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## Personality Structure in Psychoanalysis, Psychoanalysis and Psychodynamic Therapies

### Abstract

Psychodynamic psychotherapy or analytical therapies are therapies based on psychoanalysis. C. Jung's archetypes have an important role in the science of psychology. Unlike S. Freud, Jung notes that libido is not only a source of sexual energy, but reflects the whole reality of humanity. Psychodynamic psychotherapy or analytical therapies are therapies based on psychoanalysis. Freud "Ego psychology" explored early childhood relationships between mother and child, noting that the relationships we experience in early childhood with those who care for us are repeated in adulthood. J. Lacan's theory considers the ego as an illusion and accepts that we are a personality aimed at fulfilling the wishes and dreams of our parents. In general, psychodynamic psychotherapy includes long-term therapies based on early childhood, parent-child relationships, and dreams. The main purpose of the article is to examine psychoanalysis, personality structure in psychoanalysis, therapies derived from it, analytic or psychodynamic therapies.

**Keywords:** Therapy, defense mechanisms, archetypes, relations, personality, transference, early childhood, psychoanalysis

## Psikanalizde Kişilik Yapısı, Psikanaliz ve Psikodinamik Terapiler

### Öz

Psikodinamik psikoterapi ya da analitik terapiler psikanaliz temelli terapilerdir. C. Jung'un arketipleri psikoloji biliminde önemli bir yere sahiptir. S. Freud'un aksine Jung, libidonun sadece cinsel



*enerji kaynağı olmadığını, insanlığın tüm gerçekliğini yansıttığını belirtmektedir. Psikodinamik psikoterapi ya da analitik terapiler psikanalize dayalı terapilerdir. Freud "Ego psikolojisi", erken çocukluk döneminde anne ve çocuk arasındaki ilişkileri incelemiş ve erken çocukluk döneminde bize bakım veren kişilerle yaşadığımız ilişkilerin yetişkinlikte de tekrarlandığını belirtmiştir. J. Lacan'ın teorisi egoyu bir yanlısıma olarak görür ve ebeveynlerimizin istek ve hayallerini yerine getirmeyi amaçlayan bir kişilik olduğumuzu kabul eder. Genel olarak psikodinamik psikoterapi, erken çocukluk, ebeveyn-çocuk ilişkileri ve rüyalara dayalı uzun süreli terapileri içerir. Makalenin temel amacı psikanalizi, psikanalizde kişilik yapısını, bundan türetilen terapileri, analitik veya psikodinamik terapileri incelemektir.*

**Anahtar Kelimeler:** *Terapi, savunma mekanizmaları, arketipler, ilişkiler, kişilik, aktarım, erken çocukluk, psikanaliz*

### **Intruduction**

The problem of personality has been one of the important problems that have been in the focus of attention of scientists and thinkers working in various fields of science for years, and it remains relevant even in modern times. In modern psychology, various ideas are put forward about issues such as personality, its activity, formation, structure, and the essence of the concept of personality in general. This once again confirms that this problem is complex and difficult. People are judged not only by the color of their eyes, tone of voice, fingerprints, etc. they differ from each other not only because of their personality but also because of their characteristics. It is much more difficult to characterize people as a person than to characterize them by the color of their eyes, the timbre of their voice, or other biophysical characteristics. The concept of identity is a complex concept.

The role of analysts such as Freud, Jung is great in the study of personality. Freud was born in Vienna in 1856. He made great contributions to the science of psychology. When treating neuroses, Freud first used hypnosis. Over time, it was understood that this method was incomplete and although it seemed to provide some success, it was also understood that it led to unreliable and sometimes even completely unsuccessful results. Therefore, over time, Freud gave up the method of suggestion and instead began to use the method called "free association" instead (Freud, 2021). Currently, the method of free associations is widely used in psychodynamic psychotherapy. Jung was born in Switzerland in 1875. Although he is a doctor, he has done extensive research on human personality and subconscious complexes. In 1907, they met for the first time, and then they established friendly relations. However, this did not last long, due to a difference of opinion, both analysts parted ways. In modern times, the concept of personality is considered an important factor in psychoanalytic therapies. In the article, a place is devoted to the approaches to personality in modern analytical therapies. Also, the

theoretical research methods of observation, collection of facts, selection and connection between them, analysis and synthesis were used in the article.

