

## Psychosexual development

The concept of **psychosexual development**, as envisioned by Sigmund Freud at the end of the nineteenth and the beginning of the twentieth century, is a central element in his sexual drive theory, which posits that, from birth, humans have instinctual sexual appetites (libido) which unfold in a series of stages. Each stage is characterized by the erogenous zone that is the source of the libidinal drive during that stage. These stages are, in order: oral, anal, phallic, latency, and genital. Freud believed that if, during any stage, the child experienced anxiety in relation to that drive, that themes related to this stage would persist into adulthood as neurosis.

### Background

Freud observed that, at somewhat predictable points during early development, children's behavior often orients around certain body parts (the mouth during breast-feeding, the anus during potty-training, and later the genitals). Believing, due to his previous work with hysterical patients, that adult neurosis often has root in childhood sexuality, Freud proposed that these behaviors were childhood expressions of sexual fantasy and desire. He suggested that humans are born "polymorphous perverse", meaning that infants can derive sexual pleasure from any part of the body and that it is only through socialization that libidinal drives are focused into adult heterosexuality.

Due to the fairly predictable time-line that the childhood behaviors in question follow, Freud developed a model for what he considered to be the "normal" sexual development of the child, which he called "libido development". According to this theory, each child passes through five psychosexual stages. During each stage, the libido has a different erogenous zone as the source of its drives.

However, in the pursuit of satisfying these sexual urges, the child may experience failure or reprimands from its parents or society and may thus come to associate anxiety with this erogenous zone. In order to avoid this anxiety, the child becomes preoccupied with themes related to this zone, a phenomenon Freud termed fixation. Freud believed the fixation persists into adulthood and underlies the personality structure and psychopathology, including neurosis, hysteria and personality disorders. Freud called this psychosexual infantilism.

### Freud's model of psychosexual development

Stage	Age Range	Erogenous zone(s)	Consequences of Fixation
<b>Oral</b>	<b>0-18 months</b>	<b>Mouth</b>	Orally aggressive: Signs include chewing gum or ends of pens.

			Orally Passive:  Signs include smoking/eating/kissing/fellatio/cunnilingus  Fixation at this stage may result in passivity, gullibility, immaturity and manipulative personality
<b>Anal</b>	<b>18-36 months</b>	<b>Bowel and bladder elimination</b>	Anal retentive:  Obsession with organization or excessive neatness Anal expulsive: Reckless, careless, defiant, disorganized, Coprophiliac
<b>Phallic</b>	<b>3-5 years</b>	<b>Genitals</b>	Oedipus complex (in boys only according to Freud)  Electra complex (in girls only, later developed by Carl Jung)
<b>Latency</b>	<b>6 years- puberty</b>	<b>Dormant sexual feelings</b>	(People do not tend to fixate at this stage, but if they do, they tend to be extremely sexually unfulfilled.)
<b>Genital</b>	<b>Puberty and beyond</b>	<b>Sexual interests mature</b>	Frigidity, impotence, unsatisfactory relationships

## Oral phase

The first stage of psychosexual development is the oral stage, which lasts from the beginning of one's life up to (about) the 15th month. During this stage, the focus of gratification is on the mouth and pleasure is the result of nursing, but also of exploration of the surroundings (as infants tend to put new objects in their mouths). In this stage the id is dominant, since neither the ego nor the super ego is yet fully formed. Thus the baby does not have a sense of self and all actions are based on the pleasure principle.

The ego, however, is under formation during this first stage. There are two factors that contribute to the formation of the ego. Firstly, body image is developed, which implies that the infant recognizes that the body is distinct from the outer world. For instance, one will start understanding that one feels pain only when force is applied on one's own body. By the identification of the body boundaries, one starts developing the sense of ego. A second factor to which ego formation is attributed is experiences involving delay of gratification and leads to the understanding that specific behaviors can satisfy some needs. The infant gradually realizes that gratification is not immediate and that it has to produce certain behaviors to initiate actions that lead to gratification. An example of such behavior is crying, which seems to be purposeless during the first 2 months of the baby's life, but later seems to be used productively and is connected to certain needs. (Leach 1997).

The key experience in this stage is weaning, during which the child loses much of the intimate contact with the mother and leads to the first feeling of loss ever experienced by the baby. Weaning also adds to the baby's awareness of self, since it learns that not everything is under its control, but also that gratification is not always immediate.

