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HOMOSEXUALITIES
Psychogenesis, Polymorphism, and Countertransference

edited by

Elda Abrevaya
and
Frances Thomson-Salo

A volume in the Psychoanalysis & Women Series for the Committee on Women and Psychoanalysis of the International Psychoanalytical Association

KARNAC
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We have dedicated this book to the memory of Alcira Mariam Alizade. She was a most generous and tireless promoter of the activities of the IPA Committee on Women and Psychoanalysis. Her intelligence, passion, and vitality were invested in theoretical and clinical studies of sexuality and gender, where her contribution was most valued. Her original thinking and writing made her a significant person for contemporary psychoanalysis. Mariam Alizade was very creative right up until the end of her life, with many ideas yet unrealised.

We thank the individual authors who have contributed so generously to this book, representing a range of work by a number of European psychoanalysts as well as analysts from North America and Latin America; in exploring and expanding their views about the homosexualities, they have furthered the debate in a way that will always be felt to be respectful, even if not always agreed with.

Finally, we thank the International Psychoanalytical Association for their ongoing commitment to the work of the Committee on Women and Psychoanalysis.
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Editors

Elda Abrevaya trained in the Psychoanalytic Society of Paris (SPP) and is a training analyst of Istanbul Psychoanalytical Association. She has worked as a professor in the Psychology Department of the University of Puerto Rico and in a Mental Health Center there. Her clinical experience in this setting has been the subject of three books which study childhood, madness, psychiatric institution, and poverty: *El Niño, su Sufrimiento y la Pobreza*, Universidad de Puerto Rico-Publicaciones Puertorriqueñas, 1992; *Del Espejo al Otro*, Universidad de Puerto Rico-Postdata, 1998; *La Locura como Pasion*, Universidad de Puerto Rico-Postdata, 1999. She has recently published on femininity with a special focus on ageing and menopause: *Kadınılığın Uzun ve Dolambaçlı Yolu*, Bağlam, 2014.

Frances Thomson-Salo, Associate Professor, trained in the UK as an adult and child psychoanalyst and is a member of the British Psychoanalytical Society. She is past president of the Australian Psychoanalytical Association, a training analyst, and overall chair of the Committee on Women and Psychoanalysis for the International Psychoanalytical Association. She is Series Editor for Karnac’s “Psychoanalysis and Women” series and a member of the Editorial Board of the *International Journal of Psychoanalysis*. 
Contributors

Giovanna Ambrosio is a training and supervising psychoanalyst of the Italian Psychoanalytical Association (AIPsi) and is in full time psychoanalytic and psychotherapeutic practice in Rome, Italy. She is the Director of the AIPsi Training Institute and past Secretary (2003–2007) of the Italian Psychoanalytical Association. Since 1996, she has been the Chief Editor of Psicoanalisi, the Journal of the Association. She is the past Overall Chair of COWAP (2005–2009) and COWAP consultant (2009–2011). Since 2012, she has been an editorial board member of the International Journal of Psychoanalysis. Since 2013, she has been a European representative on the IPA board. She is the author of various publications and has edited several books published by Karnac: On Incest: Psychoanalytic Perspectives (2005); Tranvestism, Transsexualism in the Psychoanalytic Dimension (2009), and co-edited with Simona Argentieri and Jorge Canestri, Language, Symbolization, and Psychosis (2007).

Jacques André is a psychoanalyst and member of the APF (French Psychoanalytic Association). He is the author of several books, including The Feminine Origins of Sexuality (PUF, 1995, translated into five languages) and Words of Men (Gallimard, 2012). He is a Professor at the University of Paris-Diderot and Chief Editor of the series “Petite Bibliothèque de Psychanalyse”, published by PUF.

Martina Burdet is a full member and training analyst of the Psychoanalytic Association of Madrid (APM), and, currently, a member of its Board of Directors. She has published various papers on the subject of gender violence and masochism in women, has explored issues of general interest to men and women and, in particular, among other research themes, different forms and figures of sexuality currently.

Raquel Cavaleiro Ferreira is a psychiatrist and psychoanalyst of children, adolescents, and adults with a private practice in Lisbon; she is a Member of the Núcleo Português de Psicanálise-IPA Study Group and of the International Psychoanalytical Association. She worked for a number of years in a unit specialising in adolescent disorders in Lisbon. She is interested in studying severe pathologies, and has written several papers on the subject.
Monique Cournut is a training analyst of the Paris Psychoanalytic Society. She has coordinated the Jean Favreau Center of Consultations and Treatment. She was an early member of the COWAP committee, representing Europe. In 1993, with Jean Cournut, she presented the Report at the French Languages Congress. She has written papers in the *Revue Française de Psychanalyse* and the *International Journal of Psychoanalysis*. She published *Féminin et Féminité* (1998), contributed in 2001 to the book *Incestes*, and in 2002 to the *Monographie de la RFP* with her paper “Clés pour le féminin; femme, mère, amante et fille”.

Paul Denis is a training analyst of the Paris Psychoanalytic Society. He was the director of the *Revue Française de Psychanalyse* from 1996 to 2004. He is the author of numerous books and papers, including *L’emprise et la Satisfaction* (PUF, 1997); *Eloge de la Bêtise* (PUF, 2001); *Les Phobies* (PUF, 2011), and *Le Narcissisme* (PUF, 2012).

Maria Teresa Flores is a psychiatrist and psychoanalyst, and a full member and training analyst of the Portuguese Nucleus of Psychoanalysis—IPA Study Group. She is a member of the SEPEA (Société Européenne pour la Psychanalyse de l’Enfant et de l’Adolescent) and works in private practice with children and adults. She has been European Co-Chair of COWAP.

F. Güver Kazancıoğlu, MA, is an analyst in training with the Istanbul Psychoanalytical Association. She has worked in private practice with children, adolescents, and adults. She has worked in schools as a psychoanalytically informed counsellor for a number of years and her main interests are education and psychoanalysis, adolescent psychotherapy, and creativity in psychoanalysis. Her paper, “An adolescent journey: filling the void with sound”, which was published in the *International Journal of Psychoanalytic Self Psychology* in 2012, has been identified as a significant contribution to the study of autism by Psychology Progress (Center for Top Research in Psychology).

Ayşe Kurtul is a psychoanalyst and a member of the Istanbul Psychoanalytical Society and IPA since 2010. She has worked as a psychologist in the hospital of Cerrahpaşa Faculty of medicine in the Geropsychiatry Department and the Department for Sexual Dysfunctions. She has been in private practice since 1996 and is particularly interested in female studies.
Ingrid Moeslein-Teising is a psychoanalyst of the German Psychoanalytic Association (DPV/IPA), group analyst, a doctor in psychosomatic medicine working in private practice and a director of an inpatient psychosomatic clinic in Bad Hersfeld, Germany. She teaches at the Alexander-Mitscherlich Institute, Kassel. Her scientific interests, publications and presentations focus on the woman in psychoanalysis. She has contributed to workshops on COWAP topics within DPV conferences, to European COWAP conferences and IPA and EPF conferences. In 2009 she became a member of the IPA Committee on Women and Psychoanalysis and is currently COWAP European co-chair. With Frances Thomson-Salo she published The Female Body – Inside and Outside (Karnac, 2013).

