**Definition:** Freud, Sigmund from *Stedman's Medical Dictionary* (froyd), Austrian neurologist and psychiatrist, 1856–1939, founder of psychoanalysis. see freudian, freudian fixation, freudian psychoanalysis, freudian slip, Freud theory.

**Summary Article:** Freud, Sigmund

*From Theory in Social and Cultural Anthropology: An Encyclopedia*

Sigmund Freud (1856-1939) was an Austrian physician and the founder of psychoanalysis. His discoveries about the mind and his clinical investigations shaped how Western peoples conceive of human beings, their personal and collective histories, and their role in the universe. According to Freud, no matter how mature or sophisticated persons are, their infancy and childhood experiences undergird their adult lives. Poets had long noted that the “child is father to the man.” Through brilliant clinical reports and a lifetime of writing, Freud showed how this was true. After him came generations of child psychiatrists, psychologists, counselors, teachers, and others who charted the subtle ways in which developmental histories shape adult character. Because each culture tells its members how to raise children, how to control sexuality, and how to become an adult, Freud's discoveries intrigued anthropologists who had long studied these features of culture. For these reasons, Freud influenced the past 100 years of anthropology. While contemporary anthropologists cite him less frequently than did their counterparts from the 1930s to the 1980s, Freud remains an essential figure in the history of anthropology.

**Freud's Psychoanalytic Theory**

Trained as a neurologist in Vienna, Austria (then the center of the medical world), Freud took up the study of mental illness around 1890. Treating upper- and middle-class Viennese men and women (mainly Jewish, like himself), Freud initially studied what the physicians of the time labeled “hysteria.” Patients had problems like sudden fainting, loss of speech, or paralysis, which were not caused by identifiable medical conditions. In the language of 19th-century medicine, their problems were not caused by lesions—visible scars or damage—in their brains or their bodies.

If these problems were not caused by brain lesions, Freud and other physicians deduced that they must be caused by “mental lesions”—that is, by conflicts in their patients’ minds. From around 1890 to around 1980, psychiatrists and psychologists studied hysteria and other maladies (like drug and alcohol addictions, sexual problems, obsessional actions, and numerous other disorders) as manifest behaviors whose latent causes were to be found in the early-childhood experiences of their patients. Therapists tried to discover patterns between these symptomatic actions and their patients’ early experiences. For example, do women who manifest hysteria around sexual matters have developmental histories in which sexual contact between them and older people occurred? Do men who stutter and are afraid to speak in public have problems controlling their private sexual lives, especially the urge to masturbate? Do religious and ethical strictures on adolescent sexuality, a dominant theme of late-19th-century European and American education, cause what Freud called “modern nervous illness”? 

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Jean Charcot, an influential French physician, had shown that not only were psychiatric symptoms “lesion-less”—that is, not caused by anomalies in the brain—but that they could be induced or produced in normal subjects. Using hypnosis, Charcot demonstrated that otherwise healthy people would manifest hysterical blindness or paralysis if he suggested these behaviors to them. This meant that mere “ideas” could produce physical maladies. Charcot asked, “How did this leap from the psychical to the physical occur?” If mere ideas could cause hysterical symptoms in normal people, did similar, unconscious ideas cause hysterical symptoms in his clinical patients? Freud assumed that if psychiatric symptoms could be produced in normal subjects—who had neither physical lesions nor traumatic histories—then perhaps the patients who came to him had a psychological basis for their symptoms. In other words, perhaps persons diagnosed as “hysterical” suffered real pain but their pain was based on memory or other psychological processes. In Freud's terms, hysterics suffer from ideas (or more accurately, fantasies). How was this possible?

Freud's answer was that the mechanisms that produced hypnotic phenomena and hysterical symptoms were unconscious and not controlled by conscious reasoning. Joining philosophers like Friedrich Nietzsche and Karl von Hartmann, Freud reasoned that a large part—perhaps the largest part—of the human mind was unconscious, shaped by preverbal experience, and could be known only by its emanations. Because normal subjects could manifest the same (or similar) behaviors seen in his neurotic patients, he held that everyone had a similar psychological structure—that we are as a species united in our psychological organization.

**Nineteenth-Century Social Thought and Dreams**

Freud's notion that all humans had a similar psychological structure was in line with the cultural anthropology of his day. Freud considered himself an “archaeologist of the mind,” and he was familiar with the work of prominent evolutionists such as E. B. Tylor and L. H. Morgan, whose unilineal theories of evolution were based on the doctrine of psychic unity.

