

SIGMUND FREUD

[1856 – 1939]

PERSONALITY THEORIES

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Introduction

It is a mistake to believe that a science consists in nothing but conclusively proved propositions, and it is unjust to demand that it should. It is a demand only made by those who feel a craving for authority in some form and a need to replace the religious catechism by something else, even if it be a scientific one. Science in its catechism has but few apodictic precepts; it consists mainly of statements which it has developed to varying degrees of probability. The capacity to be content with these approximations to certainty and the ability to carry on constructive work despite the lack of final confirmation are actually a mark of the scientific habit of mind. – Freud

Freud's story, like most people's stories, begins with others. In his case those others were his mentor and friend, Dr. Joseph Breuer, and Breuer's patient, called Anna O.

Anna O. was Joseph Breuer's patient from 1880 through 1882. Twenty one years old, Anna spent most of her time nursing her ailing father. She developed a bad cough that proved to have no physical basis. She developed some speech difficulties, then became mute, and then began speaking only in English, rather than her usual German.

When her father died she began to refuse food, and developed an unusual set of problems. She lost the feeling in her hands and feet, developed some paralysis, and began to have involuntary spasms. She also had visual hallucinations and tunnel vision. But when specialists were consulted, no physical causes for these problems could be found.

If all this weren't enough, she had fairy-tale fantasies, dramatic mood swings, and made several suicide attempts. Breuer's diagnosis was that she was suffering from what was then called **hysteria** (now called conversion disorder), which meant she had symptoms that appeared to be physical, but were not.

In the evenings, Anna would sink into states of what Breuer called "spontaneous hypnosis," or what Anna herself called "clouds." Breuer found that, during these trance-like states, she could explain her day-time fantasies and other experiences, and she felt better afterwards. Anna called these episodes "chimney sweeping" and "the talking cure."

Sometimes during "chimney sweeping," some emotional event was recalled that gave meaning to some particular symptom. The first example came soon after she had refused to drink for a while: She recalled seeing a woman drink from a glass that a dog had just drunk from. While recalling this, she experienced strong feelings of disgust...and then had a drink of water! In other words, her symptom – an avoidance of water – disappeared as soon as she remembered its root event, and experienced the strong emotion that would be appropriate to that event. Breuer called this catharsis, from the Greek word for cleansing.

It was eleven years later that Breuer and his assistant, Sigmund Freud, wrote a book on hysteria. In it they explained their theory: Every hysteria is the result of a traumatic experience, one that cannot be integrated into the person's understanding of the world. The emotions appropriate to the trauma are not expressed in any direct fashion, but do not simply evaporate: They express themselves in behaviors that in a weak, vague way offer a response to the trauma. These symptoms are, in other words, meaningful. When the client can be made aware of the meanings of his or her symptoms (through hypnosis, for example) then the unexpressed emotions are released and so no longer need to express themselves as symptoms. It is analogous to lancing a boil or draining an infection.

In this way, Anna got rid of symptom after symptom. But it must be noted that she needed Breuer to do this: Whenever she was in one of her hypnotic states, she had to feel his hands to make sure it was him before



talking! And sadly, new problems continued to arise.

According to Freud, Breuer recognized that she had fallen in love with him, and that he was falling in love with her. Plus, she was telling everyone she was pregnant with his child. You might say she wanted it so badly that her mind told her body it was true, and she developed an hysterical pregnancy. Breuer, a married man in a Victorian era, abruptly ended their sessions together, and lost all interest in hysteria.

It was Freud who would later add what Breuer did not acknowledge publicly – that secret sexual desires lay at the bottom of all these hysterical neuroses.

To finish her story, Anna spent time in a sanatorium. Later, she became a well-respected and active figure – the first social worker in Germany – under her true name, Bertha Pappenheim. She died in 1936. She will be remembered, not only for her own accomplishments, but as the inspiration for the most influential personality theory we have ever had.

Biography

Sigmund Freud was born May 6, 1856, in a small town – Freiberg – in Moravia. His father was a wool merchant with a keen mind and a good sense of humor. His mother was a lively woman, her husband's second wife and 20 years younger. She was 21 years old when she gave birth to her first son, her darling, Sigmund. Sigmund had two older half-brothers and six younger siblings. When he was four or five – he wasn't sure – the family moved to Vienna, where he lived most of his life.

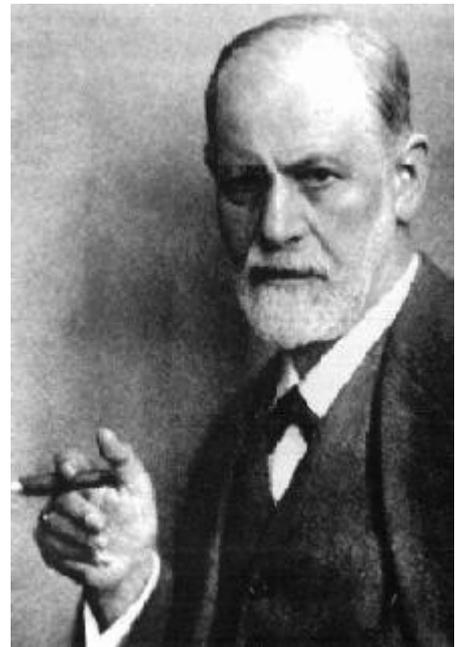
A brilliant child, always at the head of his class, he went to medical school, one of the few viable options for a bright Jewish boy in Vienna those days. There, he became involved in research under the direction of a physiology professor named Ernst Brücke. Brücke believed in what was then a popular, if radical, notion, which we now call reductionism: "No other forces than the common physical-chemical ones are active within the organism." Freud would spend many years trying to "reduce" personality to neurology, a cause he later gave up on.

Freud was very good at his research, concentrating on neurophysiology, even inventing a special cell-staining technique. But only a limited number of positions were available, and there were others ahead of him. Brücke helped him to get a grant to study, first with the great psychiatrist Charcot in Paris, then with his rival Bernheim in Nancy. Both these gentlemen were investigating the use of hypnosis with hysterics.

