Psychodynamic approach

This approach became dominant in the late 1890s until the 1950s. It is still used today in mental health settings but it is no longer the dominant approach.

Assumptions of the approach

- Our behaviour and feelings are motivated by unconscious factors
- Our behaviour and feelings as adults (including mental disorders) are rooted in our childhood experiences.
- Personality is made up of three parts: the id, ego and super-ego.
- Parts of the unconscious mind (the id and superego) are in constant conflict with the conscious part of the mind (the ego). These conflicts create anxiety, which the ego deals with by using defence mechanisms such as repression.

Summary of the approach:

1. **Three parts of the personality:**
   - The ID is present at birth; the ID contains biological instincts and drives. It is motivated by the pleasure principle.
   - The ego (the ‘self’) develops from 1 to 3 years old. It is motivated by the reality principle.
   - The superego develops from 3 to 5 years old. It is motivated by the morality principle.
   
   When the ego can mediate the demands of the ID and the superego with reality and the conflicts between these two parts then we are mentally healthy, however when this does not occur we develop mental disorders. These conflicts are unconscious; we protect ourselves against the anxiety caused by these conflicts by using defence mechanisms such as repression.

2. **Structure of the mind:**
   - The conscious: The small amount of mental activity we know about. It contains thoughts and perceptions.
   - The preconscious: contains things we become aware of if we focus i.e. stored knowledge and memory of past events.
   - The unconscious: Contains things we are unaware of and cannot become aware of as according to Freud this material is placed in the unconscious mind because it creates too much anxiety for the ego to cope with.

3. **Psychosexual stages of development**

   We are driven to seek pleasure by gratifying the Id’s desires. Sources of pleasure are determined by the location of the libido (life-force). As a child moves through different developmental stages, the location of the libido and hence sources of pleasure change. If something creates a conflict during one of the stages we could become “fixated” at this stage and this will affect our later behaviour.

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**Methodology**

Freud used mainly case studies; he studied individuals that he saw in therapy. These case studies provide a unique insight into these particular patients’ behaviour because of depth and richness of detail collected over a long period of time. However the interpretation could be influenced by researcher bias also they were done mainly on middle-class Viennese women suffering from neurotic disorders living in a sexually suppressed culture in the nineteenth century so the sample lacks population validity.

**Strengths**

- This was the first approach in psychology to recognise the importance of early childhood experiences in later life and as a possible cause of mental disorders.
- It devised one of the first “talking cures” for mental disorders. It is still used but rarely because it is very expensive and time consuming. Psychoanalysis has been widely used and adapted and is the base for many psychological therapies.

**Weaknesses**

- The concepts of Id, ego and superego are very abstract and difficult to test experimentally. Evidence for these was obtained from case studies (Little Hans and Anna O). However the sample used in this case studies is mainly Austrian so lack population validity.
- The theory is not falsifiable as if people behave in the way predicted by the theory it is viewed as support, if they don’t it is argued that they are using defence mechanisms.
- The individual is not seen as responsible for their behaviour as the conflicts which motivate the behaviour are unconscious there is nothing they can do about it without an analyst, they are disempowered.
- It cannot explain the physical symptoms observed in some disorders such as enlarged ventricles in schizophrenics.
- This approach is determinist, as ti claims that infant behaviour is determined by innate forces, whereas adult behaviour is determined by childhood experiences.