Psychology

Lecture: #7 Psychodynamic theories

Doctor: Dr. AwsKhasawneh
Written by: Bayan N. Mohammad
Salam Awn 😊 How are you doing?

Today's lecture was the easiest psychology lecture among all we took, simple and easy to memorize.

The lecture topic is about Freud's psychodynamic theories.

**SLIDES ARE ENOUGH FOR EXAM PURPOSES**, this sheet is only for clarification and to ease the concepts especially definitions in slides 21-26.

NOW let's start our easy, short, simple lecture.

The purpose beyond studying psychodynamics is that there are many approaches to understand psychopathology and those were explained by many schools including Freud's, in which he tried to explain "Why we behave like this" compared to other schools which were concerning on "How we can treat such behaviors".

- **Psychodynamics**: systematic study of the psychological forces that underlie human behavior, feelings and emotions and how they might relate to early experiences.

- **It refers specifically to the psychoanalytical approach developed by Sigmund Freud (1856–1939) and his followers.**

Freud was a neurologist who was interested in psychology and started working on his idea which states that we are not responsible for our behaviors it is out of our hands because we behave depending on past experiences we accepted since we were children.

**Key Contributions of Freud**

- Psychic Determinism/ Dynamic Model
- Topographical Model of the Mind
- Unconscious, Preconscious, Conscious
- Stages of Psychosexual Development
- Structural Model of the Mind
- Defense Mechanisms
- Transference and Counter transference
Basic Principles of Psychodynamics:

1- Freud sees people as passive; behaviors determined by interaction of external reality and internal drives

2-Psychic Determinism: all behaviors driven by antecedent events, experiences. There are no accidents; nothing happens by chance.

Freud supposes that we as humans have a lot of instincts and as a way of simplification he divided them into two sets:

1- Eros instinct >>> known also as life instinct>>> also sexual instinct "libidinal"
2- Santos instinct>>> known also as death instinct >>> aggressive

Those two instincts are conflicting in which the first aims to protect the humanity and fulfillment of pleasure by means of sexual instinct why the later states that the person aims to die and return back to his origin "soil".

3-Libidinal (sexual, aggressive) instincts drive people

In children “libido” isn’t purely sexual, it’s pleasure through sensations (oral, anal gratification, etc.)

Freud believed that personality develops through a series of childhood stages during which the pleasure-seeking energies of the id become focused on certain erogenous areas.

For example at nearly the first two years of life child develops pleasure through "sucking" at which this stage is considered the oral stage followed by the anal stage then phallic stage at this stage the child develops the "Oedipus mood" which will resolve at nearly the age of 5y due to castration and the child starts to develop identification, if a boy failed to identify his father he might become homosexual.

Behaviors result from conflicts: Between instinctual libidinal drives (aggression, sex) and efforts to repress them from consciousness)
The Cathartic Method (Abreaction): a technique used to relieve tension and anxiety by bringing repressed feelings and fears to consciousness. Known to be used in conversational disorders.

According to Freud's theory, there is an internal conflict that will be transformed into symptoms; he assumed that the human brain can't bear this and will send an order to the eye to stop working suddenly causing blindness or for example sudden paralysis if this order was sent to the arm.

Primary vs. Secondary Gain "will talk about it later in somatization lec"

Transference and Counter transference

Ego-Syntonic vs. Ego-Dystonic

Let's move to the first mind model "Topographical model”.

Freud’s first model of psychopathology

Division of the mind into three different layers of consciousness:

Unconscious

Preconscious

Oedipus Complex: A boy wanting to possess his mother.

Identification: The boy becomes closer to his father feeling with guilt about his sexual thoughts towards his mother and fear of not being strong like his father according to castration theory, also this term is applied for a girl becomes closer to her mother.
Conscious

Unconscious

Contains repressed thoughts and feelings…. They are inaccessible but can appear in:

-Dreams

-Hypnosis

-Parapraxes (Freudian slips) 

A “slip of the tongue”

Errors of speech or hearing that reveal one’s true but unconscious feelings

Unexplainable forgetfulness.