After spending a short time as a resident in neurology and director of a children's ward in Berlin, he came back to Vienna, married his fiancée of many years Martha Bernays, and set up a practice in neuropsychiatry, with the help of Joseph Breuer.

Freud's books and lectures brought him both fame and ostracism from the mainstream of the medical community. He drew around him a number of very bright sympathizers who became the core of the psychoanalytic movement. Unfortunately, Freud had a penchant for rejecting people who did not totally agree with him. Some separated from him on friendly terms; others did not, and went on to found competing schools of thought.

Freud emigrated to England just before World War II when Vienna became an increasingly dangerous place



for Jews, especially ones as famous as Freud. Not long afterward, he died of the cancer of the mouth and jaw that he had suffered from for the last 20 years of his life.

Theory

Freud didn't exactly invent the idea of the conscious versus unconscious mind, but he certainly was responsible for making it popular. The **conscious mind** is what you are aware of at any particular moment, your present perceptions, memories, thoughts, fantasies, feelings, what have you. Working closely with the conscious mind is what Freud called the **preconscious**, what we might today call "available memory:" anything that can easily be made conscious, the memories you are not at the moment thinking about but can readily bring to mind. Now no-one has a problem with these two layers of mind. But Freud suggested that these are the smallest parts!

The largest part by far is the **unconscious**. It includes all the things that are not easily available to awareness, including many things that have their origins there, such as our drives or instincts, and things that are put there because we can't bear to look at them, such as the memories and emotions associated with trauma.

According to Freud, the unconscious is the source of our motivations, whether they be simple desires for food or sex, neurotic compulsions, or the motives of an artist or scientist. And yet, we are often driven to deny or resist becoming conscious of these motives, and they are often available to us only in disguised form. We will come back to this.

The id, the ego, and the superego

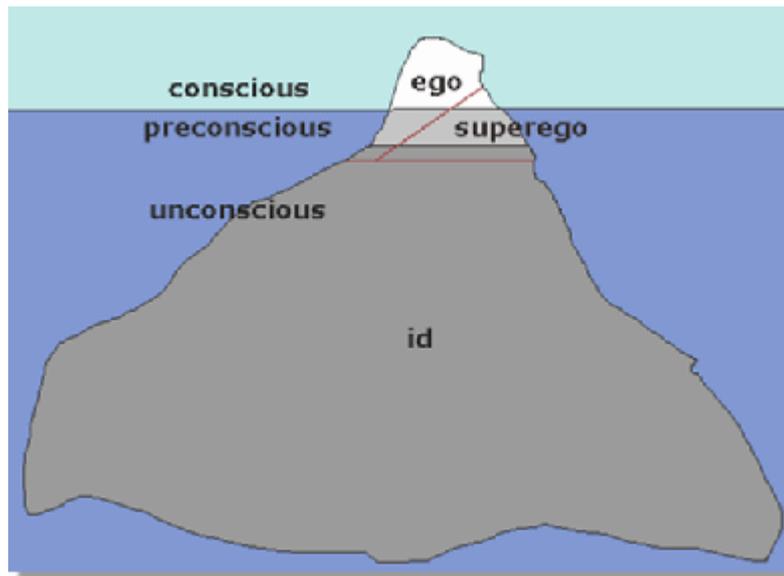
Freudian psychological reality begins with the world, full of objects. Among them is a very special object, the organism. The organism is special in that it acts to survive and reproduce, and it is guided toward those ends by its needs – hunger, thirst, the avoidance of pain, and sex.

A part – a very important part – of the organism is the nervous system, which has as one its characteristics a sensitivity to the organism's needs. At birth, that nervous system is little more than that of any other animal, an "it" or **id**. The nervous system, as id, translates the organism's needs into motivational forces called, in German, **Triebe**, which has been translated as **instincts** or **drives**. Freud also called them **wishes**. This translation from need to wish is called the **primary process**.

The id works in keeping with the **pleasure principle**, which can be understood as a demand to take care of needs immediately. Just picture the hungry infant, screaming itself blue. It doesn't "know" what it wants in any adult sense; it just knows that it wants it and it wants it now. The infant, in the Freudian view, is pure, or nearly pure id. And the id is nothing if not the psychic representative of biology.

Unfortunately, although a wish for food, such as the image of a juicy steak, might be enough to satisfy the id, it isn't enough to satisfy the organism. The need only gets stronger, and the wishes just keep coming. You may have noticed that, when you haven't satisfied some need, such as the need for food, it begins to demand more and more of your attention, until there comes a point where you can't think of anything else. This is the wish or drive breaking into consciousness.

Luckily for the organism, there is that small portion of the mind we discussed before, the conscious, that is hooked up to the world through the senses. Around this little bit of consciousness, during the first year of a child's life, some of the "it" becomes "I," some of the id becomes **ego**. The ego relates the organism to reality by means of its consciousness, and it searches for objects to satisfy the wishes that id creates to represent the organism's needs. This problem-solving activity is called the **secondary process**.



The ego, unlike the id, functions according to the **reality principle**, which says "take care of a need as soon as an appropriate object is found." It represents reality and, to a considerable extent, reason.

However, as the ego struggles to keep the id (and, ultimately, the organism) happy, it meets with obstacles in the world. It occasionally meets with objects that actually assist it in attaining its goals. And it keeps a record of these obstacles and aides. In particular, it keeps track of the rewards and punishments meted out by two of the most influential objects in the world of the child – mom and dad. This record of things to avoid and strategies to take becomes the **superego**. It is not completed until about seven years of age. In some people, it never is completed.

There are two aspects to the superego: One is the **conscience**, which is an internalization of punishments and warnings. The other is called the **ego ideal**. It derives from rewards and positive models presented to the child. The conscience and ego ideal communicate their requirements to the ego with feelings like pride, shame, and guilt.

