

Dual Instinct and Structural Theories: DSM-5-TR

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Abstract

The genetic based Dual Instinct Theory is determined by evolutionary history. Aggression is required for survival and sex for propagation of species. Aggressive and sexual drive derivatives with their corresponding defence mechanisms are combined with biologically based stages of infant/child development and the functional entity of Structural Theory. This model of human nature is the applied to the diagnostic categories of DSM-5-TR. Objectives: To follow the innate Dual Instinct Theory from life to death and through Artificial Intelligence; connect it with biological stages of development of the Structural Theory and illustrate its manifestations in DSM-5-TR classifications. Method: Review of selected published literature. Applying the principle of focus and cognition of informed clinical observation of innate drive derivatives in conjunction with The Structural Theory. Both theories are functional entities with no structures involved. Sigmund Freud's biologically based stages of development; oral, anal, genital pubic, adult, and geriatric along with a variety of unconscious, automatic, and persistent defense mechanisms are selectively folded into diagnosis listed in the manual.

Keywords

Dual Instincts, Structural Theory, Stages of Development, Drive Derivatives, Mechanisms of Defense

1. Introduction

The inevitable biologic anabolic and catabolic processes will not be assessed until later in the article when higher order thinking is applied to development and stages as set forth in the Structural Theory (ST).

Edelman states [1], the Dual Instincts and their drive derivatives are represented by evolutionary requirements of aggression for survival of the species and sex for

propagation. In the oral stage, nursing infants cry out and show anger when their immediate needs are not met. Concurrently, as Edelman states, the brain develops as a self-organizing system. Simultaneously, visual, auditory, olfactory, and touch senses fold into the archaic unconscious. Ego formation, in turn, joins in the self-organizing system of specific areas of the brain along with networks that are formed in the central nervous system (CNS), autonomic nervous system (ANS), and peripheral nervous system (PNS.) Myelination for nerve impulse conduction takes several months. The networks continue to form in life as epigenetic biological, psychological, and social events take place. As Edelman stated, “The neurons that fire together wire together,” in the developing individual. Neural networks are based on the unique human capacity for speech and language that is essential for higher order thinking. Damasio [2] stated, “The body is a landscape for the brain.” Neurological networks are set down concurrently with genetically powered developmental stages.

Sigmund Freud [3] biologically grounded his designated oral, anal, and genital stages of development. During his self-analysis, he wrote to Wilhelm Fleiss, “It’s an intellectual hell, layer upon layer of it, with everything gleaming and pulsating, and the outline of Lucifer-Amor coming into sight at the darkest center.” The foregoing, I believe, led to the concept of the oedipal complex with its themes of sex and murder.

Anna Freud observed and augmented her father’s stages of human development during its long period of dependency on their parents or their surrogates/caretakers. She postulated lines of development, and diagnostic recommendations, based on informed, direct clinical observation. In 1915, she published, “Normality and Pathology in Children”. In 1974, she published, “A Psychoanalytic View of Developmental Psychology”. Her enhancement of direct, informed clinical observation is similar to Sigmund Freud’s statement that “Psychoanalysis’ only claim of scientific validity is the method of ‘free association’ which was conceived from his direct clinical observation of patients”.

Anna Freud stated “The variety of progress on the lines of developmental failures and successes can be held responsible for the innumerable variations in human character and personalities”.

A. Freud [4] stated “Far from disturbing this process of growth, the instinctual urges through the constant pressures they exert serve as mind builders”.

The psychiatric Diagnostic Statistical Manual (DSM-5-TR) [5] is diagnostically dependent on clinical observation throughout its classification of mental disorders and corresponding behaviour whether it is categorising so-called functional or organic etiologies.

2. Personality Disorders (PD)

The DUAL INSTINCT THEORY (DI) is also referred to as the Life Force and the Death Force. These inherent forces are readily identified. That is not the case with their drive derivatives which may be partial, combined, and disguised. It

resembles Freud's referral to a disguised wish in dreams.

The DI has made its way into personality traits and disorders. Characteristically, it presents as an enduring pattern of behaviour with concomitant mental activity. To the extent that it interferes with important routine activity, it may warrant designation in DSM. For example, fixation at the oral stage may result in an individual with passive and dependent traits.