Ferhan Özenen has been a member of the Istanbul Psychoanalytical Association and an IPA member since 2008. Her main interests are femininity and sexuality. She has given seminars on femininity and hysteria at Istanbul Psychoanalytical Association since 2009. She organised the International Psychoanalysis Meeting on Narcissism (2009) and has participated in, and contributed to, the organisation of the COWAP meetings (2008 and 2013) in Istanbul. She is on the Cinema and Psychoanalysis Committee, organising discussions on films every year, presenting the relationship between cinema and psychoanalysis. Her papers on various topics have been published in the Journal of the Istanbul Psychoanalytical Association.

Ester Palerm Mari, MD and clinical psychologist, is a member of the Spanish Psychoanalytical Society (SEP), a component society of the International Psychoanalytical Association. Dr Palerm served on the Board of Directors of the SEP from 2008 to 2012. She was part of the staff of the Psychosomatic Unit at the Hospital de St. Pau i la Santa Creu in Barcelona and has a private practice in Barcelona where she works as a psychoanalyst and psychotherapist for children, adolescents, and adults. She has written papers on a number of themes such as pregnancy, delivery, and the post partum period.

Ralph Roughton, MD, is Clinical Professor Emeritus of Psychiatry at Emory University, a training and supervising analyst, and former Director of the Emory University Psychoanalytic Institute. He was Founding Chair of the American Psychoanalytic Association’s (APsaA) Committee on GLBT Issues and honoured for that work since
1998 by APsaA’s annual “Ralph Roughton Paper Award”. He has served on the Editorial Board of the *Journal of the American Psychoanalytic Association*, on various committees of APsaA and the IPA, and is the author of papers on psychoanalytic process, sexual orientation, and treatment for gay men.

**Juan-Eduardo Tesone** is a physician, psychiatrist, and psychoanalyst, a full member of the Société Psychanalytique de Paris, member with training functions of the Argentine Psychoanalytic Association, Associate Professor of the School of Psychology of Paris Ouest-Nanterre, Professor of the DUEFO of the Medical School of La Pitié-Salpêtrière, University of Paris VI, Full Professor of the Doctorate program in psychoanalysis of the School of Psychology of Salvador University, Buenos Aires, and Professor of the Masters Program in “Interdisciplinary Studies on Subjectivity” of the School of Philosophy, the University of Buenos Aires. He is the author of more than 100 papers in Spanish, French, English, Italian, German, Portuguese, Croatian, and Turkish, co-author of several books, and the author of *In the Traces of our Name: The Influence of Given Names in Life* (Karnac, 2011).
I am pleased, as the Overall Chair of the International Psychoanalytical Association’s Committee on Women and Psychoanalysis (COWAP), for this book to be included in the growing library of the Karnac series “Psychoanalysis and Women”, which presents revisions to current understandings. Otto Kernberg, when he was President of the IPA, set up COWAP in 1998 to explore scientific and political issues about the differences between women and men. A hallmark of COWAP is always being interested in engaging with other organisations and ideas, and in opening up a reciprocal discussion.

The book is based on a COWAP conference on the theme of “Homosexualities” held on 31 May and 1 June, 2013, in Istanbul. This conference, with its highly complex and quite explosive theme, coincided with the igniting of a social upheaval in support of democratic rights and led to the clinical workshops on the second day of the conference being cancelled. In this sense, the opportunity to realise this book, which includes the theoretical contributions as well as clinical cases and their discussion, is a restitution of what had been disrupted.

The chapters in this book offer a depth, breadth, and vibrancy of creative and scientific interest. The writing is often poignantly
evocative, and powerful, and, as psychoanalytic thinking and work become more complex, our understanding of the analytic process is deepened, with a greater awareness of broader ways of understanding the field. Much creativity has emerged from what has been studied, which we hope will lead, in turn, to a new therapeutic synthesis.

Frances Thomson-Salo
Introduction

Elda Abrevaya

When we study the cases presented in this volume, we note that there is no typical development of homosexuality. In each of them, the object choice can only be grasped by examining its psychogenesis, that is, the psychic history of the subject and its vicissitudes.

*Homosexuality in the work of Freud*

Freud had, from quite early, approached homosexuality with the scientific rigour and openness that always characterised his work. In this sense, his conception was not moralistic. In the revisions he made in 1910 and 1915 to *Three Essays* (1905d), he remarked that psychoanalysis had not yet succeeded in obtaining a “complete explanation of the origin of inversion”, but had discovered “the psychic mechanism of its development” (pp. 144–145). In his essay *Leonardo da Vinci and a Memory of his Childhood* (1910c), he tried to grasp the artist’s latent homosexuality through the understanding of its psychic determinants. He stated in a footnote added to the text in 1919 that

even the most normal person is capable of making a homosexual object choice, and has done so at some time in his life, and either still
adheres to it in his unconscious or else protects himself against it by vigorous counter-attitudes. (p. 99)

In fact, Leonardo’s homosexuality manifested itself in a platonic way, in his relation with his disciples. Thus, Freud, in this footnote, proposes the concept of psychic bisexuality, which will serve him as an essential tool in his theorisation of the case of the young homosexual in 1920.

The young homosexual

Freud, in 1920, undertook the study of the psychic mechanisms of the genesis of the homosexual object choice in a young woman. Nowadays, it would be more appropriate to talk about an adolescent, as she was eighteen years old when she met Freud. Like Dora, she was brought to analysis by her father, but for a different motive from the one that had led Dora to Freud. In this case, the father requested Freud to treat his daughter’s homosexuality. Freud thought from the beginning that the attempt to convert a homosexual into a heterosexual is an impossible therapeutic task.

One must remember that normal sexuality too depends upon a restriction in the choice of object. In general, to undertake to convert a fully developed homosexual into a heterosexual does not offer much more prospect of success than the reverse, except that for good practical reasons the latter is never attempted. (Freud, 1920a, p. 151)

In fact, individuals who have made a homosexual object choice will not consult the analyst for conflicts about it. They would be reluctant to give up the pleasure obtained by it. When they seek an analyst’s assistance, it would be for other motives.

