Sigmund Freud and Libido Development


Freud's theory of human development, proposed both an ego development and a libido development. But these developmental processes are interwoven and are only separated abstractly for theoretical purposes. Ego development pertains to the maturation of cognitive functioning. It addresses 1) the progressive differentiation of ego consciousness out of the matrix of narcissism, 2) the development of the reality principle, 3) the progressive increase of secondary process thinking, 4) the development of psychological defense mechanisms and 5) a progressively more differentiated approach to interpersonal relations. Libido development, on the other hand, pertains to the transformations of psychosexual development. It addresses the sites of libidinal gratification as they shift from the mouth to the anus to the genitalia (Freud, 1916-1917, 1963, pp. 320-338; Freud, 1905,1953). The erogenous zones are those highly sensitive openings in the human body rimmed with mucous membrane and subject to intense socialization processes, that is, social control.

The Oral Stage

The Oral Stage is named after the oral orifice, which Freud identified as the primary site of libidinal gratification for the infant. It is divided in two phases: the oral sucking phase and the oral masticating and devouring phase (Sterba, 1947, pp. 19-34). The infant initially engages in pleasurable sucking at the nipple, thumb sucking, eating, making gurgling sounds, cooing, mouthing objects, inhaling, exhaling, burping, and engaging in mouth play. It forms the basis of the ego functions of introjection and ejection, which then become a part of judgment and reality testing (Nagera, 1969, p. 41). The infant later engages in the oral aggressive activities of biting, chewing, spitting, and pursuing the cannibalistic sexual aim. It is through this oral incorporative mode of existence and participation in the world that the infant incorporates the world. The encounter between mother and infant is one in which the nipple enters the mouth and the two greet each other eye to eye. At the Oral Stage, one masters the world and merges with it by swallowing it whole. Orality is the bodily metaphor pertaining to the infant's incorporation of the world whether the infant takes it in whole, bites it apart into little pieces or spits it out. The Oral Stage is about breastfeeding, the encounter between mother and baby, the reciprocal greetings of one another, bonding, attachment and the constellation of the infant’s psyche into a subjectivity. Orality is expressed in avoiding and indulging in food, biting, sucking, chewing, drinking, smoking, oral sex, speaking, arguing, biting critiques, and so on.

The Anal Stage

In the Anal Stage of libido development, the cathexis, or focus of attention and “sexual energy”, shifts from the mouth to the anal sphincter, without abandoning the oral erogenous zone. That is to say, the anal sphincter takes primary importance without the mouth and orality losing their on-going significance. The mouth, or oral erogenous zone, is the site where we suck in, spit out, breathe in, breathe out, swallow and vomit, drink and bite, eat and speak. Through these actions we learn to orally incorporate and orally reject.
In the Anal stage the one-year-old toddler is learning to walk and talk, the neurological pathways between the central nervous system and the anal sphincter become established, and toilet training becomes possible. In the Anal Stage a highly cathected mother, who has presumably earned her cathexis by attending to the baby’s needs for a year now, appeals to the baby to release the bowel movement not here but there and not now but then. This is generally perceived as a bit of a shock and leaves the toddler with 1) the option to ignore potty training and remain back in the Oral Stage, 2) the option to release the feces and urine not when and where mother wants them but when and where the toddler wants to release them and 3) to win mother’s love in a new way by giving her the feces and urine where and when she wants them. The negotiation between mother and toddler to manage toilet training is one in which there develops a differentiation between the passive and the active, and the inner and the outer. The anal sphincter defines a limit, which declares interiority and exteriority, but the toddler has to determine “Who is in control of this portal? Me inside or someone else outside?” It pertains to the dynamics of dominance and submission. It has to do with control and loss of control. The nascent subject, still a victim of its overwhelming helplessness, struggles valiantly to declare itself by controlling the retention and evacuation of its personal products (i.e. urine, feces, flatus, touches, gazes and vocalizations), presenting them as love offerings or delivering them as war heads. While feeding is seen as the stage upon which the oral drama takes place, toilet training is center stage for the anal drama. But, of course, any curious toddler is sure to be exploring the world and in the process getting into mischief and engaging other arenas for power struggles with mom. Also associated with anal control and loss of control, dominance and submission are sadism, the pleasurable gain from aggression, and masochism, the pleasurable gain derived from being the receiver of aggression.

