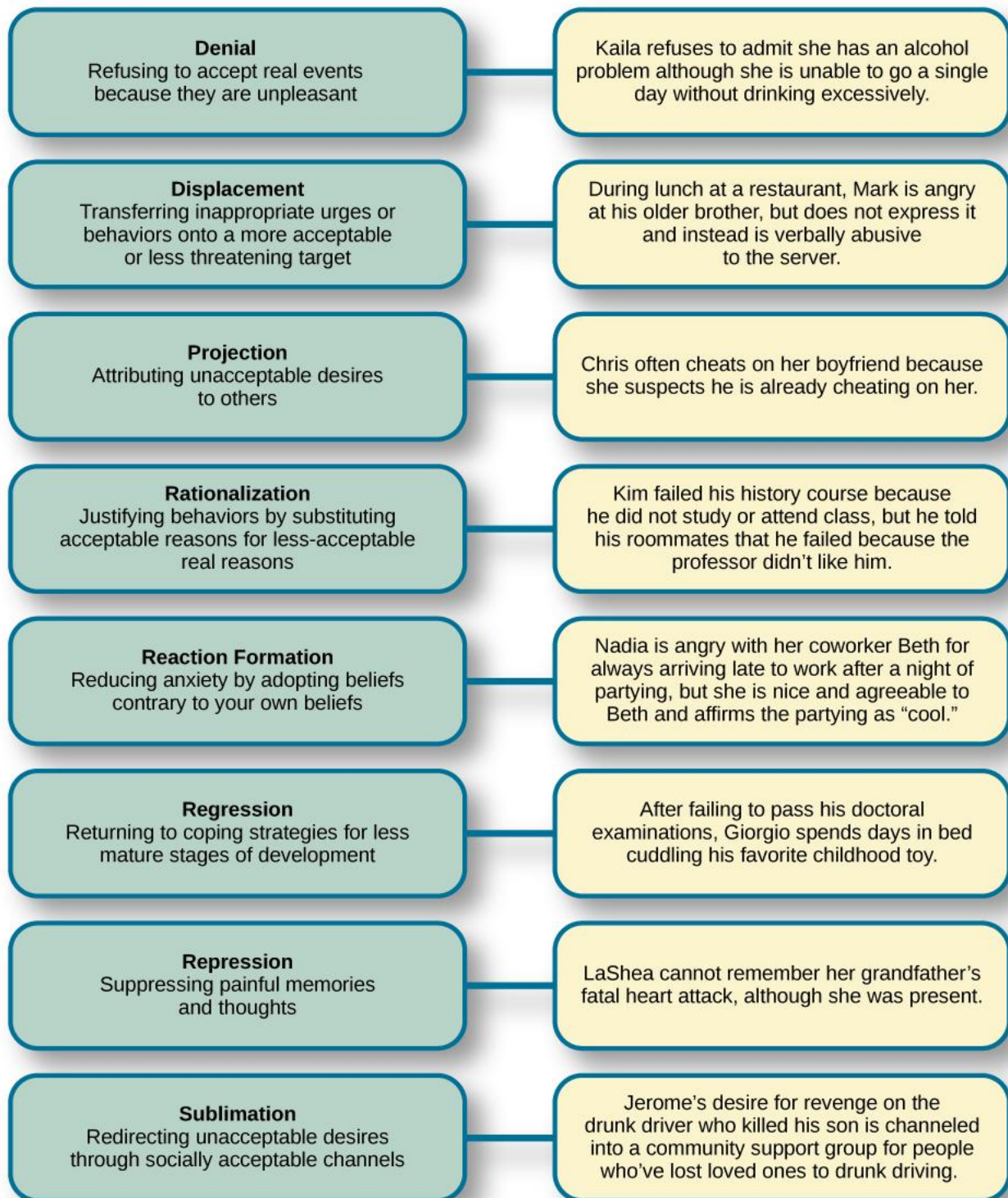


Figure 3. Defense mechanisms are unconscious protective behaviors that work to reduce anxiety.

Defense mechanisms emerge to help a person distort reality so that the truth is less painful. Defense mechanisms include:

- **Denial**—not accepting the truth or lying to oneself. Thoughts such as “it won’t happen to me” or “you’re not leaving” or “I don’t have a problem with alcohol” are examples.
- **Displacement**—taking out frustrations on a safer target. A person who is angry at a boss may take out their frustration at others when driving home or at a spouse upon arrival.
- **Projection**—a defense mechanism in which a person attributes their unacceptable thoughts onto others. If someone is frightened, for example, they accuse someone else of being afraid.
- **Rationalization**—a defense mechanism proposed by Anna Freud (Freud’s daughter who continued in her father’s path of psychoanalysis). Rationalization involves a cognitive distortion of “the facts” to make an event or an impulse less threatening. We often do it on a fairly conscious level when we provide ourselves with excuses.
- **Reaction formation**—a defense mechanism in which a person outwardly opposes something they inwardly desire, but that they find unacceptable. An example of this might be someone who dislikes or fears people of another race acting overly nice to people of that race.
- **Regression**—going back to a time when the world felt like a safer place, perhaps reverting to one’s childhood behaviors.
- **Repression**—to push the painful thoughts out of consciousness (in other words, think about something else).
- **Sublimation**—transforming unacceptable urges into more socially acceptable behaviors. For example, a teenager who experiences strong sexual urges uses exercise to redirect those urges into more socially acceptable behavior.