It is as if we acquired, in childhood, a new set of needs and accompanying wishes, this time of social rather than biological origins. Unfortunately, these new wishes can easily conflict with the ones from the id. You see, the superego represents society, and society often wants nothing better than to have you never satisfy your needs at all!

Life instincts and the death instinct

Freud saw all human behavior as motivated by the drives or instincts, which in turn are the neurological representations of physical needs. At first, he referred to them as the **life instincts**. These instincts perpetuate (a) the life of the individual, by motivating him or her to seek food and water, and (b) the life of the species, by motivating him or her to have sex. The motivational energy of these life instincts, the "oomph" that powers our psyches, he called **libido**, from the Latin word for "I desire."

Freud's clinical experience led him to view sex as much more important in the dynamics of the psyche than other needs. We are, after all, social creatures, and sex is the most social of needs. Plus, we have to remember that Freud included much more than intercourse in the term sex! Anyway, libido has come to mean, not any old drive, but the sex drive.

Later in his life, Freud began to believe that the life instincts didn't tell the whole story. Libido is a lively

thing; the pleasure principle keeps us in perpetual motion. And yet the goal of all this motion is to be still, to be satisfied, to be at peace, to have no more needs. The goal of life, you might say, is death! Freud began to believe that "under" and "beside" the life instincts there was a **death instinct**. He began to believe that every person has an unconscious wish to die.

This seems like a strange idea at first, and it was rejected by many of his students, but I think it has some basis in experience: Life can be a painful and exhausting process. There is easily, for the great majority of people in the world, more pain than pleasure in life – something we are extremely reluctant to admit! Death promises release from the struggle.

Freud referred to a **nirvana principle**. Nirvana is a Buddhist idea, often translated as heaven, but actually meaning "blowing out," as in the blowing out of a candle. It refers to non-existence, nothingness, the void, which is the goal of all life in Buddhist philosophy.

The day-to-day evidence of the death instinct and its nirvana principle is in our desire for peace, for escape from stimulation, our attraction to alcohol and narcotics, our penchant for escapist activity, such as losing ourselves in books or movies, our craving for rest and sleep. Sometimes it presents itself openly as suicide and suicidal wishes. And, Freud theorized, sometimes we direct it out away from ourselves, in the form of aggression, cruelty, murder, and destructiveness.

Anxiety

Freud once said "life is not easy!"

The ego – the "I" – sits at the center of some pretty powerful forces: reality; society, as represented by the superego; biology, as represented by the id. When these make conflicting demands upon the poor ego, it is understandable if it – if you – feel threatened, feel overwhelmed, feel as if it were about to collapse under the weight of it all. This feeling is called **anxiety**, and it serves as a signal to the ego that its survival, and with it the survival of the whole organism, is in jeopardy.

Freud mentions three different kind of anxieties: The first is **realistic anxiety**, which you and I would call fear. Actually Freud did, too, in German. But his translators thought "fear" too mundane! Nevertheless, if I throw you into a pit of poisonous snakes, you might experience realistic anxiety.

The second is **moral anxiety**. This is what we feel when the threat comes not from the outer, physical world, but from the internalized social world of the superego. It is, in fact, just another word for feelings like shame and guilt and the fear of punishment.

The last is **neurotic anxiety**. This is the fear of being overwhelmed by impulses from the id. If you have ever felt like you were about to "lose it," lose control, your temper, your rationality, or even your mind, you have felt neurotic anxiety. Neurotic is actually the Latin word for nervous, so this is nervous anxiety. It is this kind of anxiety that intrigued Freud most, and we usually just call it anxiety, plain and simple.

The defense mechanisms

The ego deals with the demands of reality, the id, and the superego as best as it can. But when the anxiety becomes overwhelming, the ego must defend itself. It does so by unconsciously blocking the impulses or distorting them into a more acceptable, less threatening form. The techniques are called the **ego defense mechanisms**, and Freud, his daughter Anna, and other disciples have discovered quite a few.

Denial involves blocking external events from awareness. If some situation is just too much to handle, the

person just refuses to experience it. As you might imagine, this is a primitive and dangerous defense – no one disregards reality and gets away with it for long! It can operate by itself or, more commonly, in combination with other, more subtle mechanisms that support it.

I was once reading while my five year old daughter was watching a cartoon (The Smurfs, I think). She was, as was her habit, quite close to the television, when a commercial came on. Apparently, no-one at the television station was paying much attention, because this was a commercial for a horror movie, complete with bloody knife, hockey mask, and screams of terror. Now I wasn't able to save my child from this horror, so I did what any good psychologist father would do: I talked about it. I said to her "Boy, that was a scary commercial, wasn't it?" She said "Huh?" I said "That commercial...it sure was scary wasn't it?" She said "What commercial?" I said "The commercial that was just on, with the blood and the mask and the screaming...!" She had apparently shut out the whole thing.

Since then, I've noticed little kids sort of glazing over when confronted by things they'd rather not be confronted by. I've also seen people faint at autopsies, people deny the reality of the death of a loved one, and students fail to pick up their test results. That's denial.

Anna Freud also mentions **denial in fantasy**: This is when children, in their imaginations, transform an "evil" father into a loving teddy bear, or a helpless child into a powerful superhero.

Repression, which Anna Freud also called "motivated forgetting," is just that: not being able to recall a threatening situation, person, or event. This, too, is dangerous, and is a part of most other defenses.

As an adolescent, I developed a rather strong fear of spiders, especially long-legged ones. I didn't know where it came from, but it was starting to get rather embarrassing by the time I entered college. At college, a counselor helped me to get over it (with a technique called systematic desensitization), but I still had no idea where it came from. Years later, I had a dream, a particularly clear one, that involved getting locked up by my cousin in a shed behind my grandparents' house when I was very young. The shed was small, dark, and had a dirt floor covered with – you guessed it! – long-legged spiders.