In this stage, the gratification of needs will lead to the formation of independence (since the baby forms a clear idea about the limits of the self and has formed its ego), and trust (since the baby learned that specific behaviors will lead to gratification). On the other hand, a fixation can lead to passivity, gullibility, immaturity and unrealistic optimism, and also to the formation of a generally manipulative personality due to improper formation of the ego. This can be the result of either too much or too little gratification. In the case of too much gratification, the child does not learn that not everything is under its control and that gratification is not always immediate (which are the results of weaning), forming an immature personality. On the other hand, the child's needs may be insufficiently met, and thus the child becomes passive since it has learned that whether it produces behavior or not, no gratification will come. In some societies it is common for a child to be nursed by its mother for several years, whereas in others the stage is much shorter. Sucking and eating, however, compose the earliest memories for infants in every society. This stage holds special importance because some tribal societies commonly found in the Southwest Pacific and Africa, consider the stomach to be the seat of emotions.

### **Anal phase**

In the anal stage of the psychosexual development the focus of drive energy (erogenous zone) moves from the upper digestive tract to the lower end and the anus. This stage lasts from about the 15th month to the third year of age. In this stage, the formation of ego continues.

According to the theory, the major experience during this stage is toilet training. This occurs by the age of two (there may be fluctuations among different societies as to the age in which toilet training occurs), and results to conflict between the id, which asks for immediate gratification of its drives that involves elimination and activities related to it (such as handling faeces) and the demands of their parents. The resolution of this conflict can be gradual and non-traumatic, or intense and stormy, depending on the methods the parents will use to handle the situation. The ideal resolution will come if the child tries to adjust and the parents are moderate, so that the child will learn the importance of cleanliness and order gradually, which will lead to a self-controlled adult. If the parents emphasize on toilet training too much while the child decides to accommodate, this may lead to the development of compulsive personality, extensively concerned about order and neatness. On the other hand, if the child decides to heed the demands of the id and the parents give in, the child may develop a messy and self-indulgent personality. If the parents react, the child will have to comply, but it will develop a weakened sense of self, since the parents were the ones who controlled the situation, not the ego.

### **Phallic phase**

The phallic stage extends from about three to five years of age, and the erogenous zone associated with it as the area of the genitals. Even though the gratification is focused on the genitals, this is not in the form of adult sexuality, since the children are yet physically immature.

However, stimulation of genitals is welcomed as pleasurable and boys, like adult males, may have erections during their sleep. Children become increasingly aware of their body and are curious about the body of other children, but also their parents. Freud observed that children of this age can very often be observed taking off their clothes and playing “doctor” with each other, or asking their mothers whether she has a penis. These observations persuaded Freud that the gratification is focused on and around the genitals during this period.

The major conflict of this stage is called Oedipal conflict, the name deriving from Oedipus, who killed his father and unintentionally slept with his mother. Freud used the term Oedipal for both sexes, but other analysts proposed the female variant to be referred to as "Electra complex". In the beginning, for both sexes the primary care giver (at least in most societies) and main source of gratification is the mother. As the child develops, however, it starts forming a sexual identity and the dynamics for boys and girls alter. For both sexes, the parents become the focus of drive energy.

For the boy, the mother becomes more desired, while the father is the focus of jealousy and rivalry, since he is the one who sleeps with the mother, but still he is one of the main caregivers. The id wants to unite with the mother and kill the father (like Oedipus did), but the ego, based on the reality principle, knows that the father is stronger. The child also feels affectionate towards the father, one of the caregivers, and his feelings are ambivalent. The fear that the father will object to the boy's feelings is expressed by the id as fear that the father will castrate him. The castration fear is not rational, and occurs in a subconscious irrational level.

Freud argued that young girls followed more or less the same psychosexual development as boys. Whereas the boy would develop a castration anxiety, the girl would go on to develop penis envy, envy felt by females toward the males because the males possess a penis. The envy is rooted in the fact that without a penis, the female cannot sexually possess the mother as driven to by the Id. As a result of this realization, she is driven to desire sexual union with the father. After this stage, the woman has an extra stage in her development when the clitoris should wholly or in part hand over its sensitivity and its importance to the vagina. The young girl must also at some point give up her first object-choice, the mother, in order to take the father as her new proper object-choice. Her eventual move into heterosexual femininity, which culminates in giving birth, grows out of her earlier infantile desires, with her own child taking place of the penis in accordance with an ancient symbolic equivalence. Generally, Freud considered the Oedipal conflict experienced by girls more intense than that experienced by boys, potentially resulting in a more submissive and less confident personality.

In both cases the conflict between the id drives and the ego is resolved through two basic defense mechanisms of the ego. One of them is repression, which involves the blocking of memories, impulses and ideas from the conscious mind, but does not lead to resolution of the conflict. The second is identification, which involves incorporation of characteristics of the same-sex parent into the child's own ego. The boy by adopting this mechanism seeks for the reduction of castration fears, since his similarity with the father is thought to protect the boy from him. The identification of girls with the mother is easier, since the girl realizes that neither she, nor her mother have a penis. Freud's theory regarding the psychosexual dynamic present in female children in this point of their psychosexual development is termed, though not by Freud himself,

the Electra complex. Freud's theory of feminine sexuality, particularly penis envy, has been sharply criticized in both gender theory and feminist theory.

