

Freud's Oral Stage at a Glance

Psychosexual stage 1: birth to about 12 to 18 months

Key Facts

Focus zone:	The mouth: sucking, feeding, and mouthing objects
Central conflict:	Weaning, the infant's first experience of loss
Fixation cause:	Too much gratification or too much frustration
Key figures:	Sigmund Freud (1905) and Karl Abraham (1924)

The Two Fixation Types

Oral Receptive

Also called: oral passive, oral incorporative

Cause: overindulgence, delayed weaning

Traits: dependent, trusting, gullible, optimistic

Habits: smoking, snacking, nail-biting

Oral Aggressive

Also called: oral sadistic

Cause: frustration, abrupt or early weaning

Traits: hostile, cynical, envious, pessimistic

Habits: sarcasm, arguing, cutting criticism

What the Research Found

Held Up: The Traits

Kline & Storey (1977): factor analysis found two personality clusters resembling oral optimism and oral pessimism.

Didn't Hold Up: The Cause

Kline & Storey (1980): most hypotheses about the origins of these traits failed.

Bornstein (1992): dependency links to overprotective, authoritarian parenting, not feeding.

Common Exam Traps

- Receptive, passive, and incorporative are one type
- Both too much and too little comfort can cause fixation
- Abraham, not Freud, split sucking and biting phases
- "Oral retentive" is a mix-up with anal retentive

Key Contribution: Freud treated the first year of life as psychologically important, an idea later tested far more rigorously in attachment research.