The Freudian understanding of this phobia is pretty simple: I repressed a traumatic event – the shed incident – but seeing spiders aroused the anxiety of the event without arousing the memory.

Other examples abound. Anna Freud provides one that now strikes us as quaint: A young girl, guilty about her rather strong sexual desires, tends to forget her boy-friend's name, even when trying to introduce him to her relations! Or an alcoholic can't remember his suicide attempt, claiming he must have "blacked out." Or a someone almost drowns as a child, but can't remember the event even when people try to remind him – but he does have this fear of open water!

Note that, to be a true example of a defense, it should function unconsciously. My brother had a fear of dogs as a child, but there was no defense involved: He had been bitten by one, and wanted very badly never to repeat the experience! Usually, it is the irrational fears we call phobias that derive from repression of traumas.

Asceticism, or the renunciation of needs, is one most people haven't heard of, but it has become relevant again today with the emergence of the disorder called anorexia. Preadolescents, when they feel threatened by their emerging sexual desires, may unconsciously try to protect themselves by denying, not only their sexual desires, but all desires. They get involved in some kind of ascetic (monk-like) lifestyle wherein they renounce their interest in what other people enjoy.

In boys nowadays, there is a great deal of interest in the self-discipline of the martial arts. Fortunately, the martial arts not only don't hurt you (much), they may actually help you. Unfortunately, girls in our society often develop a great deal of interest in attaining an excessively and artificially thin standard of beauty. In Freudian theory, their denial of their need for food is actually a cover for their denial of their sexual

development. Our society conspires with them: After all, what most societies consider a normal figure for a mature woman is in ours considered 20 pounds overweight!

Anna Freud also discusses a milder version of this called **restriction of ego**. Here, a person loses interest in some aspect of life and focuses it elsewhere, in order to avoid facing reality. A young girl who has been rejected by the object of her affections may turn away from feminine things and become a "sex-less intellectual," or a boy who is afraid that he may be humiliated on the football team may unaccountably become deeply interested in poetry.

Isolation (sometimes called intellectualization) involves stripping the emotion from a difficult memory or threatening impulse. A person may, in a very cavalier manner, acknowledge that they had been abused as a child, or may show a purely intellectual curiosity in their newly discovered sexual orientation. Something that should be a big deal is treated as if it were not.

In emergency situations, many people find themselves completely calm and collected until the emergency is over, at which point they fall to pieces. Something tells you that, during the emergency, you can't afford to fall apart. It is common to find someone totally immersed in the social obligations surrounding the death of a loved one. Doctors and nurses must learn to separate their natural reactions to blood, wounds, needles, and scalpels, and treat the patient, temporarily, as something less than a warm, wonderful human being with friends and family. Adolescents often go through a stage where they are obsessed with horror movies, perhaps to come to grips with their own fears. Nothing demonstrates isolation more clearly than a theater full of people laughing hysterically while someone is shown being dismembered.

Displacement is the redirection of an impulse onto a substitute target. If the impulse, the desire, is okay with you, but the person you direct that desire towards is too threatening, you can displace to someone or something that can serve as a symbolic substitute.

Someone who hates his or her mother may repress that hatred, but direct it instead towards, say, women in general. Someone who has not had the chance to love someone may substitute cats or dogs for human beings. Someone who feels uncomfortable with their sexual desire for a real person may substitute a fetish. Someone who is frustrated by his or her superiors may go home and kick the dog, beat up a family member, or engage in cross-burnings.

Turning against the self is a very special form of displacement, where the person becomes their own substitute target. It is normally used in reference to hatred, anger, and aggression, rather than more positive impulses, and it is the Freudian explanation for many of our feelings of inferiority, guilt, and depression. The idea that depression is often the result of the anger we refuse to acknowledge is accepted by many people, Freudians and non-Freudians alike.

Once upon a time, at a time when I was not feeling my best, my daughter, five years old, spilled an entire glass of chocolate milk in the living room. I lashed out at her verbally, telling her she was clumsy and had to learn to be more careful and how often hadn't I told her and...well, you know. She stood there stiffly with a sort of smoldering look in her eyes, and, of all things, pounded herself on her own head several times! Obviously, she would rather have pounded my head, but, well, you just don't do that, do you? Needless to say, I've felt guilty ever since.

Projection, which Anna Freud also called displacement outward, is almost the complete opposite of turning against the self. It involves the tendency to see your own unacceptable desires in other people. In other words, the desires are still there, but they're not your desires anymore. I confess that whenever I hear

someone going on and on about how aggressive everybody is, or how perverted they all are, I tend to wonder if this person doesn't have an aggressive or sexual streak in themselves that they'd rather not acknowledge.

Let me give you a couple of examples: A husband, a good and faithful one, finds himself terribly attracted to the charming and flirtatious lady next door. But rather than acknowledge his own, hardly abnormal, lusts, he becomes increasingly jealous of his wife, constantly worried about her faithfulness, and so on. Or a woman finds herself having vaguely sexual feelings about her girlfriends. Instead of acknowledging those feelings as quite normal, she becomes increasingly concerned with the presence of lesbians in her community.

Altruistic surrender is a form of projection that at first glance looks like its opposite: Here, the person attempts to fulfill his or her own needs vicariously, through other people.

A common example of this is the friend (we've all had one) who, while not seeking any relationship himself, is constantly pushing other people into them, and is particularly curious as to "what happened last night" and "how are things going?" The extreme example of altruistic surrender is the person who lives their whole life for and through another.

Reaction formation, which Anna Freud called "believing the opposite," is changing an unacceptable impulse into its opposite. So a child, angry at his or her mother, may become overly concerned with her and rather dramatically shower her with affection. An abused child may run to the abusing parent. Or someone who can't accept a homosexual impulse may claim to despise homosexuals.

Perhaps the most common and clearest example of reaction formation is found in children between seven and eleven or so: Most boys will tell you in no uncertain terms how disgusting girls are, and girls will tell you with equal vigor how gross boys are. Adults watching their interactions, however, can tell quite easily what their true feelings are!

