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Article

Psychoanalysis: An Overview

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ABSTRACT

Psychotherapeutic interventions have been applied to a wide range of mental or psychological problems. Stressful life situations often compels people to seek help and support outside their social circle. Some seek this psychological support through indirect route (like Court order) or on their own will. Psychotherapy is carried on in many ways and Psychoanalysis is one of the most sought and successful therapy. Psychoanalysis is a system of therapy that involves Freudian concept of unconscious conflicts in the past but recent studies in this Psychodynamic approach has introduced insight and emotional understanding of inner conflicts. Psychoanalysis is much more than a quirky approach to understanding the human mind. It is a specific form of talking therapy grounded in a complex psychological functioning. People are able to feel safe as they explore feelings, desires and memories with the help of a trained and skilled analyst. Sigmund Freud was the founder of psychoanalysis and focused on the unconscious mind. Later Erick Erickson expanded on Freud's theories and stressed on the importance of lifelong growth. Various other Psychoanalysts' have revolutionised this therapy and it is considered a valid form of treatment for most anxiety and personality issues.

Keywords: Psychoanalysis, Psychodynamic, Unconscious, Revolutionised, Anxiety, Psychotherapy, Psychosurgery, Chemotherapy, Id, Ego, superego, Hypnosis, Free Association, Conflicts, Defense Mechanisms

The scene is etched forever on my mind- Peter lying on the stretcher where the two orderlies had put him down for a moment, while the ambulance waited just outside the front door. Peter had looked up at me and smiled through his pain, his eyes full of tenderness, and I had leaned close to him and said, "Darling, I'll see you in the morning."

As I stood looking out towards the far horizon, I knew that those words would go singing in my heart down all the years... "See you, Darling, see you in the morning..."—Catherine Marshall, *A Man Called Peter*

Yes, this is just an example where a thought or just few words leave a mark on the mind of an individual and these words even if not in the conscious awareness but in the unconscious primacy manoeuvres and distorts the normal functioning. People often faced with undesirable circumstances are pushed towards the mental instability and lose control over the thoughts and behaviour. This mental fatigue and disequilibrium require therapeutic

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interventions in context with emotional wellbeing. Psychiatric treatment for any kind of mental illness or disorder comprises of medication, psychotherapy and counselling. Over the centuries, approaches to treating people with psychological disorder have ranged from the benign to barbarous. Very disturbed behaviour came to be seen as evidence that the person was "possessed" by Satan. From the time of the Roman Empire up until the middle age, these people were treated with sympathy. During 1400s, disturbed people were kept in the institutions that were little more than warehouses. It was during the end of eighteenth century the picture began to brighten at least in some parts of the western world. However, during the nineteenth century the first mental-health revolution promoted the medical model in the treatment of mental disorders. The legacy of this approach is seen in today's biomedical therapies, efforts to modify brain and nervous system functioning by means such as surgery, electric shock and drugs.

The second mental-health revolution was ushered in around the turn of 1900's, primarily by Sigmund Freud and his colleges Development since Freud's time may not qualify as "Mental health revolutions" but they have certainly brought about new ways of thinking about and treating abnormal behaviour. Sigmund Freud and his followers introduced psychoanalytic methods that are still in use today. The risk posed by ECT psychosurgery and chemotherapy are worrisome and that gave rise to alternative treatment methods that do not involve any change in biological functioning but emphasize psychological change. On the basis of psychological approaches many therapies are adopted that aim at ravelling the psychological factors involved in a problem sharpening people's understanding of themselves and others and teaching specific skills to enhance their adjustment. Such therapies are called psychotherapy based on Sigmund Freud's psychodynamic theory.

Early life and Training of Sigmund Freud

Sigmund Freud born on May 6, 1856 Moravia, Austrian Empire -died September 23,1939, London, England was an Austrian neurologist and founder of psychoanalysis. Freud's father was a Jewish wool merchant who was a relatively remote and authoritarian figure, while his mother appears to have been more emotionally available. Although Freud had two older half-brothers his strongest attachment seen to have been to a nephew John, who was one year his senior and provided the model of intimate friend and hated rival that Freud reproduced often at later stages of his life. In 1859, Freud's family was compelled for economic reasons to move to Vienna where he qualified as a doctor of medicine in 1881. Freud lived and worked in Vienna having set up his clinical practice until 1886 and later left Austria to escape Nazi persecution and in 1939, he died in exile in the United Kingdom. His area of interest was in neurophysiologic research specifically investigation of the sexual anatomy of eels and the physiology of the fish nervous system. He also studied philosophy amongst his principal concerns in the 1880's was the anatomy of the brain specifically the medulla oblongata. He intervened in the important debates about aphasia with his monograph of 1891, 'Zur Auffasung der Aphasien' in which he coined the term agnosia and counselled against a too lacationist view of the explanation of neurological deficits. He emphasized brain function rather than brain structure and explained the term 'cerebral paralysis' and published several medical papers on 'cerebral palsy'. In founding psychoanalysis, Freud developed therapeutic techniques such as the use of 'free association' and discovered transference establishing its central role in the analytic process psychoanalysis is based upon several specific ideas about personality and psychotherapy.