Dreams: represent gratification of unconscious instinctive impulses and wish fulfillment

Unconscious is driven by Primary Process Thinking, which can be defined as having these characteristics:

- illogical; fantasy and has no concept of time.

- Only concern is immediate gratification (wish fulfillment and pleasure seeking)

- Does not take reality into account

- Seen in dreams, during hypnosis, some forms of psychosis, young children, psychoanalytic psychotherapy

This can be applied to a child who wants something NOW whether it is the appropriate condition and time or not, his need that brings pleasure can't be postponed.
Preconscious

- Accessible, but not immediately available
- Always running in the background/ behind the scenes

Conscious

- Fully and readily accessible
- Conscious mind does not have access to the unconscious
- Utilizes Secondary Process Thinking: which means
  Reality-based (takes external reality into consideration), logical, mature, time-oriented and can delay gratification

The second and the more developed mind structure of Freud is the "Structural model"

Freud’s second model of the mind to explain psychopathology

Developed in the early 1900’s

The mind contains three parts:

- ID "هو" ال
- Super Ego الالانا العليا
- Ego الالانا
The ID

- Home of instinctual Drives (sexual and aggressive drives)
- “I want it and I want it NOW”
- Completely unconscious
- Present at birth
- Operates on the Pleasure Principle and employs Primary Process Thinking

The superego

- Internalized morals/values- sense of right and wrong
- Suppresses instinctual drives of ID (through guilt and shame) and serves as the moral conscience.
- Largely unconscious, but has preconscious and conscious component
- Develops with socialization, and through identification with same-sex parent.

Begin to develop by about six years of age

The superego- 2 parts:

1- Conscience: Dictates what is proscribed (should not be done); results in guilt
2- Ego-Ideal: Dictates what is prescribed (should be done); results in shame
The ego

Created by the ID to help it interface with external reality

Mediates between the ID, Superego, and reality: can be described as negotiate between the superego and ID

Partly conscious and has unconscious, preconscious components

develops around 2-3 years of age.

Uses Secondary Process Thinking:

- Logical, rational

“Ego” Defense Mechanisms:

1- Result from interactions between the ID, Ego, and Superego

2- Thus, they’re compromises: حلول وسطية

- Attempts to express an impulse (to satisfy the ID) in a socially acceptable or disguised way (so that the Superego can deal with it)

3- They serve to protect an individual from unpleasant thoughts or emotions

Keep unconscious conflicts unconscious

4- Defense Mechanisms are primarily unconscious

The first and the most important defense mechanism is Repression:

Keeping an idea or feeling out of conscious awareness

The basic ego defense

Freud postulated that other defenses are employed only when repression fails
**Mature defenses:** are the defenses that once used, benefit the person and other people.

-Altruism: Unselfishly assisting others to avoid negative personal feelings.

"a man whose wife died of cancer so as defense mechanism to skip his sadness he volunteered to help cancer patients"

-Anticipation: Thinking ahead and planning appropriately.

-Humor: expressing personally uncomfortable feelings without causing emotional discomfort.

"bald or obese people for example who always laugh at those who are bald or obese as a defense mechanism to relief their discomfort"

-Sublimation: Rerouting an unacceptable drive in a socially acceptable way; redirecting the energy from a forbidden drive into a constructive act.

"a person who has aggressive instincts and studies medicine, he will try to specialize in a field at which he can do operations and cut organs such as surgery"

-Suppression: Deliberately (consciously) pushing anxiety-provoking or personally unacceptable material out of conscious awareness.

All are unconscious mature defenses except suppression.

"a person who has a problem right now and wants to concentrate on something else so he tries to forget about his problem"
**Immature defenses:**

- **Acting out:** Behaving in an attention-getting, often socially inappropriate manner to avoid dealing with unacceptable emotions or material.

Here we have to differentiate between the concept of acting out and bad behavior in which:

Acting out: is when a person acts badly for unknown reason, maybe due to a conflict that produces certain emotion that he can't deal with.

Bad behavior: acting badly due a certain known reason or need.