Lacan (1994) did not hesitate to consider Freud’s essay on the young homosexual as one of his most brilliant, but also disturbing, texts. Freud, through the short analysis of his young patient, which lasted only three months, examines not only the psychic mechanisms of the development of her homosexuality, but also contributes to the study of the complex nature of the girl’s early tie to her mother. Eleven years later, in “Female sexuality” (1931b), Freud made the stunning discovery of the first and exclusive attachment of the girl to the
mother, a finding that was unimaginable for him until then. He related this late discovery to the violent repression of the girl's first attachment. The love for the mother had been buried in the shadowy sphere of the infantile, behind the love for the father, just as “the Minoan–Mycenean civilization behind the civilization of Greece” (p. 226). However, we can speculate that what had really prevented Freud making this discovery was not only the violent repression of the girl's passionate love for the mother, but was also his phallic conception of female sexuality.

When Freud focused, between 1908 and 1925, on the question of infantile sexuality and the Oedipus complex, he could have had no idea about the impact of the first attachment in the girl's sexual development and it was the boy's process that was the model for the girl. This is the reason why Ernest Jones (1933) pointed out that differences among analysts in regard to female sexuality stemmed from the inclusion or exclusion of the pre-oedipal phase. Some analysts, such as Melanie Klein and Ernest Jones, considered this phase to be essential, while other analysts excluded it from their study and focused on the oedipal phase. Freud was convinced that the boy was the one who mostly suffered from repression during the resolution of the oedipal complex and he defined this process as destruction. Freud had the opportunity to verify, a year before the publication of the study on the young homosexual, that the repression of the fantasy in the girl of being beaten by the father was much more violent than in the boy. Only the existence of a severe superego could explain the force of repression of this highly erotic and feminine fantasy in her. What ensues from this discussion is the necessity to take into consideration the inexorable character of repression of the girl's first attachment, which would have consequences for the formation of her superego and on the repression of her femininity in regard to the father.

What was surprising, indeed, for Freud in his discovery of “the Minoan–Mycenean civilization” was to find out that the passionate love of the girl for the father was a “transference” of her first attachment, with all its emotive and sensual components. “Except for the change of her love-object, the second phase had scarcely added any new feature to her erotic life” (1931b, p. 225). Yet, if her first attachment is so intense, how then would she succeed in transferring her original love object to the father? This would be the great challenge for
the girl, who would have to go through a long, circuitous path in order to access femininity.

What, then, had been the interplay between the two love objects in the young homosexual? Freud noted that the young girl had chosen the father as the love object in her childhood and adolescence, as is quite frequent in some cases of female homosexuality, but a disappointment caused by the birth of a brother when she was sixteen years old had provoked an inversion. At a time when her incestuous desire for a child from the father was revived, it had been the mother who had received the real child. Could this disappointment have been so traumatic as to provoke a rejection of her femininity and lead her to regress to the maternal object? The solution that she had found to her disappointment corresponded to “the most extreme case” (p. 158). Thus, she identified with her father, repudiating her femininity and the wish for a child. Freud noted that the young girl repressed her hate for the mother and compensated for it by reviving her ancient love for her. She had, in fact, reversed her hate into love. At this point, Freud’s analysis of the young girl’s feelings for her mother seems to us one of the most brilliant parts of the paper. The “consuming” love that she had for the society lady was no more than the expression of her early love for the mother.

The regression to the maternal object had a paradoxical character. How could she regress to an object that had been the source of ambivalent feelings in her? Her mother had been cold and distant with her since her childhood, whereas she was affectionate with her sons. She also considered her beautiful and intelligent daughter as a rival for her. We can tackle this paradox provided that we examine the coexistence of the love for the father and the yearning for the mother in her. This aspect helps to illustrate the double love object in the girl’s Oedipus complex. Julia Kristeva, by naming the first passionate attachment to the mother as “Oedipus prime”, and the love for the father as “Oedipus bis”, (2005, p. 235) underlines that the oedipal love for the father comes as a repetition of the earliest attachment to the mother.

What was surprising in the young homosexual’s relation with the society lady was the resemblance of the latter to the frustrating mother. She remained quite indifferent to the young girl’s love. However, she was not only a substitute for the mother, her elegant, slim figure and her manners were reminders of the elder brother. Her
object choice corresponded, therefore, not only to her masculine part, but also to her feminine part and combined satisfaction of bisexual drives. Freud had also identified this configuration in male homosexuals. What drew Lacan’s attention was the unconditional and disinterested love that the young girl manifested for the lady, in spite of her coldness and the absence of an erotic relation between them. She unconditionally offered her love to the lady, in return for “nothing” (1994, p. 140). The “nothing” corresponded to the phallus that the lady did not possess, as well as to the love that she did not return to the young girl. For Lacan, the latter’s love represented its most developed and sublimated form. At this point, he coincided with Freud, who considered this kind of dedication as essentially masculine. The young girl opted for being the lover rather than the beloved and developed a masculine attitude towards the object. The desire to be loved places each subject, whether man or woman, in a feminine position, as Monique Cournut (Chapter Five) points out. The young girl situated herself in a masculine position by dedicating herself to the society lady and also by wishing to save her, as a man would in his relation with a debased woman (Freud, 1912d).

The after-effects of the case of the young homosexual

The complexity of the young homosexual’s psychic reality that Freud tried to deconstruct in 1920 was confirmed much later in a biographical book on her life by two lesbian authors. She died in 1999 at the age of 108, and the book was published a year later (Rieder & Voigt, 2000). Her life story, examined from childhood to old age, broadens our view of her psychic world. We discover that she had attempted suicide not once, but three times. The motive of the second suicide was the disappointment caused by the society lady, who was insensitive towards her feelings. On that occasion, she had tried to poison herself. The third time, she attempted to shoot herself in the mouth, but did not succeed because she did not know how to use a revolver. At that period, she was madly in love with a young man who did not reciprocate her love. So, each time, the object’s insensitivity to her feelings and yearning for love was a repetition of the original disappointment and led to desperation. If we take into consideration her suicide attempts and the melancholic grief that underlay them, we can more
easily answer Freud’s question: was the young homosexual ill or not? We consider that she was ill, but had never felt the need to look for therapeutic assistance for the strangeness of her inner world. She lacked any curiosity in regard to her inner life.

Another interesting point of the case of the young homosexual consists in being a study on female homosexuality. The latter has been neglected by psychoanalytic literature, since it is less visible and problematic than male homosexuality. Even today, the femininity of a man is problematic for the social order because it puts into question the very principle by which phallic order reigns and is reproduced. Female homosexuality is also less visible not only for social motives, but also for structural reasons. Sameness (homos), which characterises the homosexual couple, is precisely a constitutive aspect of female identity. The girl has to build her femininity on the basis of sameness with her mother. After having achieved a primary identification with her, she has to separate herself from the narcissistic fusion and elaborate her difference, which is a life-long task. She has to work out what has been projected on to her by the mother, in the name of sameness.

Psychoanalysts such as Kestemberg (1999) and Denis (2005) consider sameness as the basic trait of the first relation of the child. This relation, in spite of being “homonarcissistic” (Denis, 2005, p. 122) and sexually undifferentiated for both sexes, acquires, nevertheless, a specific signification in the girl’s psychic development.