Fixation at the anal stage may result in an individual who is stubborn, rigid, and exhibits compulsions/obsessions. Failure to separate and individualise may lead to a Borderline Personality Disorder. Personality Disorders are concurrent with defence mechanisms which by definition are unconscious, automatic, and pervasive. Defense mechanisms are utilised to reduce anxiety or unpleasantness which may or not be combined and readily clinically observable to be related to instinctual drive derivatives. At the current state of our knowledge personality traits or disorders are not well worked out to the degree that there is sufficient agreement between research workers in the field. To this point, etiologies are complex and varied.

Nonetheless diagnosis of PD is the result of informed observation of a persons' deviation from ability to perform usual behavioural functions, to understand the underlying determinants and have to work with psychological concepts.

Sigmund Freud's Structural Theory (ST), in my opinion, at our current period of psychoanalytic evolution best fits Einstein's [6] concept of a useful theory as stated in his autobiography. "A theory is more impressive, the greater the simplicity of its premises, the more kinds of things it relates to, and the more extended its area of applicability." His definition affords a validation of Structural Theory as a serviceable model to account for the widest range of mental activity and human behaviour. It is a functional entity as is the Dual Instinct Theory. The tripart of ID, Ego, SuperEgo combined with the innate DI drive derivatives of aggression and sex provide a dynamic foundation for the understanding of the human species mental processes and corresponding complex behaviours. In essence the (DI) and (ST) theories were founded on a dynamic functioning complex of neural networks to explain mental activity and physical behaviour whether an individual is awake, fantasising, or dreaming. In Freud's Interpretation of Dreams, he already had the elements of the SI in his explanations: repression of a disguised wish, dream work, (defense mechanisms), demonstrating unconscious images of condensation, displacement, residue of the day images (Ego), and anxiety dreams (SuperEgo). It took cognition and contemplation to rework the unconscious, preconscious, and consciousness model to the (ST.) Successive researchers added Conflict and Compromise Formation to the theory (Brenner) [7] to represent the ubiquitous feature of mental activity. Having now described the theoretical foundation of the DI and SI dynamically interacting, the progressive human stages will be discussed.

In pubescence, there is an inflow of male and female hormones giving impetus to the Life and Death Forces. Issues of gender identity and competition with

peers are dealt with via drive and drive derivatives, then following the difficult period of adolescence. It is characterised by emotional instability, moodswings, self injurious behaviour to mention a few obvious ones that may or may not need an evaluation for the potential services of behavioural science workers. Increased freedom and expanding language capacity involve higher level thinking. Important choices need to be made. For example, joining so-called gangs with aggressive drive derivatives engaging in drug substance activities or a path of furthering education or technical training in an effort to prepare for a productive life.

Sex and aggressive drive derivatives are at play with an individual as well as with multiple individuals or groups. Next is the period of adulthood.

Now that the elements of the foregoing have been identified they will be applied to selective clinical venues. With the normal maturation of an individuals' mental and physical attributes they will be illustrated in diverse settings. For example, the aggressive drive derivative may be carved into a marble statue or be expressed in a sonnet. Freud visited the Moses of Michaelangelo multiple times in Rome. The statue depicts Moses after climbing down from Mount Sinai with the Ten Commandments was seated and gazed upon the Philistines worshipping false Gods and angrily gazed upon them with wrath in his eyes. Freud [8] observed the massive figure's muscle tension and gaze and concluded that Michaelangelo carved into marble that emotional moment. It was one of restraint. "The highest achievement of human mental activity is the triumph over basic instincts for a cause to which he is devoted." Sublimated drive derivatives may be dramatised clearly evident in Puccini's opera, *Tosca*, and Verdi's *Rigoletto* or *Othello*. In literature, some examples are Shakespear's *Hamlet* or *Macbeth*. In general, innate drive derivatives with accompanying defence mechanisms show up in various venues; domestic settings, group activities, and great institutions, domestic and international.

The Military-Industrial complex obviously produces military armaments engaging in horrific wars and human devastation.