If the conflict is not resolved, a fixation in this stage may lead to adult women striving for superiority over men, if she had overwhelming feelings of devastation due to lack of penis, being seductive and flirtatious, or very submissive and with low self-esteem. On the other hand, men can exhibit excessive ambition and vanity. Overall, the Oedipal conflict is very important for the super ego development, since by identifying with one of the parents, morality becomes internalized, and compliance with rules is not any more the result of punishment fear. A poor identification with the opposite sex parent may lead to recklessness or even immorality.

### **Latency phase**

The latency period is typified by a solidifying of the habits that the child developed in the earlier stages. Whether the Oedipal conflict is successfully resolved or not, the drives of the id are not accessible to the ego during this stage of development, since they have been repressed during the phallic stage. Hence the drives are seen as dormant and hidden (latent), and the gratification the child receives is not as immediate as it was during the three previous stages. Now pleasure is mostly related to secondary process thinking. Drive energy is redirected to new activities, mainly related to schooling, hobbies and friends. Problems however might occur during this stage, and this is attributed to inadequate repression of the Oedipal conflict, or to the inability of the ego to redirect the drive energy to activities accepted by the social environment.

### **Genital phases**

The fifth and last stage of psychosexual development, the genital stage, lasts from puberty, about the twelfth year of age, and onwards. It actually continues until development stops, which is ideally in the eighteenth year of age, when adulthood starts. This stage represents the major portion of life, and the basic task for the individual is the detachment from the parents. It is also the time when the individual tries to come in terms with unresolved residues of the early childhood. In this stage the focus is again on the genitals, like in the phallic stage, but this time the energy is expressed with adult sexuality. Another crucial difference between these two stages is that, while in the phallic gratification is linked with satisfaction of the primary drives, the ego in the genital stage is well-developed, and so uses secondary process thinking, which allows symbolic gratification. The symbolic gratification may include the formation of love relationships and families, or acceptance of responsibilities associated with adulthood.

## **Criticism of Freud's theory of psychosexual development**

### **Scientific critique**

A common scientific criticism regarding Freudian theory of human psychosexual development is that Freud was personally overly fixated on human sexuality himself, which may have served to subjectively bias his work in favor of defining human development solely upon normative human sexual development. It is possible that said fixation regarding human sexuality could have

negatively influenced Freud in manners that may have led to him ignoring other significant variables that contribute to human's psychosexual development, such as hormonal and pheromonal activity. The stage that has caused the most controversy is the phallic stage. Freud supported his assertions on the Oedipal Complex with a series of clinical observations. In 1909, he published a case study of a boy called "little Hans", who had a phobia of horses. Freud connected Hans' fear for horses to his fear for his father. Hans's fear and anxiety were thought to be the result of various factors, including the birth of his sister, the desire of his id to replace his father as his mother's companion and conflicts over masturbation. Hans admitted his want to have children with his mother, which was considered an adequate proof for patient's sexual attraction for the opposite-sex parent. Little Hans, however, was unable to connect the fear for the horses with his father, and, as Freud admitted, "Hans had to be told many things that he could not say himself" and that "he had to be presented with thoughts which he had so far shown no signs of possessing", so that one may suggest that Freud manipulated the patient's mind.

Scientifically minded researchers have criticized Freud's statement, in his 1914 paper, "*On Narcissism*," that "It is impossible to suppose that a unity comparable to the ego can exist in the individual from the very start". Ample evidence documents a functioning ego in infants, even in neonates, contrary to Freud's speculation. The neonate shows surprising ability to track moving targets, to differentiate a familiar from an unfamiliar stimulus, and to react meaningfully with the care giver. Further, children show signs of superego behaviour earlier than Freud's suggestion that it does not arise until after the Oedipal Complex has been resolved.

Cultural considerations have largely influenced the assumptions within the psychodynamic perspective. Freud stated that the Oedipal Complex is universal and essential for development. Bronislaw Malinowski, an anthropologist who studied the behaviour of villagers in the Trobriand Islands, challenged common western views such as Freud's Oedipus complex and their claim to universality. In the Trobriand society the boys are disciplined by their mothers' brothers instead of their biological fathers (avuncular society). As he recounts in his work, *Sex and Repression in Savage Society* (1927), Malinowski found that boys had dreams in which the target of fears was not their father, but their uncle. Based on this observation, Malinowski argued that power, not sexual jealousy, is the base for the oedipal tension. As a result, Segall et al. hypothesized that Freud's theory was based on a misinterpretation of a confounding variable.

A survey of scientific research showed that while personality traits corresponding to Freud's oral, anal, Oedipal, and genital phases can be observed, they cannot be observed as stages in the development of children, nor can it be confirmed that such traits in adults result from childhood experiences (Fisher & Greenberg, 1977, p. 399).