Undoing involves "magical" gestures or rituals that are meant to cancel out unpleasant thoughts or feelings after they've already occurred. Anna Freud mentions, for example, a boy who would recite the alphabet backwards whenever he had a sexual thought, or turn around and spit whenever meeting another boy who shared his passion for masturbation.

In "normal" people, the undoing is, of course, more conscious, and we might engage in an act of atonement for some behavior, or formally ask for forgiveness. But in some people, the act of atonement isn't conscious at all. Consider the alcoholic father who, after a year of verbal and perhaps physical abuse, puts on the best and biggest Christmas ever for his kids. When the season is over, and the kids haven't quite been fooled by his magical gesture, he returns to his bartender with complaints about how ungrateful his family is, and how they drive him to drink.

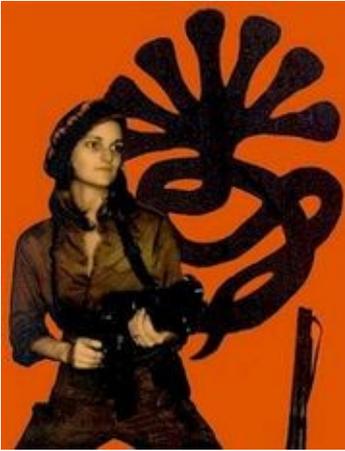
One of the classic examples of undoing concerns personal hygiene following sex: It is perfectly reasonable to wash up after sex. After all, it can get messy! But if you feel the need to take three or four complete showers using gritty soap – perhaps sex doesn't quite agree with you.

Introjection, sometimes called identification, involves taking into your own personality characteristics of someone else, because doing so solves some emotional difficulty. For example, a child who is left alone frequently, may in some way try to become "mom" in order to lessen his or her fears. You can sometimes catch them telling their dolls or animals not to be afraid. And we find the older child or teenager imitating his or her favorite star, musician, or sports hero in an effort to establish an identity.

A more unusual example is a woman who lived next to my grandparents. Her husband had died and she began to dress in his clothes, albeit neatly tailored to her figure. She began to take up various of his habits,

such as smoking a pipe. Although the neighbors found it strange and referred to her as "the man-woman," she was not suffering from any confusion about her sexual identity. In fact, she later remarried, retaining to the end her men's suits and pipe!

I must add here that identification is very important to Freudian theory as the mechanism by which we develop our superegos.



Identification with the aggressor is a version of introjection that focuses on the adoption, not of general or positive traits, but of negative or feared traits. If you are afraid of someone, you can partially conquer that fear by becoming more like them. Two of my daughters, growing up with a particularly moody cat, could often be seen meowing, hissing, spitting, and arching their backs in an effort to keep that cat from springing out of a closet or dark corner and trying to eat their ankles.

A more dramatic example is one called the Stockholm Syndrome. After a hostage crisis in Stockholm, psychologists were surprised to find that the hostages were not only not terribly angry at their captors, but often downright sympathetic. A more recent case involved a young woman named Patty Hearst, of the wealthy and influential Hearst family. She was captured by a very small group of self-proclaimed revolutionaries called the Symbionese Liberation Army. She was kept in closets, raped, and otherwise mistreated. Yet she apparently decided to join them, making little propaganda videos for them and even waving a machine gun around during a bank robbery. When she was later tried, psychologists strongly suggested she was a victim, not a criminal. She was nevertheless convicted of bank robbery and sentenced to 7 years in prison. Her sentence was commuted by President Carter after 2 years.

Regression is a movement back in psychological time when one is faced with stress. When we are troubled or frightened, our behaviors often become more childish or primitive. A child may begin to suck their thumb again or wet the bed when they need to spend some time in the hospital. Teenagers may giggle uncontrollably when introduced into a social situation involving the opposite sex. A freshman college student may need to bring an old toy from home. A gathering of civilized people may become a violent mob when they are led to believe their livelihoods are at stake. Or an older man, after spending twenty years at a company and now finding himself laid off, may retire to his recliner and become childishly dependent on his wife.

Where do we retreat when faced with stress? To the last time in life when we felt safe and secure, according to Freudian theory.

Rationalization is the cognitive distortion of "the facts" to make an event or an impulse less threatening. We do it often enough on a fairly conscious level when we provide ourselves with excuses. But for many people, with sensitive egos, making excuses comes so easy that they never are truly aware of it. In other words, many of us are quite prepared to believe our lies.

A useful way of understanding the defenses is to see them as a combination of denial or repression with various kinds of rationalizations.

All defenses are, of course, lies, even if we are not conscious of making them. But that doesn't make them less dangerous – in fact it makes them more so. As your grandma may have told you, "Oh what a tangled web we weave..." Lies breed lies, and take us further and further from the truth, from reality. After a while, the ego can no longer take care of the id's demands, or pay attention to the superego's. The anxieties come rushing back, and you break down.

And yet Freud saw defenses as necessary. You can hardly expect a person, especially a child, to take the pain

and sorrow of life full on! While some of his followers suggested that all of the defenses could be used positively, Freud himself suggested that there was one positive defense, which he called sublimation.

Sublimation is the transforming of an unacceptable impulse, whether it be sex, anger, fear, or whatever, into a socially acceptable, even productive form. So someone with a great deal of hostility may become a hunter, a butcher, a football player, or a mercenary. Someone suffering from a great deal of anxiety in a confusing world may become an organizer, a businessperson, or a scientist. Someone with powerful sexual desires may become an artist, a photographer, or a novelist, and so on. For Freud, in fact, all positive, creative activities were sublimations, and predominantly of the sex drive.

The stages

As I said earlier, for Freud, the sex drive is the most important motivating force. In fact, Freud felt it was the primary motivating force not only for adults but for children and even infants. When he introduced his ideas about infantile sexuality to the Viennese public of his day, they were hardly prepared to talk about sexuality in adults, much less in infants!