WAth It

This video explains more about each of the defense mechanisms.



[Video Link](#)

You can [view the transcript for “PSYCHOTHERAPY – Anna Freud” here \(opens in new window\)](#).

Try It

In the context of Freud's theory, protective efforts that keep unacceptable thoughts, instincts, and feelings out of conscious awareness and thus serve to defend the ego against anxiety are referred to as

☐ Neurosis

[See this interactive in the course material.](#)

Assessing the Psychodynamic Perspective

Originating in the work of Sigmund Freud, the psychodynamic perspective emphasizes unconscious psychological processes (for example, wishes and fears of which we're not fully aware), and contends that childhood experiences are crucial in shaping adult personality. When reading Freud's theories, it is important to remember that he was a medical doctor, not a psychologist. There was no such thing as a degree in psychology at the time that he received his education, which can help us understand some of the controversies over his theories today. However, Freud was the first to systematically study and theorize the workings of the unconscious mind in the manner that we associate with modern psychology. The psychodynamic perspective has evolved considerably since Freud's time, encompassing all the theories in psychology that see human functioning based upon the interaction of conscious and unconscious drives and forces within the person, and between the different structures of the personality (id, ego, superego).

Freud's theory has been heavily criticized for several reasons. One is that it is very difficult to test scientifically. How can parenting in infancy be traced to personality in adulthood? Are there other variables that might better explain development? Because psychodynamic theories are

difficult to prove wrong, evaluating those theories, in general, is difficult in that we cannot make definite predictions about a given individual's behavior using the theories. The theory is also considered to be sexist in suggesting that women who do not accept an inferior position in society are somehow psychologically flawed. Freud focused on the darker side of human nature and suggested that much of what determines our actions is unknown to us. Others make the criticism that the psychodynamic approach is too deterministic, relating to the idea that all events, including human action, are ultimately determined by causes regarded as external to the will, thereby leaving little room for the idea of free will.^[1]

Freud's work has been extremely influential, and its impact extends far beyond psychology (several years ago *Time* magazine selected Freud as one of the most important thinkers of the 20th century). Freud's work has been not only influential but quite controversial as well. As you might imagine, when Freud suggested in 1900 that much of our behavior is determined by psychological forces of which we're largely unaware—that we literally don't know what's going on in our own minds—people were (to put it mildly) displeased (Freud, 1900/1953a). When he suggested in 1905 that we humans have strong sexual feelings from a very early age and that some of these sexual feelings are directed toward our parents, people were more than displeased—they were outraged (Freud, 1905/1953b). Few theories in psychology have evoked such strong reactions from other professionals and members of the public.

So why do we study Freud? As mentioned above, despite the criticisms, Freud's assumptions about the importance of early childhood experiences in shaping our psychological selves have found their way into child development, education, and parenting practices. Freud's theory has heuristic value in providing a framework from which to elaborate and modify subsequent theories of development. Many later theories, particularly behaviorism and humanism, were challenges to Freud's views. Controversy notwithstanding, no competent psychologist, or student of psychology, can ignore psychodynamic theory. It is simply too important for psychological science and practice and continues to play an important role in a wide variety of disciplines within and outside psychology (for example, developmental psychology, social psychology, sociology, and neuroscience; see Bornstein, 2005, 2006; Solms & Turnbull, 2011).

Glossary

anal stage: the stage of development when children are learning to control impulses; coincides with toddlerhood and toileting
defense mechanisms: psychological strategies that are unconsciously used to protect a person from anxiety arising from unacceptable thoughts or feelings
ego: the part of the self that helps balance the id and superego by satisfying the id's desires in a rational way
genital stage: the final stage of psychosexual development when individuals develop sexual interests; begins in adolescence and lasts throughout adulthood
id: the part of the self that is biologically-driven, includes our instincts and drives, and wants immediate gratification
latency stage: the fourth stage of psychosexual development, spanning

middle childhood, during which sexual development and sexual impulses are dormant
 oral stage: the first stage of psychosexual development when infants needs are met primarily through oral gratification
 phallic stage: the third stage of psychosexual development, spanning the ages of 3 to 6 years, when the young child's libido (desire) centers upon their genitalia as the erogenous zone
 psychodynamic perspective: the perspective that behavior is motivated by inner forces, memories, and conflicts that are generally beyond people's awareness and control
 psychosexual stages: Freud's oral, anal, phallic, latency, and genital stages
 superego: the part of the self that acts as our conscience, telling us how we should behave

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1. The Generative Society: Caring for Future Generations – January 1, 2004 by Ed De St Aubin (Author), Ed St Aubin (Editor), Henry Wade Rogers Professor of Psychology and Chair of the Psychology Department Dan P McAdams PhD (Editor), Tae-Chang Kim (Editor) _

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