**Gender and infantile sexuality**

The object choice depends on the psychic history of the subject, modelled by his or her narcissistic relations and infantile sexuality. More specifically, the libidinal history will be built on the basis of gender. At birth, the child receives not only a name, but, equally, a gender that is “assigned” by the other. The other, the socius, corresponds to parents, relatives, and also to influential figures in the family (Laplanche, 2007, p. 167). The child is continuously “bombarde” by the preconscious–conscious messages of the adult, which are messages of assignment of gender. They communicate at the same time “noises” that convey the unconscious fantasies of the parents or other adults close to the child and correspond to the sexual in the adult. Or, the sexual consists in the repressed infantile sexuality (p. 157) of the adult,
which is reactivated by the presence of the child. In this sense, the assignment of gender to the child is organised by the repressed infantile sexuality of the parents. That is why gender is not the anatomical sex, but, rather, “the sex of a fantasised anatomy” (p. 161). Even if the merit of gender studies and feminist literature is to have shown the social determinants of gender, this approach has also created methodological difficulties. Their conception of gender has not taken into consideration the unconscious “noises” related to the infantile sexuality of the adult, as Jacques André (Chapter Two) suggests. In this way, gender tends to become purely a social construct. In fact, infantile sexuality imprints adult sexuality by the indestructible character of its original objects and equally with the nature of its polymorphically perverse pleasures.

The theoretical chapters

Paul Denis in Chapter One, “Gender as heritage of the first qualitative differentiation”, examines the question of gender, parting from Robert Stoller’s views on the early organisation of a “core gender identity” (Stoller, 1964). He emphasises the effect of the parents’ attitude in the building of this core, which has, essentially, a narcissistic value. At the beginning, the child’s sexuality is formless and there is no sexual differentiation between the mother and the father. The difference between them is made of qualities: their smells, the way they hold the child, and other nuances. At the beginning, the child apprehends the other’s sex, particularly the mother’s, on the basis of sameness, an aspect that can be related to “primary homosexuality” (Kestemberg, 1999). The building of gender constitutes the first level of organisation and precedes the recognition of the anatomical sex, which corresponds to the second level. At the beginning, the perception of the anatomical difference between the sexes is minimal. A radical transformation, that Paul Denis calls a “Copernican revolution”, occurs when this difference is grasped in terms of a constitutional difference that governs sexual roles and procreation. It is only then that the child’s identity becomes a sexual identity, together with a gender identity. The recognition of the anatomical difference of the other leads to the recognition of his or her own sex: male or female. Whereas anatomical sex is objective, gender is subjective, because of the
polymorphism of identifications with both parents. An individual can be feminine in some aspects and masculine in others, on the basis of psychic bisexuality. Even if the child is immersed in a gender pattern that is transmitted by the parents, their influence is not unilateral. Their attitude may play complementary or contradictory roles.

Paul Denis differs from Jean Laplanche when he argues for a certain plasticity of identifications in the building of gender, whereas Laplanche emphasises the prescriptive character of the assignment of gender. On the other hand, Denis’s conception of gender allows us to envisage the way a child can build his or her gender when raised by a homosexual couple. The child would establish his or her own gender equations in identification with both partners of the couple, where each of them is the carrier of masculine and feminine tendencies. Therefore, the process of identification with the parental couple would be similar for the child of a heterosexual couple, as well as the child of a homosexual couple. Once the child of a homosexual couple constructs his or her gender, then comes the differentiation of anatomical sex as an objective fact. Denis takes into consideration the role of infantile sexuality, which confers plasticity and polymorphism to the child’s identifications, contributing to the building of a gender complex. The organisation of gender implies a complex of polymorphic identifications and cannot be reduced to a core that imposes a particular sexual identification. Thus, it is question of a “gender complex” and not that of a “core gender identity” (Stoller, 1964).

Jacques André, in “Male homosexuality in analytic treatment” (Chapter Two), examines the generic pattern of male sexuality. The necessary intervention of the incest barrier between the two phases of the Oedipus complex creates a specific difficulty in men’s and women’s love life. “Where they love they do not desire and where they desire they cannot love” (Freud, 1912d, p. 183). In men, the objects that arouse desire are those who should not remind them of the incestuous figures of childhood. They can provide satisfaction only if they are debased. In this way, man can give full freedom to his sensuality and perverse fantasies and reach a high degree of satisfaction. Thus, a splitting occurs between tenderness for the wife–mother and sensuality for the mistress–whore. However, in spite of these preventative measures, if some detail of the female partner reminds him of the incestuous object (the mother or the sister), then the sexual act can easily be interrupted. This situation shows the fragility and the
capricious nature of heterosexual love. In this sense, what becomes problematic in our culture is heterosexuality. If the generic pattern of male heterosexuality appears as a compromise in regard to the fragility of heterosexual love, can homosexuality then be a “solution” for it? We would evidently have to consider the word “solution” carefully, because individuals do not choose their gender, and neither do they make an object choice in a conscious and rational way. We know that object choice is determined unconsciously.

According to André, the main contribution of psychoanalysis to homosexuality has been the proposition of a psychogenesis. Homosexual choice refers to a multiplicity of psychogenesis to the extent that it includes a specific libidinal history for each individual and contains different sources for the same person. Freud also stated the idea of the multiplicity of sources in the young homosexual’s object choice. The latter included two different sources, desire for the society lady and desire for the brother, combining satisfaction of the homosexual tendency with that of the heterosexual one. André discusses some repetitive patterns that underline the homosexual object choice. One of these patterns is shaped by the discrepancy between the assigned gender by the parent and the anatomical sex of the child. In this case, the assigned gender corresponds to the fantasised sex by the parent and does not coincide with the anatomical sex of the child. For example, the birth of a boy creates disappointment in one or both of the parents if they wished to have a girl. If their wish to have a girl has been so strong as to provoke the denial of the anatomical sex, then the boy can be identified as a girl. However, even at this point there is a certain space for plasticity. In other words, the assignment of gender by the other is not absolute because it is the carrier of polymorphic “noises” that emanate from his or her infantile sexuality. This aspect permits us to establish a parallel between the conceptions of gender of Laplanche, André, and Denis. There is a space for the circulation of masculine and feminine fantasies in the adult’s relation with the child, on the basis of psychic bisexuality.

Even if André notes that all sexual “choices” are determined by early love relations, thus emphasising the timeless character of infantile wishes, he is clear in not excluding the social and historical variations that society and, consequently, psychoanalysis have undergone. The social representations of homosexuality have changed throughout history and in our contemporary world. What was classified as a
A pathological entity in psychiatry is no longer considered as such. It is, therefore, inevitable for the psychoanalyst to be influenced by social and historical transformations that bring about changes in the cultural representations of gender.

