Key Concepts in Psychoanalytic Literary Theory

If literary theory helps readers think about what literary texts do, psychoanalytic theory focuses on why characters in texts do what they do. Psychoanalytic theories focus on the **individual** character and person, whereas many other theories (feminism, post-colonial, Marxism, etc.) focus on **society** and how society shapes and limits individuals.

Psychoanalytic theory focuses on the humanity of characters and assumes that literary characters are individuals with independent brains and souls that work in observable, even predictable, patterns. Psychoanalysis start with Freud incorporates a wide range of concepts from psychology to recent neuroscience and medical research.

One thing to keep in mind when doing psychoanalysis is that we are not doctors or clinical practitioners. In many ways theory is play, and people and psychology are complex, messy animals. In this classroom we’re using psychoanalytic theory to learn more about a literary work, which requires empathy, humility, and humor.

**Key Concepts and Vocabulary for working with psychoanalysis:**

The **conscious mind** is all the stuff we’re aware of, including what we think about, our memory, and the stuff we might retrieve or pull up from our recent storage to use and reflect on. The stuff that is going through you might right now is conscious.

The **unconscious mind** is largely all of that we are not consciously aware of. Humans are driven by fears, desires, needs, conflicts that we are mostly unaware. The unconscious isn’t static, but dynamic.

The **collective unconscious** is a “term introduced by psychiatrist Carl Jung to represent a form of the unconscious (that part of the mind containing memories and impulses of which the individual is not aware) common to mankind as a whole and originating in the inherited structure of the brain. It is distinct from the personal unconscious, which arises from the experience of the individual. According to Jung, the collective unconscious contains archetypes, or universal primordial images and ideas” (from Britannica.com).

Archetypes come from Jungian psychology.

**Disorders/dysfunctions** are patterns of behaviors or symptoms stemming from problems in the conscious/unconscious mind. This concept is problematic at the get-go as it supposes a norm against which to measure everything, yet what is “normal” psychologically is questionable, and since we ALL have dysfunctions, normal is inherently dysfunctional.

**Defense mechanisms** are ways a person has learned to protect themselves, to keep the pains and damage life has inflicted in the unconscious rather than the conscious. We do this in a variety of ways, including selective perception, selective memory, denial, avoidance, displacement, projection, regression. When our defense mechanisms break down we experience anxiety.
**Displacement** happens when individuals shift their outward emotions from the true target to a more “acceptable” or accessible target. I might be made at my sister for something she said, but my sister lives thousands of miles away, so I take out my irritation on my friend who lives close by. Or maybe I’m upset with my boss, but I need to keep my job so I don’t yell at him. I yell at my kid or my spouse instead. Displacement is about the discharge of emotions. Mostly we do this unconsciously, but we are sometimes consciously aware of our behaviors.

**Repression** is a defense mechanism that works to keep ideas, emotions, memories out of the conscious mind, and well-buried in the unconscious mind where they still influence our behaviors. When we consciously try to bury emotions and memories, we are practicing suppression.

**Projection** is a defense mechanism that works to when we discharge our feelings and emotions but putting them on to someone else. We might be afraid of our growing attraction to a coworker so we accuse our signification other of flirting with his/her coworker. Again, we’re usually not consciously aware that we’re putting our emotional stories onto someone else’s reality—it’s an unconscious process and it’s about motivations—what feelings make us behave a certain why aren’t what make another person do the same.

**Transference** is when we take the expectations and perceptions we experience with one person and transfer them to another. This largely happens unconsciously. Transfers are often talked about in terms of patterns or templates and generally stem from a childhood relationship.

**Core Fears** (Excerpted from Lois Tyson’s *Critical Theory Today*)

**Fear of Death**—most of us are generally successful suppressing our own fears, but they resurface in our unconscious behaviors. Freud puts the fear of death at the center of most fears and neuroses. The fear of death is most clearly linked to the fear of losing life, or at least, becoming attached to life, so this most often manifests in our intimate relationships.

**Fear of Intimacy**—the chronic and overpowering feeling that emotional closeness will seriously hurt or destroy us and that we can remain emotionally safe only by remaining at an emotional distance from others at all times. ....Fear of intimacy can also function as a defense mechanism. If this particular defense occurs frequently or continually, then fear of intimacy is probably a core issues.

**Fear of Abandonment**—the unshakable belief that our friends and loved ones are going to desert us (physical abandonment) or don’t really care about us (emotional abandonment).

**Fear of Betrayal**—the nagging feeling that our friends and loved ones can’t be trusted, for example, can’t be trusted not to lie to us, not to laugh at us behind our back, or in the case of romantic partners, not to cheat on us. Betrayal is often a self-fulfilling prophecy.
Low self-esteem the belief that we are less worthy than other people, and therefore, don’t deserve attention, love, or any other of life’s rewards. Indeed, we often believe we deserve to be punished by life in some way. Low self-esteem can have wide-ranging effects including depression, anxiety, and other health problems. This can be problematic in forming long-term, intimate attachments.

**Trauma** is stressful event that overwhelms a person’s ability to cope. Trauma instances might be one-time or on-going, and vary in severity, nature, and response, but tend to have lasting, yet highly subjective, consequences. Trauma may be physical and or psychological, but is always neurobiological. (For more information on Trauma you can go here http://goo.gl/hkxrpW)

**Maslow’s Hierarchy:** “Each of us is motivated by needs. Our most basic needs are inborn, having evolved over tens of thousands of years. Abraham Maslow’s Hierarchy of Needs helps to explain how these needs motivate us all. Maslow’s Hierarchy of Needs states that we must satisfy each need in turn, starting with the first, which deals with the most obvious needs for survival itself. Only when the lower order needs of physical and emotional well-being are satisfied are we concerned with the higher order needs of influence and personal development. Conversely, if the things that satisfy our lower order needs are swept away, we are no longer concerned about the maintenance of our higher order needs” *(BusinessBalls.com)*.