### **1. Discussions**

Freud distinguished three levels in the personality structure: id, ego and superego. Freud called the uncoordinated drives the id, the coordinating and factual function "ego", and the function that gives critical, moral advice "superego" (Freud, 2021). The id combines all the mental processes that are not realized in itself. Here are involuntary desires, lusts, ideas removed from consciousness, past experiences, etc. is decided. That is, the id is the innate aspect of the soul. Ego exists over time out of the Id and represents concerns about reality, the ego is therefore more rational. While the id pushes for momentary sexual pleasure, the ego considers whether the situation the person is in is appropriate. Ego is the personality's consciousness and self-awareness. Its task is to act as a mediator between the world of emotions represented by the id and the real external world, between people's desire, desire, inclination and their provision. The superego emerges through the assimilation of social values and norms. As the child's personality develops, the caregiver's superego becomes the child's personality superego. Thus, the child learns the moral values and norms of the caregiver. The main function of the ego is to reconcile the different demands of the id and the superego. The superego is sometimes very harsh, guilt-ridden, and has a punitive or rejecting attitude toward its own needs and desires. The superego includes historically created moral, scientific, artistic, and cultural systems. Social norms, prohibitions, the area of debt, morality, social consciousness are all decided here. According to Freud, the human Id always suffers between the Ego and the Superego. And this eventually leads to some mental disorders and neuroses. In psychoanalytic therapies, the goal is to help the patient become aware of the superego, which is very rigid at this time, because then the patient will be less punitive towards himself. When the demands of the superego and the desires of the id do not coincide, the ego expresses anxiety and uses certain defense mechanisms. The ego is a kind of counselor who tries to balance the id and the superego. The ego refines, evaluates the conditions required by the superego and fully or partially relays these desires of the id according to the results of the evaluation. If the desire of the id is something that cannot be fulfilled, in other words, it is a desire that will create negative consequences for the personality itself, then the defense mechanisms of the ego come into action and push this desire of the id into the subconscious. These desires, suppressed in the subconscious, do not disappear completely, they are manifested in human behavior. When unresolved contradictions increase in the subconscious, the ego "does not have the power" to regulate and control all this, which eventually manifests itself in the behavior and actions of this person. The goal of psychoanalytic psychotherapy is to raise these subconscious conflicts

to the level of consciousness and find a solution. When the demands of the superego and the desires of the id do not coincide, the ego expresses anxiety and uses certain defense mechanisms. Another concept that maintains the balance between the id and the superego is defense mechanisms. Although defense mechanisms were proposed by Freud in 1930, they were later refined by Anna Freud. Defense mechanisms are intrapsychic processes that serve to avoid thoughts, wishes and desires by somehow pushing them into the subconscious (Safran, 2019). Suppression - It is the erasure of negative feelings and thoughts that a person does not want to think from the memory, pushing them into the subconscious. Regression is the return of a person to his childhood, to the previous stages of his development. An adult talking like a child in any conflict, biting nails, etc. are examples of regressive behavior. Rationalization - when a person rationalizes the events in his mind, assigns a logical meaning to it, sees himself as justified and justified. An example of this is when a person shows aggressive behavior to a friend and rationalizes it by saying, "He deserved it" Displacement - when a person who is angry with his boss directs his anger at his child at home, the punished child goes to another room and punches his toy is a displacement defense mechanism. Sublimation is the redirection of a person's suppressed desires. According to S. Freud, good, love and similar impulses are not primary, these impulses appear as a result of changing bad impulses. That is, it causes the suppression of the bad impulse and the emergence of the opposite impulse. Suppression of sadistic feelings, emergence of masochistic feelings, etc. an example can be given. Projection is when a person directs and projects feelings and emotions that he does not accept in himself. A friend of an aggressive person showing aggressive behavior to him is a projection.

Partition is considered an inadequate defense mechanism. It is more common in borderline individuals. Division is the inability of a person to completely integrate the concepts of good and bad. Klein noted that this defense mechanism is observed at a certain stage of development so that children can feel safe in the presence of the person who cares for them. That is, the child creates two representations of the mother. One is a good mother, the other is a bad mother. A child is between a good and a bad mother. Combining a good and a bad mother is a stage in a child's development. An adult who cannot combine the concepts of good and bad sees the world in black and white, and the main goal in therapy at this time is to show the patient that there are other colors.