Freud's view of the unconscious mind

Sigmund Freud was a great mind who studied three levels of human mind-unconscious subconscious and conscious. He believed that the unconscious mind stores all the thoughts memories and feelings that are disturbing or traumatic. He thought that a vast majority of our memories are stored in the unconscious mind and these memories affect our personality and assumed to be the cause of neurotic behaviour. The analyst uses several techniques to discover this unconscious process and bring them into view. He also gave the concept of id, ego and super ego. For most of Freud's patients, the unravelling and digging the memories from the unconscious mind involved reconstructing and even reliving the past-often going as far back as early childhood. He favoured hypnosis as a method to reach to the unconscious but gradually moved towards free association in which the patient said everything that came to mind no matter how silly illogical or forbidden. He pieced together a picture of personality and devised a theory of personality dynamics in which conscious and unconscious motivation and ego-defense mechanisms play a major role. He developed the concept of the *id*, ego and superego. The ego is the everyday personality that we present to the world but represents only a fraction of a person's true self. The superego serves as a sort of conscience and internalizes moral social and culture norms. The id is a pleasure-seeking, primitive structure that is present at birth the entire id is unconscious and the ego and superego include material at all three levels of consciousness. According to Freud's psychoanalytic theory we all experience certain sexual and aggressive urges springing from our id. Some of these urges clash with the barriers imposed by our egos and with the taboos of society that have been incorporated into our superegos. We therefore repress urges-hide them from our conscious awareness in our unconscious minds. The urges are still there, pushing to be expressed but in conflict with our ego and superegos, we are afraid to express our id impulses and after they have been repressed, we do not know what or why we are afraid this vague fear of "I know not" is called anxiety. When anxiety is triggered, we use a variety of defense mechanisms to ward off or reduce it. The abnormal neurotic behaviour occurs when these defense mechanisms require too much of our psychic energies and distort our sense of reality.

Probing the Unconscious-Psychoanalysis

In the early years of Freud's private practice, he used hypnosis with many of his patients, preferring a more dominant, paternalistic technique. However, after further developing psychoanalysis and free association he rejected traditional hypnosis because it did not effectively do away with client's resistance, yielding incomplete information and temporary results. Because unconscious impulses and conflicts are assumed the cause of neurotic behaviour, the analyst uses several techniques to discover these unconscious processes and nudge them into view. One of this technique is free association Freud used this technique in which patients are asked to let their thoughts run free, reporting them as they occur. To facilitate free association, patients were asked to relax on a couch out of sight so as not to impede the patient's flow of free association. This gives an insight to the analyst about the repressed thoughts, feelings and conflicts. The analyst (Freud) used unusual statements, thoughts, sudden memory lapses to let the patient express the blocked memories too. Freud believed that these associations flowed directly from specific characteristics of that patient and issues of psychological importance to the patient. He also believed that another pathway to the unconscious was dream analysis'. In analyzing dreams, the psychoanalyst tries to understand the particular urges that a patient has represented & the conflicts that are hidden from view. Feud felt that id urges and unconscious conflicts push for expression even in our dreams bit in a disguised form. Dream material is often analyzed and used in the explanation of the complexes bringing repressed wishes, urges, desires at conscious level is a long

process and time consuming. The client usually resists and resistance is one of the two psychoanalytic phenomena that serve dual purpose. On the one hand, resistance prevents the repressed idea, or desire from surfacing and the second is the phenomena of transference. Encountering resistance in the psychoanalytic process is an indication of progress of therapy. This resistance is patients struggle to prevent painful material from being brought to the surface and faced directly. Often the resistance is interpreted for the patient the analyst explains why the patient may be rejection an interpretation or forgetting.

The analyst also interprets and builds on the transference that develop during analysis transference can help patients overcome the kinds of resistance. It helps the psychoanalyst understand the conflicts within the patient. By working through conflicts, the patient lessons the need to repress them and anxiety is reduced thus weakening the neurotic behaviour that brought the patient into treatment through psychoanalysis.