*The Interpretation of Dreams* (1900) was Freud's most important book. In it, he extended clinical models generated in his work with psychiatric patients to study dreaming. In *Dreams*, Freud published a 15-page interpretation of one of his own dreams that he called “Analysis of a Specimen Dream” (pp. 106-121). The promise and limitations of Freud's theory originate in this notion of *specimen*. Specimens are things, like fossils or tissue samples or pottery shards, with material histories and more or less fixed structures. If we find specimens of bone, teeth, and tools, we can deduce a great deal about the lives of people who came before us. Similarly, Freud saw dreams as artifacts from peoples’ earlier lives. The dreams in Freud's 1900 book are illustrations of how he (and his patients) talked and thought about behavior we call “dreaming.” As clusters of behavior, dreams are products of an individual's body, mind, culture, and unknown random elements. Freud created brilliant ways to “read” dreams as the products of mental mechanisms he called the “dream work.” This is the set of devices the mind uses to create the dream; among them are condensation, displacement, and symbolization. If I dream about my father as a policeman who looks like the U.S. president, I am *condensing* my thoughts and feelings about all three men into this one image. If I dream about the smell of gasoline and through associations come to feelings about my father (who worked on gasoline engines), I am *displacing* my complex story and feelings about him onto this simpler item. If I dream about a huge bison about to run me over and my associations take me to images and feelings of my father as a “force of nature,” I am *symbolizing* my father and my feelings about him. Thus, for Freud, dreams demonstrated an essential kinship between moderns and primitives and between normal people and psychiatric patients. In this sense,
dreams are specimens of a universal human psychology. Mid-20th-century anthropologists such as A. L. Kroeber, who rejected Freud's attempts to reconstruct actual human history, found value in Freudian concepts such as repression, regression, and the centrality of childhood experience, dream symbolism, and similar clinical generalizations.

Freud's brilliance as a writer and his ability to give scientists and humanists new ways to read old texts, current dreams, and neurotic patients' actions, and to discover their hidden meanings, excited generations of intellectuals. Freud led the way by interleaving his works with illustrations taken from European classics, especially the Greeks, Shakespeare, the Bible, and folklore, because in his view these illustrated earlier stages of human psychology and psychological development.

In these literatures, he found support for his clinical theory that sexuality in its various modes, ranging from intense "libidinal" sucking in newborns to adult sexual intercourse, provided a motive force for culture, and at the same time, culture—represented by paternal, religious, and governmental authorities—sought to control it. This dialectic seemed revelatory to people who read him in the early part of the 20th century. In many ways, Freud and his followers championed the possibility of a new kind of freedom of sexual life and sexual honesty. He contributed to the modern view that sexuality is not inherently evil, dangerous, or to be controlled at all costs.

From these clinical observations, Freud derived the psychoanalytic technique. Deformations of memory weaken the ego; it loses sovereign access to each of its domains. Once the ego is weakened, patients live a divided life. Rather than know their wishes and make conscious, mindful choices, patients act them out. The technique provides methods with which we help patients repair the rent in their memory. By studying the manifest effects of unconscious processes, we help them discover, name, and confront their actual wishes with increased self-knowledge and deliberation.

**Freud and Anthropology**

Anthropology plays at least three roles in Freud's thought. First, anthropology and its affiliated discipline, archaeology, gave Freud a model for investigating the prehistory of his patients. Just as archaeologists uncovered evidence of past civilizations and groups, so too did psychoanalysts investigate the origins of their patients' lives in hidden, what Freud called "repressed," fantasies. Second, anthropologists' findings about nontechnological peoples (whom 19th-century authors called "primitives") offered to Freud and other psychoanalysts test cases against which they could compare clinical discoveries made with European and American patients. In this regard, Freud was particularly interested in indigenous religions. Third, Freud felt that his hard-won insights into childhood and its aftermath pertained to children of all groups and all cultures.

**Psychoanalysis as Archaeology of the Mind**

Educated people were fascinated when Heinrich Schliemann (1822-1890), an amateur archaeologist, uncovered convincing evidence that Troy, the ancient city described in the Homeric epics, the *Iliad* and the *Odyssey*, was real, not merely a legend. These discoveries, much commented on by breathless reporters in the 1870s, excited Freud when he read about them as a boy. Thirty years later, when he began to probe his patients' memories for their "buried past," Freud felt that he was repeating, in a way, Schliemann's great adventure. This analogy became more than a metaphor. By the late 1890s, and ever afterward, Freud wrote extensively about psychoanalysis as an archaeological investigation.

In more technical terms, Freud used archaeology as a model. It helped him describe both his subject
matter (repressed, long-buried personal secrets) and his method (the slow digging, recovery, and reconstruction of personal narratives and memories.) By 1889, he was describing his work with patients as analogous to Schliemann's discovery of Troy. Because he hoped to make psychoanalysis a general psychology, and not merely a method of medical treatment, Freud needed to show its applicability to anthropology, literature, theater, and religion. The latter became especially important. In Freud's words, religion alone was the great antagonist to psychoanalysis. Religious authorities that dominated European history, shaped its politics, and sought absolute control of human sexuality were squarely opposed to Freud's discipline and his philosophy.