One of the main premises of the theory of psychoanalysis is the division of the psyche into conscious and unconscious parts. Everything that a person knows and understands at this moment is considered conscious. All other things that remain outside of his consciousness because he forgets, does not fully understand or does not want to understand make up his unconscious sphere. Psychoanalysis says that mental processes take place unconsciously in

themselves, based on the idea that only the part of them related to the spiritual world is conscious (Freud, 2016). Freud's creation of psychoanalysis was not accidental. Freud, who used hypnosis and through it catharsis, tried to open the sufferings of his patients during the session. Patients who told their impressions (mainly neurotic patients) were often in a state of affect. To undo the damage of such emotions, he would suggest forgetting everything at the end of the session. Many of the patients were not easily hypnotized, and therefore it was not possible to give the desired suggestion to everyone. So, the possibilities of the doctor were limited. Freud saw the way out either in giving up catharsis or in learning to achieve catharsis only with the help of appropriate suggestion without applying deep hypnosis. After a series of experiments, Freud determined that under special psychological conditions it is possible to open the heart of the patient only through insinuation, to raise the dreams and desires that have found a place in the lower layers of the brain, in the layer of unconsciousness, to the layer of consciousness (revival in the memory). Freud notes that we are not aware of repressed desires and that censorship prevents them from reaching the conscious state (Fromm, 2017). Also, Freud noted that repressed wishes and desires are revealed in dreams. Ever since Freud emphasized that dreams are the way to the subconscious, dreams have always been in the spotlight (Fischmann et al., 2021). He points out that the dreams that create dreams are not dreams that we take for granted, but are suppressed because they are painful (Jung, 2015). But the repression of such desires does not mean that they disappear. We cannot destroy a desire by suppressing it. Repressed desires continue to exist and resurface in different forms (Fromm, 2017). According to Freud, stimuli from the outside world, subjective experiences, bodily stimuli and mental activities during sleep play a role in the emergence of dreams (Zhang & Guo, 2018). When applying his method, Freud's most used rule was to lay the patient down on the couch, suggest him to close his eyes and concentrate on one point. He would put pressure on the patient's forehead with his fingers and, with serious expressions, would induce him to remember the negative emotions that caused him to be sick. In 1896, Freud gave up hypnosis once and for all, and a little later, considering suggestion unacceptable, he used the method of "saying everything that comes to your mind without censoring it", this method was called "free association". It was based on him telling everything that was going through his mind to the therapist who was investigating his mental state (Freud, 2016). Freud used free associations especially to interpret the dreams of his patients. So, the parts of the dreams that stand out are selected and the person is asked what these parts evoke in him. The patient is asked to speak his thoughts about certain parts of the dream and not to interpret if possible, because interpretation is nothing but censorship and tries to suppress the important part of the dream (Jung, 2015). Later, Freud had to face another difficulty, he noticed that many patients did not follow him during free

associations. The fact that every patient involved in treatment resisted psychotherapeutic operations began to cause concern. However, Freud asked his patients to overcome resistance and censor their thoughts, but to say everything that comes to their mind, and thus concluded that it is possible to overcome resistance over time.

Difference between resistance and defense mechanism. Resistance is the person's unwillingness to change, and for this reason, the behavior of the person as an obstacle to the therapeutic session. The patient's inability to find words to speak during the session is resistance. Resistance is the fear that feelings that the person does not want to face during the session will be revealed during therapy, that change is equated with the concept of extinction, and that trusting the therapist will result in abandonment and pain, etc. caused by reasons. This is a wrong perception of the present under the influence of the past. In the process of treatment, if the psychotherapist knows how to correctly assess the past and present, the effectiveness of the treatment is ensured.