Anal dynamics attach themselves to time, money and cleanliness. The anal expulsive character disregards time, spends money irresponsibly and is messy. The anal retentive character is prompt, penny pinching and fastidious. The over valued fecal stick given to mother as a gift can, in another moment, transform into the most disgusting object imaginable. Later anality may be sublimated into an interest in various artistic media such as paint and clay. Anality also attaches itself to things overvalued and things rejected, not the least of which are glittering gold and filthy money.

**The Phallic Stage and the Oedipus Complex**

The Oedipus Complex describes a triangular intrapsychic constellation of object relations involving the child and the maternal and paternal introjects. It is supported by cognitive development and shaped by the external family dynamics. It is through the Oedipal dynamics of the child’s love for one parent and efforts to get rid of the other parent that the child learns the factual and social implications of gender (male and female) and generational (adult and child) differences and thereby is socialized into his or her role in the family.

The Oedipus Complex is associated with the Phallic Stage in libido development. The Phallic stage, (sometimes referred to as the “early genital stage”), is when the site of libidinal gratification shifts, or rather expands, from the mouth and the anus to include the genitals - specifically the penis and the clitoris. The child becomes increasingly aware of genital sensations and demonstrates a genuine curiosity in his/her own genitals and the genitals of others. Children at this stage become aware of gender and generational
differences. Their curiosity leads them to ask questions and make comparisons. Along with the increase in genital sensations and the curiosity in gender and generational differences, there is also a development of fantasies concerning the gratification of genital wishes directed toward one of the parents and a corresponding rivalry with the other parent – the Oedipus Complex. It is in this way that the Oedipus Complex can be recognized as a metaphor for socialization. Part of that socialization takes place via the castration complex and penis envy, both of which, I believe, are more profitable considered when viewed as metaphors of body intactness, social power, gender identification and their opposites. The resolution of the Oedipus Complex, as a metaphor for socialization of id impulses in relation to the demands of the external world in the hands of the ego, gives rise to the superego.

There is considerable debate over the timing of the Oedipus Complex. It is traditionally associated with the small child between the ages of 2 ½ and 6 years of age but others have found evidence of precursors of the Oedipus in early infancy when the infant demonstrates a recognition of differences, a differential treatment of the parents, triangular relations, meaning making and the use of symbols or protosymbolic behavior. The one year old becomes a speaking subject mediating the maternal ground of bodily experience and the paternal surround of culture by way of a pre-established set of signifiers, that is, by way of language. But even before that, when the infant is given a name it endures the primal cut and enters language and therefore culture.

Society is the surround into which the infant is born. If the Oedipus Complex is a metaphor for socialization we must recognize that socialization begins at birth with the naming of the child and it continues by means of the feeding, weaning, cleaning and toilet training practices, wherein the transmission of many cultural and familial attitudes toward the body and the established social system are non-verbally communicated. Thus the castration (a metaphor for the establishment of limits, prohibitions, taboos) is recognized in toilet training and weaning and even the cutting of the umbilical cord. Some have even recognized behaviors reminiscent of the Oedipus Complex in utero. While I think there are interesting implications in these reformulations of Freud’s original theory, for our purposes here I find it useful to maintain Freud’s timeline and description.

While one can be named at birth and can demonstrate differential behavior early on, it is the two and a half year old that discovers its genitals, discovers genital difference, becomes curious about genitals, falls in love with a parent, demonstrates bitter rivalry with the other parent, uses language with versatility, and soon thereafter begins to encode the first conscious memories that will remain for life.

The Early Genital Stage is also when children become particularly interested in the mysteries of sex and sexual difference and the anxieties and pleasures associated with the pursuit of this knowledge.

The Latency Period
The Phallic Stage is followed by a Latency Period, from approximately ages 6 to 11, in which the child sublates libido into new arenas of worldly interest. It is called the Latency Period as it is not a stage in libido development at all but rather a period when the cathexis shifts from an interest in the body to sublated interests in culture. Thus the explicit sexual interest of the small child becomes latent in the service of acquiring greater levels of socialization.
The sublimation, or transformation, of libido is directed toward the development of sex roles; intellectual understandings; physical prowess; and the acquisition of culturally valued knowledge, skills, and social roles. In other words, the preoccupations with the erogenous zones become further metaphorized and sublimated into social pursuits in the names of adjustment and adaptation.