Giovanna Ambrosio (Chapter Three) in her discussion of Jacques André’s chapter, agrees with his idea that there is no prototype of homosexuality. However, she remarks that the term “homosexuality” tends to have little to do with sexual desire and is used to cover various psychopathologies. In these cases, this question is more related to identity problems. Thus, homosexuality serves as a narcissistic and identificatory support, rarely constituting the motive of the suffering of the patient who consults the analyst. She states that the homosexuality of André’s male patients (Florent, Laurent, and Mark) should be examined more in terms of undifferentiated confusion and not so much in regard to homosexuality. Her analytic experience has been that declared homosexuality is not so much related to sexual desire but to defence organisations that intervene precisely in zones of confusion in the individual’s psyche. Thus, the central question in male and female homosexuality comes down to the articulation of narcissism and sexuality, including pre-oedipal and oedipal sexuality, as well as the integration of archaic anxieties.

On the other hand, those patients who suffer from confusion have difficulty in integrating sensuality and sexuality. Ambrosio considers that Freud and André use these two terms without distinction, and she points out the necessity of differentiating them. Sensuality, as a form of tender and exciting contact, is more related to the development of the self and, thus, to “being”. Sexuality is the more mature and genital form of satisfaction and integrates sensuality. It corresponds to the area of object relations and desire. What renders this area highly conflictual is that it is essentially drive orientated. In this sense, Ambrosio concurs with André, and, thus, with Freud, when she underlines the conflictual nature of sexuality. Sexuality, in its genital form, is fragile and capricious because it involves the interaction of object relation and desire, the conjunction of tenderness and lust. Almost an impossible marriage between the two, Freud would say, having discovered that something in the nature of the sexual drive was not favourable for its total satisfaction.

Ralph Roughton’s paper “The two analyses of a gay man: the interplay of social change and psychoanalytic understanding” (Chapter...
Four) tackles the analytic treatment of a gay man that was carried out in the 1970s. His chapter, apart from its undeniable clinical value, has historical importance because it conveys the views of analysts of the American Psychoanalytic Association. At the same time, it shows the extent to which, as André emphasises, analysts’ conceptions in regard to gender are influenced by social representations. In the 1980s, the American Psychoanalytic Association was a very conservative institution in spite of changes that had shaken society in regard to the gay movement. The dominant conception then was that homosexuality could be cured. So, analysts had distanced themselves from Freud's essential teaching in regard to a certain fixity of sexual choices. Freud had already underlined, with the young homosexual (1920a), that the patient with a homosexual object choice could not be converted into a heterosexual. The same would be true for the patient with a heterosexual object choice. In this sense, the object choice of the individual is determined by his or her infantile libidinal objects and is subject to a certain fixity.

Another significant aspect of the chapter is that Roughton, twenty-five years later, offers a new reading of the analytic work with his analysand, just as Kohut (1979) had done with his patient. The second analysis is, in fact, a reconceptualisation of this work in the light of social changes in regard to the gay movement that had influenced both the psychoanalytic institution and psychoanalytic theory. None the less, the most significant event that had an impact on Roughton’s reconceptualisation was the choice he made to be gay, which took place many years after the termination of his patient's analysis. We take note of the two analyses of Ben, the first corresponding to the time of his analysis in the 1970s and the second to that of its reconceptualisation by Roughton. In a similar way, we can also consider the two analyses of the analyst, the first consisting in his personal analysis that led to psychic change and the second consisting in the assumption of his homosexuality, which made a new reading possible. It was only when he could acknowledge his own homosexuality that he could reconceptualise Ben’s treatment. The very sad outcome for the patient, who died of AIDS in 1993, renders the analyst’s interrogation even more painful and reminds us to what extent the fight in those years for social recognition of gays and lesbians, and for the right to receive medication for AIDS, had been a question of life and death.
Ben was twenty-seven years old when he sought analytic treatment for depression. What imprints its special character on this analysis, and also its richness, is that it unfolds in a particular context where both patient and analyst had conflicts in acknowledging their homosexual desires while they led a married life as heterosexuals. The analyst had already finished his first analysis, which seemed to be a “pseudocure” that had not helped him to elaborate his homosexual desires. Wanting to be rid of his homosexuality, he had begun a second analysis in 1973, two years before Ben started analysis with him. So, Ben’s effort to comprehend his homosexual desires had a particular echo in the analyst, who felt that he could understand him, but also constituted a source of countertransferential difficulties. The patient tried to seek intimacy and love in his relationship with men, but felt rejected because of his strong emotional needs. Thus, the latter were displaced on to anonymous sexual encounters with men, which led to feelings of shame. In 1975, Roughton viewed Ben’s homosexuality as a compensation for his narcissistic deficits. In fact, the patient expressed that mirroring experiences with other men, beyond the possibility of identification, gave him the chance of merging with them and feeling very close emotionally. As progress in analysis was accomplished, Ben acquired a sense of wholeness without necessarily feeling the need to look for anonymous sexual encounters that would provide him with immediate sexual satisfaction. Thus, he began to long for a stable love relationship where he could establish intimacy with a man. In the reconceptualisation of the analytic work twenty-five years later, Roughton arrives at the conclusion that narcissistic deficits can coexist with the necessity to acknowledge one’s own’s homosexual desires and that the second should not be necessarily considered as symptoms of narcissistic wounds. The end of Ben’s analysis allows us to differentiate between the homosexual object choice he made a short time after the termination and his narcissistic deficits, even if, at the beginning of the analytic treatment, the latter occupied a very important place. After the termination of the analysis, Ben divorced and committed himself to a stable relationship with a male companion until his death. Even if Roughton, retrospectively, had the feeling that the decision to end Ben’s analysis had been precipitated by him, he still came to consider that Ben’s object choice was meaningful.

Monique Cournut, in Chapter Five, “The same and the other: homosexuality in adolescence”, refers to Winnicott’s views as a guide
in the study of homosexuality. Winnicott (Rodman, 1987) considers that psychoanalysts, because of their prejudices, have reacted to the femininity in a man by naming it too quickly as homosexuality and have missed the essential question related to identifications: “in fact homosexuality is a secondary matter or less fundamental and rather a nuisance when one is trying to get at man’s woman identification” (p. 155). Giovanna Ambrosio’s approach to homosexuality continues this idea. She also thinks that this term can easily lead to misconceptions. Cournut extends Winnicott’s point of view to women with a strong masculine identification, thus avoiding classifying it too quickly as female homosexuality.