The most appropriate way to reveal the closed (subconscious) thoughts of the patient by means of free associations is as follows: the doctor, laying the patient on the bed (sofa), sits on a chair a little away. The patient's face should be turned to the opposite side and he should not see the doctor. When conducting the session, it is necessary to do so that the impression of hypnosis and suggestion does not arise. The main goal is to create a sincere dialogue between two people. It is advisable to inform the patient at the beginning of the treatment session that there is no plan for their conversation. The patient can freely talk about any topic that comes to his mind. All obstacles that cause distress to the patient should be removed. This is a more important element during a session between the opposite sexes. The ethically acceptable behavior of the analyst is to reveal the thoughts that caused the patient's illness. The transfer phenomenon can appear as a serious obstacle. Freud observed that the patient compared him to the important figures of his childhood and established a relationship with him as those figures. From here, the concept of transfer appeared. For example, if the patient has an authoritarian father, he begins to perceive the therapist as a bully (Safran, 2019). Although the transference was initially seen as an element hindering the therapy, Freud later realized that the transference was very important in the sessions. What was important was that the therapist maintained a neutral posture during the transfer of the patient. Even in modern psychoanalytic therapies, the impartiality of the therapist is considered an important factor for recovery. As we know, narcissistic individuals exhibit idealization and devaluing behavior. If the therapist is happy and proud when the narcissist idealizes him, and feels bad when the narcissist devalues him and projects this onto the patient, healing will not occur. The transference phenomenon comes in two forms: positive and negative.

Positive transference is expressed by feelings of adoration, respect, and love towards the analyst, and negative transference, on the contrary, by feelings of enmity and hatred. During analytic processes, sometimes the interest of the patient becomes so emotional that it has a positive effect on the patient's condition and soon leads to his recovery. This situation, which Freud called transference neurosis, can be the exact opposite. Therefore, transference neurosis can appear as both a success and a failure of the analyst. Experienced analysts can skillfully use this factor and achieve effective treatment. Resistance is a special reaction of a neurotic against therapeutic operations, and it is considered as the failure of the symptoms of neurosis to be treated. It is up to the analyst to analyze what and how the patient resists, and to take appropriate measures. Coming to terms with the patient can help alleviate the analytic illness by fighting together. Freud called the countertransference of the patient's transference in the therapist. A therapist with a depressed, guilt-ridden mother may react negatively to a client who behaves similarly, or a therapist with a competitive relationship with his father may feel strongly competitive with his competitive patient. According to Freud, the reflection of the countertransference on the patient is an obstacle to the patient's recovery, therefore it is important for the therapist to analyze the countertransference and work on it.

Jung was a Swiss psychiatrist and psychoanalyst. The crossing of his path with Freud made great contributions to the science of psychology. However, their cooperation did not last long, they parted ways due to differences of opinion. The main difference of opinion was that the theory of Jung and Freud based on the libido as an energy coming from the sexual inclination is more narrow-minded and does not fully reflect the reality of humanity. Jung, as thought, cannot be considered a student of Freud, Jung does not owe his formation to Freud, but it cannot be denied that he learned a lot from his cooperation with him (Jung, 2001). Jung did not accept Freud's idea of pansexualism. Thus, he saw in Freud's libido, which is a sexual motive, the meeting of the female and male beginnings, the collective and individual archetypes with a centuries-old history. Jung manifested libido not as sexuality, but as spiritual energy, and this energy includes metamorphoses. He states that the experiences lived by a person throughout his life do not pass without a trace, even those experiences remain in the brain structure of a person, manifested in the form of archetypes as collective unconsciousness at the instinctive level. Collective unconsciousness is related to the name of Jung. The collective unconscious is general, not personal, and includes innate instincts. In general, archetypes show our relationship to the social environment, our animal needs, our masculinity, our femininity, ourselves, and the people we interact with. Collective unconsciousness is the concentration of humanity in the subconscious from the beginning.

Persona is the mask we use against society. For example, people may behave differently to their family, co-workers, and friends, changing the mask is a persona of people. We often use it to be accepted and not rejected in the situations we are in. Shadow is the dark side of humanity. Suppressed feelings, thoughts, unaccepted sexual desires are gathered here. The shadow archetype embodies everything that is contrary to the ego, to society. Anima and animus. Anima represents the feminine side in men, and animus represents the masculine side in women. A man with a high masculine side also has a high feminine side, but the man tries to suppress the feminine side under pressure from his environment. This suppressed feminine side holds feminine energy in the subconscious. This example also applies to women. It means the combination of the self, the conscious state and the subconscious. Among the archetypes, the most advanced archetype is the self. It includes a person's self-realization, all parts of the personality. According to Jung, reaching Self is being aware of shortcomings and accepting them. To do this, it is necessary to bring the subconscious into a conscious state. His archetype combines the masculine, feminine, shadow, clarity and darkness aspects of humanity. Differences between psychoanalytic or psychodynamic therapy and psychoanalysis