**Freud and Indigenous Religion**

From 1907 onward, Freud expended a great deal of his intellectual capital investigating religion in so-called primitive groups and in its contemporary instances. The first appeared in *Totem and Taboo*, a set of articles that Freud published in 1912 and 1913. Its subtitle declares Freud's thesis: "Some Points of Agreement Between the Mental Lives of Savages and Neurotics." In brilliant, often persuasive accounts, Freud shows surprising parallels between the beliefs and actions of his Viennese patients and those reported by anthropologists working in various contexts. Freud's terms, such as *savages*, offends modern ears because it evokes for us the horrific facts of European crimes against indigenous peoples. However, Freud was no fan of war or crimes against defenseless peoples. On the contrary, his more radical thesis is the psychic unity of human beings—that the sophisticated European is not "higher" or superior to persons and groups dominated by European armies and navies. The refined German banker, for example, had aggressive and sexual wishes that so-called savages enacted, or at least were said to enact according to Western anthropologists.

Freud also examined contemporary religious institutions, such as the German Catholic and Lutheran churches, as organizations designed to "sublimate"—that is, channel—an individual's aggressive and sexual forces, what Freud called the libido. He called this an "economic" tax that civilizations extract from their subjects. Like income tax, this libidinal tax must be paid to fund the efforts and ambitions of the modern state. However, it can be burdensome and so onerous for some that it results in neuroses, as he argued in *Civilization and Its Discontents* (1930).

In his last major work, *Moses and Monotheism* (1939), Freud summarized his clinical and anthropological theories by seeking to uncover the long-buried truth of Moses, who legend said rescued his fellow Hebrews from the Egyptians, crossed the Red Sea, and led them to the Promised Land. Using an assortment of texts drawn from highly selected histories of Egypt as well as the Hebrew Bible, Freud argued that the latter was like a manifest dream about a traumatic and long-denied past. While he noted that his efforts to discover this supposed trauma were novelistic, he did not waiver. Few professional historians and Egyptologists agreed: Like Kroeber, they found Freud's "reconstructions" of what might have happened to Moses unscientific poetry. Alongside these faults, Freud's stubborn, brilliant, and courageous virtues as investigator and observer appear in this last great book.

**Conclusion**

Freud was prominent in anthropology from the 1920s until finally losing favor with the national character studies of the 1950s. However, during that period, anthropologists at Harvard, Yale, the University of Chicago, and similar American research universities used versions of psychoanalytic theory to study how child-rearing techniques produced "modal personalities." For example, Erik Erikson, at Harvard, studied how one American Indian group produced warriors while another group produced quiet farmers.
Other anthropologists, like Margaret Mead at the American Museum of Natural History and Columbia University, examined Pacific Island groups that produced adolescents and young adults whose notions of sexuality and ethics differed markedly from those of middle-class, midcentury Americans. Similarly, Mead's colleague Ruth Benedict examined the personality characteristics of the Japanese during the Second World War.

Some anthropologists became clinicians and did psychotherapy with their subjects. Going the reverse direction, some argued that native cultures had their own versions of psychoanalysis. Claude Lévi-Strauss, for example, argued that the shamans of South American cultures were structural equivalents to New York City psychoanalysts. Freud would have affirmed Lévi-Strauss's claim. He believed that his insights into the ubiquity of repression, sublimation, and other unconscious devices pertained to each of these domains: societal, group, and personal. He generalized his clinical model of the mind to the study of groups—historical and prehistorical societies—and so-called higher civilizations, like those of 20th-century Germany and the United States.

Looking at Freud 100 years later, this may seem commonplace. We live in a world saturated with sexual jokes, movies, TV shows, and a nearly infinite supply of pornographic narratives and images. Freud became world famous because he forced medical experts and lay persons alike to see more clearly that sexuality is central to human development, to culture, to ethical discourse, and especially to religious instruction. Complex historical events, such as the rise of industry, urbanization, increasing freedom for women, mass communication, the demise of traditional powers, and World War I, among others, created a context in which Freud's ideas were exciting, revolutionary, and persuasive. By the 1920s, anyone with claims to intellectual sophistication, whether in Europe or the United States, talked about Freud and his creation, psychoanalysis.

See also Bachofen, Johann J.; Benedict, Ruth F.; Chodorow, Nancy; Culture and Personality; DuBois, Cora; Dundes, Alan; Frankfurt School; Frazer, James G.; Hall, Edward T.; Kardiner, Abram; Kroeber, Alfred L.; Lévi-Strauss, Claude; Lyotard, Jean- François; McLennan, John; Mead, Margaret; Myth, Theories of; Psychological Anthropology; Sacrifice; Smith, William Robertson; Spencer, Walter Baldwin, and Francis James Gillen; Spiro, Melford; Symbolic and Interpretive Anthropology

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