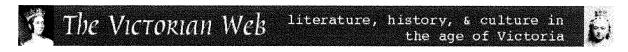
Freud's Psychosexual Stages of Development

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[Victorian Web Home -> Biology -> Psychology -> Sigmund Freud]

Freud advanced a theory of personality development that centered on the effects of the sexual pleasure drive on the individual psyche. At particular points in the developmental process, he claimed, a single body part is particularly sensitive to sexual, erotic stimulation. These *erogenous zones* are the mouth, the anus, and the genital region. The child's <u>libido</u> centers on behavior affecting the primary erogenous zone of his age; he cannot focus on the primary erogenous zone of the next stage without resolving the developmental conflict of the immediate one.

A child at a given stage of development has certain needs and demands, such as the need of the infant to nurse. Frustration occurs when these needs are not met; Overindulgence stems from such an ample meeting of these needs that the child is reluctant to progress beyond the stage. Both frustration and overindulgence lock some amount of the child's libido permanently into the stage in which they occur; both result in a *fixation*. If a child progresses normally through the stages, resolving each conflict and moving on, then little libido remains invested in each stage of development. But if he fixates at a particular stage, the method of obtaining satisfaction which characterized the stage will dominate and affect his adult personality.

The Oral Stage

The oral stage begins at birth, when the oral cavity is the primary focus of libidal energy. The child, of course, preoccupies himself with nursing, with the pleasure of sucking and accepting things into the mouth. The *oral character* who is frustrated at this stage, whose mother refused to nurse him on demand or who truncated nursing sessions early, is characterized by pessimism, envy, suspicion and sarcasm. The overindulged oral character, whose nursing urges were always and often excessively satisfied, is optimistic, gullible, and is full of admiration for others around him. The stage culminates in the primary conflict of weaning, which both deprives the child of the sensory pleasures of nursing and of the psychological pleasure of being cared for, mothered, and held. The stage lasts approximately one and one-half years.

The Anal Stage

At one and one-half years, the child enters the anal stage. With the advent of toilet training comes the child's obsession with the erogenous zone of the anus and with the retention or expulsion of the feces. This represents a classic conflict between the <u>id</u>, which derives pleasure from expulsion of bodily wastes, and the <u>ego</u> and <u>superego</u>, which represent the practical and societal pressures to control the bodily functions. The child meets the conflict between the parent's demands and the child's desires and physical capabilities in one of two ways: Either he puts up a fight or he simply refuses to go. The child who wants to fight takes pleasure in excreting maliciously, perhaps just before or just after being placed on the toilet. If the parents are too lenient and the child manages to derive pleasure and success from this expulsion, it will result in the formation of an *anal expulsive character*. This character is generally messy, disorganized, reckless, careless, and defiant. Conversely, a child may opt to retain feces, thereby spiting his parents while enjoying the pleasurable pressure of the built-up feces on his intestine. If this tactic succeeds and the child is overindulged, he will develop into an *anal retentive character*. This character is neat, precise, orderly, careful, stingy, withholding, obstinate, meticulous, and passive-aggressive. The resolution of the anal stage, proper toilet training, permanently affects the individual propensities to possession and attitudes towards authority. This stage lasts from one and one-half to two years.

The Phallic Stage

The phallic stage is the setting for the greatest, most crucial sexual conflict in Freud's model of development. In this stage, the child's erogenous zone is the genital region. As the child becomes more interested in his genitals, and in the genitals of others, conflict arises. The conflict, labeled the *Oedipus complex* (The *Electra complex* in women), involves the child's unconscious desire to possess the opposite-sexed parent and to eliminate the same-sexed one.

In the young male, the Oedipus conflict stems from his natural love for his mother, a love which becomes sexual as his libidal energy transfers from the anal region to his genitals. Unfortunately for the boy, his father stands in the way of this love. The boy therefore feels aggression and envy towards this rival, his father, and also feels fear that the father will strike back at him. As the boy has noticed that women, his mother in particular, have no penises, he is struck by a great fear that his father will remove his penis, too. The anxiety is aggravated by the threats and discipline he incurs when caught masturbating by his parents. This castration anxiety outstrips his desire for his mother, so he represses the desire. Moreover, although the boy sees that though he cannot posses his mother, because his father does, he can posses her vicariously by identifying with his father and becoming as much like him as possible: this identification indoctrinates the boy into his appropriate sexual role in life. A lasting trace of the Oedipal conflict is the superego, the voice of the father within the boy. By thus resolving his incestuous conundrum, the boy passes into the *latency period*, a period of libidal dormancy.

On the Electra complex, Freud was more vague. The complex has its roots in the little girl's discovery that she, along with her mother and all other women, lack the penis which her father and other men posses. Her love for her father then becomes both erotic and envious, as she yearns for a penis of her own. She comes to blame her mother for her perceived castration, and is struck by *penis envy*, the apparent counterpart to the boy's castration anxiety. The resolution of the Electra complex is far less clear-cut than the resolution of the Oedipus complex is in males; Freud stated that the resolution comes much later and is never truly complete. Just as the boy learned his sexual role by identifying with his father, so the girl learns her role by identifying with her mother in an attempt to posses her father vicariously. At the eventual resolution of the conflict, the girl passes into the latency period, though Freud implies that she always remains slightly fixated at the phallic stage.

Fixation at the phallic stage develops a *phallic character*, who is reckless, resolute, self-assured, and narcissistic--excessively vain and proud. The failure to resolve the conflict can also cause a person to be afraid or incapable of close love; Freud also postulated that fixation could be a root cause of homosexuality.

Latency Period

The resolution of the phallic stage leads to the latency period, which is not a psychosexual stage of development, but a period in which the sexual drive lies dormant. Freud saw latency as a period of unparalleled repression of sexual desires and erogenous impulses. During the latency period, children pour this repressed libidal energy into asexual pursuits such as school, athletics, and same-sex friendships. But soon puberty strikes, and the genitals once again become a central focus of libidal energy.

The Genital Stage

In the genital stage, as the child's energy once again focuses on his genitals, interest turns to heterosexual relationships. The less energy the child has left invested in unresolved psychosexual developments, the greater his capacity will be to develop normal relationships with the opposite sex. If, however, he remains fixated, particularly on the phallic stage, his development will be troubled as he struggles with further repression and defenses.

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