As psychoanalysis became a model widely used by many therapists, analysts began to look for a method that could be useful on a wider scale. Because psychoanalysis was not effective when working with many patients. Some patients are worried about exploring the subconscious, and a group of patients do not like lying on the couch, and there were even patients who perceived it as subservience to the therapist. Despite the benefits of the couch, face-to-face conversation and eye contact between therapist and patient play a central role in therapy. During communication, it is important for the client with intimacy problems to make eye contact with the therapist, and for the therapist to understand and empathize with what he is feeling. On the couch, the patient's attention is on himself, he can reach inaccessible, important experiences. Another reason was that the number of sessions in psychoanalysis was large and open-ended. Many patients did not have the time or money to devote to such therapy. Analysts combined the therapy based on psychoanalysis, but rejecting some of the features of psychoanalysis, under the name of psychodynamic therapy, in order to meet the needs of different patients. Psychodynamic or psychoanalytic psychotherapy is therapy that is shorter than psychoanalysis, sessions are less intensive, and incorporates analytical concepts and methods (Shedler, 2010).). Psychodynamic therapy attempts to explain human behavior from the perspective of an intrapsychic process, a repetition of personality relationships that are outside of a person's conscious awareness and stem from childhood experiences (Deal, 2007). Modern psychodynamic therapies differ from Freud's predecessors in a number of features



(Fulmer, 2018). Fundamental differences between psychoanalysis and psychodynamic (psychoanalytic) therapy began to emerge:

1. Psychoanalysis is longer than psychodynamic psychotherapy and is open-ended (that is, it is not clear when the sessions will end);
2. In psychoanalysis, the patient lies on the couch and does not see the therapist's face;
3. Avoid giving advice or being overtly directive to the patient;
4. Maintaining a neutral posture (Safran, 2019). These are important factors that distinguish classical psychoanalysis from psychodynamic psychotherapy.

Before Freud's death, different psychoanalytic trends began to appear in many different countries (Safran, 2019). Kleinian, Lacanian psychoanalysis, ego psychology, object relations theory can be cited as examples.

One of the founders of ego psychology was Anna Freud. Influenced by analysts such as Wilhelm Reich and Otto Fenichel, he emphasized the ego's self-defense activity rather than subconscious impulses, fantasies, or desires. Thus, as a result of this trend created by Anna Freud, the ego became an important topic in psychoanalysis, not together with the id and superego, but separately from them. According to S. Freud, the ego is a secret that responds to the impulses brought by the id, and in ego psychology, the ego has its own energy. In ego psychology, the therapist's main goal was to strengthen the patient's ego. One of the other important figures of ego psychology in the USA was H. Hartman.

Kleinian orientation, object relations. Klein was initially an analyst who worked with children, especially investigating early childhood relationships between mother and child (Safran, 2019). Object relations theory is based on the fact that we create internal representations of people who are important to us. That is, the relationships we have with caregivers in early childhood are repeated in our relationships with other people in adulthood, and the relationships we adopt are reflected in our choices of partners and friends and in our relationships with others.

Lacanian theory. According to the approach of the French analyst Lacan, the ego is an illusion. According to Lacan, we get our sense of who we are by creating a self that is aimed at realizing the needs and desires of our parents. It begins in childhood, when we try to meet the wishes and dreams of others, to be what they want, and is initially embodied in the dreams of the mother (Safran, 2019).

### **Conclusion**

In the article, the emergence of psychoanalysis, the structure of personality, psychodynamic view of personality, psychodynamic psychotherapy and fundamental differences between psychoanalysis and analytical therapies are mentioned. The theories of

Freud, Jung, Lacan and Klein were also addressed. thus, the concept of identity has been investigated from many aspects. In the article, the psychoanalytic view of personality is preferred. Psychodynamic psychotherapy considers the id, ego and superego as the basis of the personality structure. In addition, modern dynamic therapies consider early childhood and attachment types as an important factor in the study of personality. Second, modern psychodynamic psychotherapies, however far they depart from psychoanalysis, incorporate its provisions.

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