**The Genital Stage**

The Genital Stage (sometimes referred to as the “later genital stage”) of libido development begins at puberty when the young adolescent begins the final sexual maturation undergoing dramatic physical changes resulting in the adult physiognomy complete with the mature development of the sexual organs, the development of the secondary sex characteristics, and the development of the frontal lobes of the brain permitting abstract thinking. Abstract thinking and adult physiognomy combine to drive the adolescent into new sorts of love relations with peers. It is a time when the previous stages of libido development are re-worked, to some extent, in the wider social setting and in relation to intensified sexual impulses. The earlier stages of psychosexual development also become subordinate to the primacy of the genitals. The re-working of the phallic stage dynamics in the Genital Stage hopefully include two significant differences from their original resolution: 1) the love object shifts from an incestuous partner to a non-incestuous peer and 2) the adolescent is capable of a more altruistic and tender love than is the young child whose love is incorporative, possessive, and exploitative (Sterba, 1947, 57-58). The integration of the previous psychosexual stages into the genital stage has its social/emotional/intellectual correlate in the development of what Erik Erikson described as, an “identity”.

While people continue to grow and change throughout the course of the lifecycle, the psychoanalytic view of libido development asserts that the basic psychosexual dynamics have been established by the end of adolescence and that subsequent developments will be constrained by those dynamics.

**Recommended Reading:**

The following list of readings begins with a clear, highly readable chapter on psychosexual and psychosocial development by Erik Erikson. It is followed by two readings written by Sigmund Freud. These two readings will be far more intelligible after having read Erikson. The readings that follow, by Nágera, Sterba and the Tysons, review Freud’s ideas but the repetition they offer will be useful in getting an ever clearer understanding of this revolutionary concept of libido development and the notion of the fundamental impact of infantile sexuality on the development of the adult personality.


Chapter VII Eight Stages of Man

Erik Erikson’s *Childhood and Society* is one of the most important books in the psychoanalytic literature. It introduces the psychosocial stages of development along with the psychosexual stages of development but of equal importance is how clear the writing is. *Childhood and Society* was, for many psychologists, the first
book that introduced them to psychoanalysis. Erikson’s presentation of the psychosocial stages of development along with the psychosexual stages ended up making the psychosexual stages all the more understandable.


If you want to understand Freud it is good to read Freud. Three Essays toward a Theory of Sexuality is a psychoanalytic classic but it will be more understandable after having read Erikson.


Part III of the Introductory Lectures will offer yet another view of this fascinating subject again in the words of its originator.


Humberto Nágera led a seminar on the Core Psychoanalytic Concepts at the Hampstead Clinic in London under the directorship of Anna Freud in the 1960s. The seminar revisited the core concepts of Sigmund Freud and catalogued Freud’s own changing ideas over the years. The result was a four-volume collection of Freud’s core concepts. This volume is dedicated to Libido Theory. It is a very clear presentation of Freud’s view as opposed to those of revisionists.


Richard Sterba’s classic presentation of Freud’s ideas concerning Libido Development is again more systematized and in that way clearer than Freud’s own presentation.


This outstanding volume disentangles decades of different psychoanalytic theories of development and addresses important controversies as well. Again the section on Freud’s theory is useful in so far as the authors have dedicated themselves to
making a clear presentation of different theories and articulating what Freud said from what others have said about libido development.

**Learning Objectives:**

How is Sigmund Freud’s libido development distinguished from ego development?

How is libido development distinguished from Erik Erikson’s psychosocial development?

How is libido development distinguished from cognitive development? From moral development? From speech development?

What is the relation between libido development and the symbolic function?

**Bio.**

Daniel Benveniste, PhD, is a clinical psychologist with a private practice in Bellevue, Washington. In addition to his practice, he writes professional articles and has taught graduate students of clinical psychology for many years. Originally from California, he did his training and began his practice in the San Francisco Bay Area. He lived and worked in Caracas, Venezuela from 1999 to 2010 and then relocated to the Pacific Northwest with his wife, Adriana Prengler de Benveniste. He is the author of *The Interwoven Lives of Sigmund, Anna and W. Ernest Freud: Three Generations of Psychoanalysis* (2015) and is editor of *Anna Freud in the Hampstead Clinic: Letters to Humberto Nagera* (2015). In 2015 Dr. Benveniste was named an Honorary Member of the American Psychoanalytic Association.

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