She examines homosexuality in adolescence in a period of time that defies all definition, and approaches it from the perspective of the same and the other. While the same has to do with the identical, the double, the individual's mirror image, the other remits the adolescent to the discovery of the non-self, the stranger. In this sense, the first other of the child is the mother, her body. One of the central questions from birth onwards is how the girl and the boy will elaborate the feminine, constituted by their identification with the maternal and the feminine qualities of the mother. The first relation and the first identification with the object take place in a fusion of sounds, smells, touch, and looks, which give way to primary homosexuality. In other words, the sense of sameness with the mother is experienced through bodily sensations and in narcissistic continuity with her, and has a structuring function for the child. The physical proximity and emotional contact with her provides pleasure, but is also a source of inevitable frustration. Her absence opens the way to auto-eroticism and the creation of fantasies. The early feminine identifications in the boy permit him later to relate to the father as an object of desire and rivalry, whereas in the girl they open the way to experience the father as the other of the mother. The girl's perception of the mother's other makes possible her experiencing her femininity in regard to the father. His gaze recognising the femininity of his daughter is fundamental for its construction.

If we take up the problematic inherent in the same and the other from puberty onwards, we note that friendships of the same sex acquire great importance and are strongly cathexed. In the girl, the narcissistic necessity for sameness includes not only sharing clothes, but also thoughts and emotions. The pubescent boy and girl have a
long path to travel before elaborating sexual difference. Homosexu-
ality practised in adolescence can be a means of escaping from aware-
ness of sexual difference, as well as a flight from feminine identifica-
tions, which are threatening for both sexes. However, homosexuality
can also be a source of satisfaction and happiness, if the adolescent
undertakes psychoanalysis. With this idea, Cournut reminds us that
there is no prototype of normal sexuality.

Juan Eduardo Tesone (Chapter Six), in his discussion of Monique
Cournut’s chapter, focuses on difference and its structural value in the
psyche. He is inspired in this matter by the French anthropologist,
Françoise Héritier, who points out that human societies are faced with
the task of constructing two basic categories, the identical and the
different. In a similar way, the human family is faced with the respon-
sibility of building difference among its members. The emotional
history of the human child originates in a fusional narcissism. The
undifferentiated state that characterises fusional narcissism will give
way to primary identifications, essentially through the mirror function
of the mother. The possibility of the child becoming identical to the
mother sets the foundation of psychic development, but then the
child, each sex in his or her specific way, faces the challenge of sepa-
ration and differentiation from her. The Other is present from the
beginning in the child’s life. By writing in upper case the first letter of
the term “Other”, Tesone clearly refers to Lacan, who distinguishes
between the symbolic “Other” and the imaginary “other”. The
“Other” as a third is the condition necessary to build the different,
whereas the “other” is the domain of alienating identifications. Tesone
playfully points out the curious mathematical formula in psycho-
analysis: in order to become one, the child has, at the beginning, to be
three and then two. In other words, the Other as a third has to ensure
the passage of the child from being the two of the mirror stage, to
differentiation and to becoming one.

Contrary to Lacan, who emphasises the structural and symbolic
value of the father, Braunschweig and Fain (1975) insist on the place of
the father as a libidinal object. From the outset, he is the object of desire
of the mother and this is what creates the void for the child: the percep-
tion that there is an other who is the object of the mother’s desire and
that he or she cannot complement her. In this construction, the hetero-
sexual object exists from the beginning and corresponds to the third.
At this point, Tesone makes an important comment, emphasising that
the Other should not be limited to a heterosexual object. What constitutes the otherness of the object is not anatomical difference, but psychic difference. Tesone refers here to Jacques André, who notes that all difference serves to organise the psychic world. This idea seems important in understanding how the sexual identity of a child whose parent is homosexual is constituted. What counts most in the Other of the mother is its psychic difference, be it homosexual or heterosexual. During adolescence, the Other, in its sexual difference, acquires a traumatic value because it disrupts his or her psyche by an excess of excitation that cannot be elaborated sufficiently. Tesone refers to Paul Denis, who notes that the real opposition in adolescence is between Eros and Anteros. The first represents the oedipal sexuality of the couple, whereas Anteros designates undifferentiated sexual interactions between members of a group. Thus, group sexuality concerns undifferentiated homosexuality, or what we would call homonarcissism.

Ferhan Özenen in Chapter Seven, “The obscure object of desire”, states that vicissitudes of the libidinal development cause additional complex issues when female homosexuality and female heterosexuality are at stake. Two crucial questions arise when we examine the latter. How does the girl detach herself from the primary object and move to the father, when she is so passionately attached to the mother? This is one of the greatest challenges in her libidinal development. The second question is: how would the early tie to the mother be maintained, when her object choice is homosexual? The mother is the first object of attachment, for both the boy and the girl. However, the girl’s relationship to the mother has a specific character. She will have to detach from her in order to move towards the father and this detachment is preceded by the separation from the breast. For the boy, the mother as a narcissistic and oedipal object is maintained, therefore there would be no loss, as is the case of the girl. For the latter, the mother is not only a narcissistic object, but also an erotic object. The girl’s erotic tie to the mother is strongly repressed and the force of repression will have consequences in regard to homosexual as well as heterosexual female development.

Özenen refers to Dianne Elise (2008), who emphasises that the girl’s first passionate attachment is denied by the mother and society, whereas the boy’s desire for the mother is acknowledged by her and the cultural order. We presume that the mother’s denial of her daughter’s attachment has its source in a relation that concerns the identical.
The mother’s psyche would also be the carrier of the traces of her passionate attachment to her own mother, which have succumbed to repression. The identical that concerns the mother–daughter couple, or the couple of two sisters, would be the paradigm, by excellence, of incest, according to Françoise Héritier (2001). Following Judith Butler, Elise affirms that a powerful repression strikes the girl’s desire for the mother, leading to the impossibility of conceiving of it and, thus, of grieving for it. In order to be able to elaborate the loss of the mother, the girl would have to conceive of and represent it first, but can the girl conceive of a relation that is situated in such an early period of life? Freud’s late discovery of “the Minoan–Mycenean civilization” (1931b) had been related by him to an inexorable repression that had covered this period of life with its mantle. The impossibility of grieving the loss would imprint a melancholic aspect on the girl’s early tie to the mother.

Özenen illustrates the tortuous path of female sexual development by examining Virginia Woolf’s (1973) semi-autobiographical novel, Orlando. Orlando is a man until the age of thirty and then one night mysteriously becomes a woman. What is most interesting is the way Woolf defines this sexual change, which brings together “the strength of a man and a woman’s grace” (p. 138). This description would, par excellence be the definition of psychic bisexuality of a woman, which is more marked than in a man, as Freud had stated in 1920a. Woolf’s diaries reveal that Orlando had been written to overcome the irreparable loss of her mother at the age of thirteen. Özenen raises the question of whether Woolf was homosexual, bisexual, or heterosexual, as this could also be posed in regard to the main character of the book. The literature on Woolf points out that she oscillated between the love for the father and the yearning for the mother. Her father had been idealised as a man of letters and had inspired her to be a writer. To a certain extent, Woolf’s story is representative of the vicissitudes of each woman’s libidinal history and of the oscillations between her double love object, the mother and the father, and especially of the impossibility of grieving for her first love.