- **Somatization:** Unconscious transformation of unacceptable impulses or feelings into physical symptoms.

"emotional pain transforms into physical pain with no diagnosed disease, it is just due to a psychotic problem"

- **Regression:** Return to earlier level of functioning (childlike behaviors) during stressful situations.

" behaving like a child, like siblings in which the older will return as if he is a baby, elderly people who enter the hospital may behave like children, or those who shout in traffic jams instead of waiting calmly"

- **Denial:** Unconsciously discounting external reality.

" alcoholic person who has many complications due to alcohol consumption but denies that his illness is a consequence of this bad behavior. Also, cancer patients who refuse to take a treatment after being definitely diagnosed because they deny that they are ill, diabetics as well"

- **Projection:** Falsely attributing one’s own unacceptable impulses or feelings to others.

"people with paranoid "delusion of persecution" who are in fear that people want to harm them actually they have a hidden intend to harm those people, or a man who think that his wife is cheating on him some says that this would be his intend"
-Splitting: Selectively focusing on only part of a person to meet a current need state; seeing people as either all-good or all-bad. Serves to relieve the uncertainty engendered by the fact that people have both bad and good qualities

"seen in people with "border line personality" who divide people into two sets either good or bad, they can't accept that every person has positive and negative sides in his personality, and easily devaluate the person if something they hate happened"

-Displacement: Redirection of unacceptable feelings, impulses from their source onto a less threatening person or object.

"a person who was punched by his director in workplace, this will lead him to act negatively toward his family members"

-Undoing: believing one can magically reverse past events caused by incorrect behavior by now adopting correct behavior.

"a person who is drug addict, alcoholic, has unhealthy lifestyle developed HIV, then started a new lifestyle without drugs or alcohol persuading himself that this will reverse the condition and return him without the disease as before"

-Dissociation: Mentally separating part of consciousness from reality; can result in forgetting certain events.

"a person who was exposed to trauma might forget his name or workplace, also people who face disastrous conditions like wars and relative death might have dissociation to face this anxiety"

-Reaction formation: Transforming an unacceptable impulse into a diametrically opposed thought, feeling, attitude, or behavior; denying unacceptable feelings and adopting opposite attitudes.(unconscious hypocrisy)

"when you meet someone you hate and hug him this is considered as conscious hypocrisy while a woman impressed by her husband's friend she will behave and talk badly about him for unknown reason this is known as unconscious hypocrisy"
-Isolation of affect: Stripping an idea from its accompanying feeling or affect. Idea is made conscious but the feelings are kept unconscious.

"a person who was informed by his physician that he has cancer, when asked about the test results by his family members he will answer without having any kind of feelings toward his status"

-Intellectualization: Using higher cortical functions to avoid experiencing uncomfortable emotions.

"a ship which is sinking and people are facing death, the ship master gathered them and explained the scientific reason beyond this disaster"

-Rationalization: Unconscious distortion of reality so that it’s negative outcome seems reasonable or “not so bad, after all. Giving seemingly reasonable explanations for unacceptable or irrational feelings.

"a person who has his arm amputated and said: that is good, I will not steal again!!!!"

-Identification: unconsciously patterning one’s behavior after that of someone more powerful( either +ve or –ve)

"a resident physician will be unconsciously identified with his doctor whether he is calm or always shouting on patients and a lot of other behaviors"
**Transference and countertransference:**

Transference: feelings from the patient towards the doctor.

Countertransference: feelings from the doctor towards the patient.

- **Unconscious mental attitudes based on important past personal relationships.**

- **Transference:** Displacement (false attribution) of feelings, attitudes, behavioral expectations and attributes from important childhood (with parents) relationships to current ones.

1 - positive transference: patient has confidence in the doctor. If intense, the patient may over-idealize the doctor or develop sexual feeling toward the doctor.

2 - negative transference: the patient may become resentful or angry toward the doctor if the patient’s desires and expectations are not realized. This may lead to noncompliance with medical advice.

**Countertransference:** feelings about a patient who reminds the doctors of a close friend or relative. Can interfere with the doctor’s medical judgment.

*Good luck 😊*