It is true that the capacity for orgasm is there neurologically from birth. But Freud was not just talking about orgasm. Sexuality meant not only intercourse, but all pleasurable sensation from the skin. It is clear even to the most prudish among us that babies, children, and, of course, adults, enjoy tactile experiences such as caresses, kisses, and so on.

Freud noted that, at different times in our lives, different parts of our skin give us greatest pleasure. Later theorists would call these areas **erogenous zones**. It appeared to Freud that the infant found its greatest pleasure in sucking, especially at the breast. In fact, babies have a penchant for bringing nearly everything in their environment into contact with their mouths. A bit later in life, the child focuses on the anal pleasures of holding it in and letting go. By three or four, the child may have discovered the pleasure of touching or rubbing against his or her genitalia. Only later, in our sexual maturity, do we find our greatest pleasure in sexual intercourse. In these observations, Freud had the makings of a psychosexual stage theory.

The **oral stage** lasts from birth to about 18 months. The focus of pleasure is, of course, the mouth. Sucking and biting are favorite activities.

The **anal stage** lasts from about 18 months to three or four years old. The focus of pleasure is the anus. Holding it in and letting it go are greatly enjoyed.

The **phallic stage** lasts from three or four to five, six, or seven years old. The focus of pleasure is the genitalia. Masturbation is common.

The **latent stage** lasts from five, six, or seven to puberty, that is, somewhere around 12 years old. During this stage, Freud believed that the sexual impulse was suppressed in the service of learning. I must note that, while most children seem to be fairly calm, sexually, during their grammar school years, perhaps up to a quarter of them are quite busy masturbating and playing "doctor." In Freud's repressive era, these children were, at least, quieter than their modern counterparts.

The **genital stage** begins at puberty, and represents the resurgence of the sex drive in adolescence, and the more specific focusing of pleasure in sexual intercourse. Freud felt that masturbation, oral sex, homosexuality, and many other things we find acceptable in adulthood today, were immature.

This is a true stage theory, meaning that Freudians believe that we all go through these stages, in this order, and pretty close to these ages.

The Oedipal crisis

Each stage has certain difficult tasks associated with it where problems are more likely to arise. For the oral stage, this is weaning. For the anal stage, it's potty training. For the phallic stage, it is the Oedipal crisis, named after the ancient Greek story of king Oedipus, who inadvertently killed his father and married his mother.

Here's how the Oedipal crisis works: The first love-object for all of us is our mother. We want her attention, we want her affection, we want her caresses, we want her, in a broadly sexual way. The young boy, however, has a rival for his mother's charms: his father! His father is bigger, stronger, smarter, and he gets to sleep with mother, while junior pines away in his lonely little bed. Dad is the enemy.

About the time the little boy recognizes this archetypal situation, he has become aware of some of the more subtle differences between boys and girls, the ones other than hair length and clothing styles. From his naive perspective, the difference is that he has a penis, and girls do not. At this point in life, it seems to the child that having something is infinitely better than not having something, and so he is pleased with this state of affairs.

But the question arises: where is the girl's penis? Perhaps she has lost it somehow. Perhaps it was cut off. Perhaps this could happen to him! This is the beginning of **castration anxiety**, a slight misnomer for the fear of losing one's penis.

To return to the story, the boy, recognizing his father's superiority and fearing for his penis, engages some of his ego defenses: He displaces his sexual impulses from his mother to girls and, later, women; And he identifies with the aggressor, dad, and attempts to become more and more like him, that is to say, a man. After a few years of latency, he enters adolescence and the world of mature heterosexuality.

The girl also begins her life in love with her mother, so we have the problem of getting her to switch her affections to her father before the Oedipal process can take place. Freud accomplishes this with the idea of **penis envy**: The young girl, too, has noticed the difference between boys and girls and feels that she, somehow, doesn't measure up. She would like to have one, too, and all the power associated with it. At very least, she would like a penis substitute, such as a baby. As every child knows, you need a father as well as a mother to have a baby, so the young girl sets her sights on dad.

Dad, of course, is already taken. The young girl displaces from him to boys and men, and identifies with mom, the woman who got the man she really wanted. Note that one thing is missing here: The girl does not suffer from the powerful motivation of castration anxiety, since she cannot lose what she doesn't have. Freud felt that the lack of this great fear accounts for fact (as he saw it) that women were both less firmly heterosexual than men and somewhat less morally-inclined.

Before you get too upset by this less-than-flattering account of women's sexuality, rest assured that many people have responded to it. I will discuss it in the discussion section.

Character

Your experiences as you grow up contribute to your personality, or character, as an adult. Freud felt that traumatic experiences had an especially strong effect. Of course, each specific trauma would have its own unique impact on a person, which can only be explored and understood on an individual basis. But traumas associated with stage development, since we all have to go through them, should have more consistency.

If you have difficulties in any of the tasks associated with the stages – weaning, potty training, or finding your sexual identity – you will tend to retain certain infantile or childish habits. This is called **fixation**. Fixation gives each problem at each stage a long-term effect in terms of our personality or character.

If you, in the first eight months of your life, are often frustrated in your need to suckle, perhaps because mother is uncomfortable or even rough with you, or tries to wean you too early, then you may develop an **oral-passive character**. An oral-passive personality tends to be rather dependent on others. They often retain an interest in "oral gratifications" such as eating, drinking, and smoking. It is as if they were seeking the pleasures they missed in infancy.

When we are between five and eight months old, we begin teething. One satisfying thing to do when you are teething is to bite on something, like mommy's nipple. If this causes a great deal of upset and precipitates an early weaning, you may develop an **oral-aggressive personality**. These people retain a life-long desire to bite on things, such as pencils, gum, and other people. They have a tendency to be verbally aggressive, argumentative, sarcastic, and so on.

In the anal stage, we are fascinated with our "bodily functions." At first, we can go whenever and wherever we like. Then, out of the blue and for no reason you can understand, the powers that be want you to do it only at certain times and in certain places. And parents seem to actually value the end product of all this effort!