The clinical chapters

Raquel Cavaleiro, in Chapter Eight, “Inside Sisyphus’s nightmare: destructive narcissism and death instinct”, reveals the difficulties
experienced in the analysis of Joel in terms of transference and countertransference. The patient had come to analysis because he was desperate, lacked interest in life, and felt dead. He thought that he was brought into the world because his parents wished to have a girl as they already had two boys. So, they had a third child, hoping for a girl. Hence, as a child, he perceived not only the lack of desire of his mother in regard to his own existence, but also to his gender. His mother had repeated on many occasions that she had incurred the risk of dying during labour. He translated his mother’s words into the idea that she had made a great sacrifice by bringing him into the world. He was a sad child, and through his non-existence he tried not to be a burden on her. He did not go out to play with other children, thinking that his mother could need him.

His perverse sexuality became a means of protecting himself against depression. When he felt hopeless and rejected by others, his sexuality became more compulsive and promiscuous. During these periods, he made sexual contacts through Internet sites. He wished to have sexual relations that would not involve him emotionally, but then he felt more empty than ever. Thus, he experienced revulsion for himself and feared dying and disintegrating. He questioned his homosexuality because he was not sure if he really liked men. However, he preferred to maintain this election, as he did not know which path to choose. Yet, he expressed that he had never been attracted by women. By saying that to his female analyst, he tried to dismiss any possibility of being attracted to her, especially when his former therapeutic experiences involved male figures.

Martina Burdet (Chapter Nine), in her discussion of Raquel Cavaleiro’s case, addresses Joel’s narcissistic identity disorder, with the intention of grasping his compulsive and perverse sexuality. The concept of narcissistic perversion, as Eiguer (1993) and Racamier (1992) have defined it, assists her in approaching a special type of sexuality intimately related to a narcissistic disorder. The patient’s sexuality concerned pre-genital characteristics of a perverse nature. The object was not significant in its erotic dimension, but in its narcissistic aspect, providing narcissistic satisfaction. In Eiguer’s definition of narcissistic perversion, the individual aspires to veneration, which Joel did. He aimed to be somebody who deserved attention and respect, and tried to obtain it through the humiliation of the other. Racamier contributes to this discussion by drawing our attention to
two main forces that govern narcissistic perversion. First, a narcissistic seduction that ensues from a primary narcissistic seduction, and second, an infantile megalomania resulting from a primary seduction. Owing to the mother’s narcissistic seduction, Joel had the conviction that he was the object of her desire. The infantile megalomania acted, at the same time, as an antidepressive force, that is, as a defence against psychic pain and grief. In this sense, compulsive sexuality acquired the signification of a self-soothing act against grief and psychotic anxiety. Here, the object acquires almost a fetishistic value (Kestemberg, 1978) and is sought addictively to permit discharge.

Burdet arrives at an important conclusion when she writes that if a narcissistic disorder is responsible for undifferentiation from the object, then it is not justifiable to consider sexual choice in terms of heterosexuality or homosexuality. Or, Joel constituted an undifferentiated narcissistic mass with the mother. His homosexuality can be envisaged as a “proto-homosexuality”, or “neo-sexuality” (McDougall, 1989), where the object is not significant in libidinal, but in narcissistic, terms. The analyst has to treat these new forms of sexuality in the light of narcissism and take into consideration new modalities of defence and identifications. The specific identifications to be addressed in this question have also been part of Winnicott’s concern in regard to homosexuality, as emphasised by Cournut in her chapter.

Ester Palerm Mari and Teresa Flores in Chapter Ten, “Homosexuality and the parental figures”, examine the homosexuality of a female patient, inserting it in the history of her object relations. The patient had come to analysis with Ester Palerm because she felt sad and hopeless and feared having a breakdown. She was then aged fifty, and in a critical period of life where issues of ageing and death bring additional difficulties to depression and feelings of despair. Since her childhood, she had felt “forced” to dedicate herself to her parents’ care, especially to her mother’s. The discord that existed between the parental couple and their unhappiness engaged her deeply in the responsibility of taking care of them. Her father used to take refuge in alcohol, while her mother clung to her relationship with her daughter. The parents’ emigration had deprived them of extended family support and led them to grieve for all that they had left behind. This emigration had also been traumatic for the patient, who was three years old at the time. She had been separated from her paternal
grandmother, who seemed to be the unique object who cared deeply for her and could recognise her needs.

A year after having begun analysis, the patient felt “forced” into marriage by her partner. Since her childhood, she seemed to comply with the desire or need of the other. She had to communicate to her parents that she was homosexual and that she would get married to her friend. She dreaded facing it. She was an adolescent when she revealed to them that she was homosexual, but her confession had struck a wall of silence, which was reinforced by her own silence in regard to her sexuality. The double silence became even heavier to bear, as the absence of words in her home was also in society. Lesbians were simply invisible; nobody talked about them. Even if male homosexuals were considered “sissies” and “faggots”, this contemptuous language, in a paradoxical way, made them exist on the social scene. In other words, she did not perceive lesbians’ invisibility in society as an advantage. The patient felt that she did not have any doubt about her homosexuality; she was sure that she liked women. However, the first time she fell in love, with Katy, she was horrified when her feelings were reciprocated and ran away. She could not bear the possibility of fulfilling her own desire by living with Katy. Until her analysis with Ester Palerm, she had had long relationships with female partners in which she used to occupy a passive and submissive position.

Her deepest suffering related to not knowing who she was and what it meant to be a woman. Her incapacity to experience her sexuality was intimately related to the vicissitudes of how to become a woman, which implies separation and differentiation from the mother. Her sexuality, which created shame and guilt, rested on her feelings of worthlessness. She perceived her needs as unacceptable and bad. Since her childhood, she did not dare to desire anything that her mother would not approve of. On the other hand, her mother’s intense jealousy of her own mother-in-law had probably been a message for her daughter. It was a warning against any possibility of competition with her. Could her homosexuality have been a means of avoiding the oedipal object, as well as the torments of incestuous love? This is a question that Ester Palerm and Teresa Flores pose. The homosexual object choice in this case would be a compromise for the girl, tormented between the love for the father and the fear of loss of the mother. The girl would renounce her oedipal rivalry with the mother in order not to lose her, as was also the case of the young homosexual
treated by Freud. What threatens in the background is the shadow of the object, whose irreparable loss results in melancholic grief. We presume that these feelings were present in both Freud’s young homosexual and in Virginia Woolf, but, for the latter, the loss was no longer a threat but real, as her mother had already died.