Yet, it harnesses electricity and technology for the construction of cities and every day human amenities. Large scale industries closer to home are the pharmaceutical and porn industries.

The pharmaceutical industry has made great therapeutic discoveries for medicine and society at large. In psychiatry, despite extensive neuroscientific research, when it comes to contributing to the understanding of human nature, it has yielded modest gains. Even psychopharmacology's current vaunted goal of "precision psychiatry", has a long way to go before it reaches the precision found in internal medicine and oncology. Guidance [9] for psychopharmacologists consists of moving the drug dosage up or down if the desired therapeutic is not reached in an appropriate length of time closely monitored for adverse side effects. If ineffective, other options are to add a similar drug from the same class or a different drug from another group, then if still not effective, switch and add a drug from a different category to the therapeutic regimen which may lead to po-

lypharmacy and a potential broadening of the side effect profile.

The porn industry encompasses drug and sex trafficking and is conspicuous via the media with graphic violence, organized crime, self harm, destructive behaviour or violence toward others including physical assault and murder. Multiple risk factors have been worked out for suicide and violence and are widely utilized as risk factor forms. Unfortunately, they have no reliable predictive value. Imminent danger to self or others leads to prompt psychiatric intervention requiring management usually in a sheltered environment. There, too, additional measures may be indicated to prevent injury to self or others.

Protocols are mandated to follow the least restrictive interventions.

The adult stage carries a DI interwoven in an infinite variety of dynamic drive derivatives interacting with internal and external pressure and events. Accordingly, they may in response partially combine with different intensities to influence mental activity and behavioural manifestations. In continuity, the adult phase eventually slips into the geriatric phase. Special needs, care, and management are arranged. Growing old has added many complexities to the geriatric period. The emotional regulation may falter and become labile, diminution of cognitive capacity and physical integrity, medical problems, personal losses, and a decline inability to perform activities of daily living. Multiple losses may increase risk factors for isolation, depression, and suicide. Social measures are taken to cope with the foregoing eventualities which may include food, shelter, and supportive institutions. Family and friends who are available have an important role to play. Clinical staff monitor patients behaviour, mental status, and biological etiologies. Diagnostic classification is determined by the findings. There is no lack of evidence of DI drives and derivatives of patient incidence of physical assaults and/or sexual activity. Inevitably, however, the anabolic-catabolic spectrum during this period shifts to the catabolic processes that contribute to the end of life. The price for life is death. Civilization moves on to its struggle with Life and Death Forces.

3. Summary

In essence, the DI and STs are founded on a dynamic functioning of complex neuron-networks to explain mental activity and physical behaviour whether an individual is awake, fantasizing or dreaming as it persistently influences human nature. Finally, it makes its appearance in Artificial Intelligence (AI.)

AI has attracted a great deal of attention and has given rise to various technical enterprises. It has provided mechanical prosthetic advances in robots and has selective ability for creating complex algorithms. The process of conscious, higher order thinking, however, requires human experience, emotions, and unique mental activity. Conflict and compromise formation is ubiquitous in mental life and provides the capacity to plan ahead with prudence working with mathematical formulas for algorithms and safeguards. This capacity is limited to the human brain interacting with its dynamic and emotionally stored memory and ability to

enrich its intellectual resources. A functional capability for metaphor referencing and cognitive reflection of unconscious primary processes connections are exclusive to the living human brain. In doing so it carries with it the innate, genetically and biologically influenced DI and drive derivatives. The combination of the Life and Death Forces with the functioning entity of the ST as represented in the brain is a prime model. Future models will emerge either from modifications of existing ones or new models will be formulated for the ongoing efforts to contribute to the realistic understanding of human nature. The foundation of DI, their flexible drive derivatives, and defence mechanisms will be in it in real time, every time. It is this author's intention and purpose to highlight its importance for understanding human nature.

4. Conclusion

There is no apparent current conclusion for the basic genetic instincts in the epigenetic struggle between Life and Death Forces. They will, however, participate in the human species' ongoing involvement in meeting its destiny.

Conflicts of Interest

The author declares no conflicts of interest regarding the publication of this paper.

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