Some parents put themselves at the child's mercy in the process of toilet training. They beg, they cajole, they show great joy when you do it right, they act as though their hearts were broken when you don't. The child is the king of the house, and knows it. This child will grow up to be an **anal expulsive** (a.k.a. anal aggressive) **personality**. These people tend to be sloppy, disorganized, generous to a fault. They may be cruel, destructive, and given to vandalism and graffiti. The Oscar Madison character in *The Odd Couple* is a nice example.

Other parents are strict. They may be competing with their neighbors and relatives as to who can potty train their child first (early potty training being associated in many people's minds with great intelligence). They may use punishment or humiliation. This child will likely become constipated as he or she tries desperately to hold it in at all times, and will grow up to be an **anal retentive personality**. He or she will tend to be especially clean, perfectionistic, dictatorial, very stubborn, and stingy. In other words, the anal retentive is tight in all ways. The Felix Unger character in *The Odd Couple* is a perfect example.

There are also two **phallic personalities**, although no-one has given them names. If the boy is harshly rejected by his mother, and rather threatened by his very masculine father, he is likely to have a poor sense of self-worth when it comes to his sexuality. He may deal with this by either withdrawing from heterosexual interaction, perhaps becoming a book-worm, or by putting on a rather macho act and playing the ladies' man. A girl rejected by her father and threatened by her very feminine mother is also likely to feel poorly about herself, and may become a wall-flower or a hyper-feminine "belle."

But if a boy is not rejected by his mother, but rather favored over his weak, milquetoast father, he may develop quite an opinion of himself (which may suffer greatly when he gets into the real world, where nobody loves him like his mother did), and may appear rather effeminate. After all, he has no cause to identify with his father. Likewise, if a girl is daddy's little princess and best buddy, and mommy has been relegated to a sort of servant role, then she may become quite vain and self-centered, or possibly rather masculine.

These various phallic characters demonstrate an important point in Freudian characterology: Extremes lead to extremes. If you are frustrated in some way or overindulged in some way, you have problems. And, although each problem tends to lead to certain characteristics, these characteristics can also easily be reversed. So an anal retentive person may suddenly become exceedingly generous, or may have some part of their life where they are terribly messy. This is frustrating to scientists, but it may reflect the reality of personality!

Therapy

Freud's therapy has been more influential than any other, and more influential than any other part of his theory. Here are some of the major points:

Relaxed atmosphere. The client must feel free to express anything. The therapy situation is in fact a unique social situation, one where you do not have to be afraid of social judgment or ostracism. In fact, in Freudian therapy, the therapist practically disappears. Add to that the physically relaxing couch, dim lights, sound-proof walls, and the stage is set.

Free association. The client may talk about anything at all. The theory is that, with relaxation, the unconscious conflicts will inevitably drift to the fore. It isn't far off to see a similarity between Freudian therapy and dreaming! However, in therapy, there is the therapist, who is trained to recognize certain clues to problems and their solutions that the client would overlook.

Resistance. One of these clues is resistance. When a client tries to change the topic, draws a complete blank, falls asleep, comes in late, or skips an appointment altogether, the therapist says "aha!" These resistances suggest that the client is nearing something in his free associations that he – unconsciously, of course – finds threatening.

Dream analysis. In sleep, we are somewhat less resistant to our unconscious and we will allow a few things, in symbolic form, of course, to come to awareness. These wishes from the id provide the therapist and client with more clues. Many forms of therapy make use of the client's dreams, but Freudian interpretation is distinct in the tendency to find sexual meanings.

Parapraxes. A parapraxis is a slip of the tongue, often called a Freudian slip. Freud felt that they were also clues to unconscious conflicts. Freud was also interested in the jokes his clients told. In fact, Freud felt that almost everything meant something almost all the time – dialing a wrong number, making a wrong turn, misspelling a word, were serious objects of study for Freud. However, he himself noted, in response to a student who asked what his cigar might be a symbol for, that "sometimes a cigar is just a cigar." Or is it?

Other Freudians became interested in **projective tests**, such as the famous Rorschach or inkblot tests. The theory behind these test is that, when the stimulus is vague, the client fills it with his or her own unconscious themes. Again, these could provide the therapist with clues.

Transference, catharsis, and insight

Transference occurs when a client projects feelings toward the therapist that more legitimately belong with certain important others. Freud felt that transference was necessary in therapy in order to bring the repressed emotions that have been plaguing the client for so long, to the surface. You can't feel really angry, for example, without a real person to be angry at. The relationship between the client and the therapist, contrary to popular images, is very close in Freudian therapy, although it is understood that it can't get out of hand.

Catharsis is the sudden and dramatic outpouring of emotion that occurs when the trauma is resurrected. The box of tissues on the end table is not there for decoration.

Insight is being aware of the source of the emotion, of the original traumatic event. The major portion of the therapy is completed when catharsis and insight are experienced. What should have happened many years ago – because you were too little to deal with it, or under too many conflicting pressures – has now happened, and you are on your way to becoming a happier person.

Freud said that the goal of therapy is simply " to make the unconscious conscious."

Discussion

The only thing more common than a blind admiration for Freud seems to be an equally blind hatred for him. Certainly, the proper attitude lies somewhere in between. Let's start by exploring some of the apparent flaws in his theory.

The least popular part of Freud's theory is the Oedipal complex and the associated ideas of castration anxiety and penis envy. What is the reality behind these concepts? It is true that some children are very attached to their opposite sex parent, and very competitive with their same-sex parent. It is true that some boys worry about the differences between boys and girls, and fear that someone may cut their penis off. It is true that some girls likewise are concerned, and wish they had a penis. And it is true that some of these children retain these affections, fears, and aspirations into adulthood.