Modern Day Psychoanalysis

Psychoanalysis is much more than a quirky approach to understanding the human mind. It is a specific form of talking therapy grounded in a complex psychological functioning. Freud explained that what the adult individual experiences as problem is only the result of a repressed complex in the early childhood. However, his descendents like Jung, Adler and Horney hold a different concept about the unconscious mind and repressed urges. Jung's shift was more radical. So all the Jungian psychoanalysis accept the validity of positive elements of myth, religion and collective human consciousness as containing spiritual seeds for solving psychological problems. Alfred Adler placed special emphasis on social and interpersonal factors. Freud's daughter Anna Freud continued purely in her father's framework, but developed new models relevant to her specially the psychoanalysis of children. Karen Horney like Adler emphasized on social factors. While some Freudian psychoanalysts remain pure Freudian, others opted for neo- Freudian psychoanalysis (like Horney, Sullivan and Fromm) that focused on unconscious socialized behaviours. Modern day psychoanalysts like Winnicott (1950) emphasized on empathy, true self and false self. He has been a major influence for the American and Italian psychoanalysts. Whereas Freudian psychoanalysis is still the matter of interest in British psychoanalysis, Winnicott's psychoanalysis focuses more on childhood stages. Winnicottian child develop mainly during moments of clam, sheltered from instinctual storms whereas the Freudian child emerges from the play of impulses.

Today, psychoanalysis is much more rationally focused. Nobel laureate, *Eric Kandel*, has stated that psychoanalysis offers the most comprehensive understanding of the mind among all the other psychological theories. This therapy focuses and values the person over the diagnosis. It offers a secure acceptance and validation of the individual the psychoanalytic models provide a compassionate and normalizing perspective. The psychoanalyst does not usually give lectures or advice about how the patient ought to manage his or her life. Instead, the analyst prefers to help the patient understand why he or she is unable to solve problems and internal conflicts that might be preventing one from knowing what to do in life.

CONCLUSION

Freud's idea about unconscious mind, defense mechanisms, resistance, transference, dream analysis and free association continue to shape modern psychoanalysis. Some of his work is refined and challenged but still psychoanalysis remains valuable for Freudian understanding human behaviour. Because of its emphasis on self-reflection, insight and uncovering repressed desires or hidden motives helps individuals gain a deeper understanding of

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themselves. Psychoanalysis is not easy no matter how much someone wants and need analysis, they have to be able to take it. The capacity to take the treatment is often referred to as psychological sturdiness. It is a person tenacity to get well, a determination to overcome the obstacles in his or her way. Psychoanalysis is helpful in psychological difficulties that are longstanding like chronic or recurring depression, anxiety, anger, relationship difficulties or low self-esteem. There is strong accumulating evidence from psychology research including psychotherapy research and neuroscience that support the validity and clinical usefulness of several psychoanalytic basic constructs. Regular treatment with psychoanalytic therapy helps in reliable relationship building between the therapist and patient. Because of the deep emotional work involved, it might require regular session times usually 50 minutes every week. The patient is free to set their own pace and agenda for the treatment. In short, psychoanalysis is a unique therapeutic process that involves comprehensive theoretical understanding of personality issues and anxiety related disorders.

REFERENCES

Butcher, Hooley ans Mineka (2023) Abnormal Psychology, pg.,668-670

- Catherine Marshall (2002) A Man Called Peter.
- Donald Winnicott. (2023, May 12). Wikipedia. https://en.m.wikipedia.org/wiki/Donald_W innicott
- Gerson, M. (2020, May 28). 7 Reasons Why Psychoanalysis Is Still Relevant Today. PsychStudies.net.https://www.psychstudies.net/7-reasons-why-psychoanalysis-is-still -relevant-today/
- Kandel ER. A new intellectual framework for psychiatry. *Am J Psychiatry*. 1998; 155:457–469.
- Sigmund Freud and Emile Coué Hypnosis in History. (n.d.). Hypnosis.edu. https://hypnosis.edu/history/freud-and-coue
- Westen D. The scientific legacy of Sigmund Freud: toward a psychodynamically informed psychological science. *Psychol Bull.* 1998; 124:333–371.
- Yakeley, J. (2018). Psychoanalysis in modern mental health practice. *The Lancet Psychiatry*, 5(5), 443–450. https://doi.org/10.1016/s2215-0366(18)30052-x

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Conflict of Interest

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