Most personality theorists, however, consider these examples aberrations rather than universals, exceptions rather than rules. They occur in families that aren't working as well as they should, where parents are unhappy with each other, use their children against each other. They occur in families where parents literally denigrate girls for their supposed lack, and talk about cutting off the penises of unruly boys. They occur especially in neighborhoods where correct information on even the simplest sexual facts is not forthcoming, and children learn mistaken ideas from other children.

If we view the Oedipal crisis, castration anxiety, and penis envy in a more metaphoric and less literal fashion, they are useful concepts: We do love our mothers and fathers as well as compete with them. Children probably do learn the standard heterosexual behavior patterns by imitating the same-sex parent and practicing on the opposite-sex parent. In a male-dominated society, having a penis – being male – is better than not, and losing one's status as a male is scary. And wanting the privileges of the male, rather than the male organ, is a reasonable thing to expect in a girl with aspirations. But Freud did not mean for us to take these concepts metaphorically. Some of his followers, however, did.

Sexuality

A more general criticism of Freud's theory is its emphasis on sexuality. Everything, both good and bad, seems to stem from the expression or repression of the sex drive. Many people question that, and wonder if there are any other forces at work. Freud himself later added the death instinct, but that proved to be another one of his less popular ideas.

First let me point out that, in fact, a great deal of our activities are in some fashion motivated by sex. If you take a good hard look at our modern society, you will find that most advertising uses sexual images, that movies and television programs often don't sell well if they don't include some titillation, that the fashion industry is based on a continual game of sexual hide-and-seek, and that we all spend a considerable portion of every day playing "the mating game." Yet we still don't feel that all life is sexual.

But Freud's emphasis on sexuality was not based on the great amount of obvious sexuality in his society – it was based on the intense avoidance of sexuality, especially among the middle and upper classes, and most especially among women. What we too easily forget is that the world has changed rather dramatically over the last hundred years. We forget that doctors and ministers recommended strong punishment for masturbation, that "leg" was a dirty word, that a woman who felt sexual desire was automatically considered a potential prostitute, that a bride was often taken completely by surprise by the events of the wedding night, and could well faint at the thought.

It is to Freud's credit that he managed to rise above his culture's sexual attitudes. Even his mentor Breuer and the brilliant Charcot couldn't fully acknowledge the sexual nature of their clients' problems. Freud's mistake was more a matter of generalizing too far, and not taking cultural change into account. It is ironic that much of the cultural change in sexual attitudes was in fact due to Freud's work!

The unconscious

One last concept that is often criticized is the unconscious. It is not argued that something like the unconscious accounts for some of our behavior, but rather how much and the exact nature of the beast.

Behaviorists, humanists, and existentialists all believe that (a) the motivations and problems that can be attributed to the unconscious are much fewer than Freud thought, and (b) the unconscious is not the great churning cauldron of activity he made it out to be. Most psychologists today see the unconscious as whatever we don't need or don't want to see. Some theorists don't use the concept at all.

On the other hand, at least one theorist, Carl Jung, proposed an unconscious that makes Freud's look puny! But we will leave all these views for the appropriate chapters.

Positive aspects

People have the unfortunate tendency to "throw the baby out with the bath water." If they don't agree with ideas a, b, and c, they figure x, y, and z must be wrong as well. But Freud had quite a few good ideas, so good that they have been incorporated into many other theories, to the point where we forget to give him credit.

First, Freud made us aware of two powerful forces and their demands on us. Back when everyone believed people were basically rational, he showed how much of our behavior was based on biology. When everyone conceived of people as individually responsible for their actions, he showed the impact of society. When everyone thought of male and female as roles determined by nature or God, he showed how much they depended on family dynamics. The id and the superego – the psychic manifestations of biology and society – will always be with us in some form or another.

Second is the basic theory, going back to Breuer, of certain neurotic symptoms as caused by psychological traumas. Although most theorists no longer believe that all neurosis can be so explained, or that it is necessary to relive the trauma to get better, it has become a common understanding that a childhood full of neglect, abuse, and tragedy tends to lead to an unhappy adult.

Third is the idea of ego defenses. Even if you are uncomfortable with Freud's idea of the unconscious, it is clear that we engage in little manipulations of reality and our memories of that reality to suit our own needs, especially when those needs are strong. I would recommend that you learn to recognize these defenses: You will find that having names for them will help you to notice them in yourself and others!

Finally, the basic form of therapy has been largely set by Freud. Except for some behaviorist therapies, most therapy is still "the talking cure," and still involves a physically and socially relaxed atmosphere. And, even if other theorists do not care for the idea of transference, the highly personal nature of the therapeutic relationship is generally accepted as important to success.

Some of Freud's ideas are clearly tied to his culture and era. Other ideas are not easily testable. Some may even be a matter of Freud's own personality and experiences. But Freud was an excellent observer of the human condition, and enough of what he said has relevance today that he will be a part of personality textbooks for years to come. Even when theorists come up with dramatically different ideas about how we work, they compare their ideas with Freud's.

Readings

Freud's work is preserved in a 23 volume set called **The Standard Edition of the Complete Psychological Works of Sigmund Freud**. For a briefer overview, you might want to try Freud's **A General Introduction to Psychoanalysis** or **New Introductory Lectures on Psychoanalysis**. They are a part of **The Standard Edition**, but can also be found separately and in paperback. Or you might try a collection, such as **The Basic Writings of Sigmund Freud**.

Some of Freud's most interesting works are **The Interpretation of Dreams**, his own favorite, **The Psychopathology of Everyday Life**, about Freudian slips and other day-to-day oddities, **Totem and Taboo**, Freud's views on our beginnings, **Civilization and Its Discontents**, his pessimistic commentary on modern society, and **The Future of an Illusion**, on religion. All are a part of **The Standard Edition**, but all are available as separate paperbacks as well.

The father of psychoanalysis has been psychoanalyzed many times. First, there is his official biography, by his student Ernest Jones. More recent is a biography by Peter Gay. A highly critical account of Freud's work is Jeffrey Masson's **The Assault on Truth**. The commentary on and criticism of Freud's work is unending!