Ayşe Kurtul in Chapter Eleven, “The two faces of the medallion”, examines her female patient’s psychic world, where the satisfaction that the object provides is split between that of narcissistic needs and that of sexual excitation. A, aged thirty, had had a relationship with her boyfriend for seven years. He provided her with unconditional love, security, and protection, the way a good, reliable parent would. She did not perceive him as a virile man who could arouse desire in her, and, therefore, despised and humiliated him. Their infrequent sexual life was boring and tedious. When her boyfriend was assigned to a position abroad, she thought that she could at last be free to live on her own. However, she quickly found herself engaged with a female photographer who became a substitute for the boyfriend. She clung to her, as she had to her boyfriend. Her girlfriend had the opposite qualities of her boyfriend; she was adventurous and full of excitement, but not reliable. She came to A whenever she broke with her female partner. This situation created great anxiety in the patient, a price that she had to pay to be with her girlfriend. She felt alive in her presence. However, their sexuality was limited to caresses and kisses because A could not tolerate the intensity of excitement aroused in her.

In this sense, the other, whether a woman or a man, played the role of a narcissistic double that complemented her. So, the object could not be apprehended in its difference. In the beginning of the analytic treatment, her identity seemed to oscillate between the feminine and the masculine, depending on the object who came to occupy the privileged complementary place in her life. The fantasy of the primal scene had not played the role of an organiser of sexual and generational difference, contributing to the establishment of feminine and masculine identifications. Under normal conditions, the child has the possibility of identifying with what he or she perceives as the masculine and feminine position of each member of the parental couple in the primal scene. In other words, these positions do not depend on the anatomical sex of the parent, but are fantasised. What, instead, had operated in the patient was a primitive fantasy of undifferentiated parents having sex, which would be equivalent to Melanie Klein's
“fantasy of combined parents”. Her parents’ sexuality was violent and conveyed more of a sense of killing each other, and, therefore, was too dangerous. There was no possibility of protecting herself from an overflowing, wild excitation that invaded her. In this way, the sexual act would be perceived more as a cannibalistic scene, where each one would devour the other in a fusion and confusion of bodies and organs. The primitive scene of undifferentiated parents was threatening because it represented the absence of the barrier of incest.

When A was two months old, her parents sent her away to her grandmother because they could not take care of her, as they had a very busy social life and were too absorbed by their relationship as a couple. Having been sent away in a traumatic way as a baby, she was also returned to her parents’ house in a traumatic way as an adolescent. Thus, the separation from the object in her adolescence repeated the first separation in her early childhood. Her grandmother could not deal with the sexual impulses of her granddaughter. When she came back to her parents’ house, she lived enmeshed in the raw and violent sexuality of the couple and became part of it. Contrary to her traumatic exclusion from her family in her early childhood, she was too much included as an adolescent in her parents’ erotic life.

In her discussion of Ayşe Kurtul’s case, Ingrid Moeslein-Teising (Chapter Twelve) refers to Eva Poluda-Korte’s point of view in regard to the early tie of the daughter with the mother. The early love of the girl for the latter succumbs to repression because of the taboo of homosexuality and is subject to disappointment when she realises that the mother loves not only her, but also the father. Then the love for the mother transforms into hate, opening the way to the father. On the other hand, the taboo of homosexuality allows the love for the mother to be transformed into the wish for a child, with whom primary love can be re-established. In this sense, the disappointed love of the girl for the mother has the consequence of displacing her from the mother to the father, thus making possible the sublimation of the wish to have a child in the form of motherhood.

In A’s case, however, the love for the mother had undergone a traumatic destiny. From a very early age, she realised that the mother loved only the father and that there was no place for her in the couple. She was abandoned by her mother when she was two months old and given to the maternal grandmother. At this point, we would interrogate what had been the mother’s motivation for this behaviour. Had
it been the fear of her own homosexuality in the relation with the baby girl that had led her to such an act, instead of being experienced as a conflict in her psychic world? In other words, was it the identical that had been threatening, remitting her to the early tie with her own mother? In this case, the relation between the grandmother, the mother, and the daughter would be similar to that of the Russian Matryoshka dolls, which fit one into the other and are undifferentiated. Ingrid Moeslein-Teisen underlines this undifferentiation when she indicates that A, as a young baby, had been sent to “the mother of the mother”. In spite of A’s perception of her relation with the grandmother as being warm and happy, it had not contributed to the foundation of the self, or to the constitution of the object. The object had, essentially, the function of a narcissistic double. The grandmother’s acquiescence to A’s sadistic and omnipotent impulses seemed to reveal that the third could not operate in this relation and its absence was reproduced in each generation of the three women.

Göver Kazancıoğlu and Elda Abrevaya, in Chapter Thirteen, “A woman looking for a woman”, examine the homosexuality of an adolescent in a period of life where masculine and feminine identifications are in the process of construction and re-construction. Deniz was an adolescent when she was brought by her parents to the analyst, Göver Kazancıoğlu. They asked her to treat their daughter’s homosexuality. Deniz had told them that she was a lesbian, but they did not want to believe it. The parents had different motives for wishing to treat their daughter’s homosexuality. The father expected his daughter to change so that he could have her back at home, close to him as before. In other words, the sexual choice of his daughter was not a question that troubled him but became a problem to the extent that it separated her from him, whereas for the mother, it was abnormal. According to her, her daughter had to find the right path, which was getting married and having children. In fact, Deniz’s homosexuality did not really correspond to a “choice” in regard to her sexual orientation. She was an adopted child. Her search for a woman was the search for a mother, for the one she had lost at birth, but also for the one she had in her present life and with whom no encounter had been possible. As she expressed it, she felt “forced” to be with women.

It was the father, and not the mother, who had been the primordial object, that is, the object of primary identification. He was very attached to his daughter, as he had also been to his own mother. The
vicissitudes of Deniz's history from birth onwards, included not only having lost the mother who had carried her during pregnancy and had given birth to her, but also being deprived of a primary maternal and feminine identification with her adoptive mother. She described her body image in a very touching way as “half human, half animal”, as if she had been deprived of the care of a human mother who is the only one who can raise her offspring as a human baby. She seemed to imply, in using the words “half human, half animal”, that she was like “a wild child” raised by an animal in the forest. Göver Kazancıoğlu, in a reference to Ong (1969), uses the metaphor of “the forest” to designate Deniz’s solitary search through the wilderness. Her search was for a human mother who could love and care for her and make of her, her child. Thus, the female object was significant, particularly in narcissistic terms. However, the urge to find a woman did not contradict the existence of another tendency in her bisexuality, that is, her love for the father. We can envisage that her homosexual object choice was, at the same time, a way of coping with the incestuous object and avoiding rivalry with the mother.

One of the most moving moments of the psychotherapy is when Deniz finds two objects in the external world, a pinecone and a deer head, that come into her self-representation. We can speak about a paradox here in terms of Winnicott: were they found outside, or were they created internally as a result of the therapeutic progress? The pinecone, because of its particular form and, especially, its capacity to open, was what had most fascinated her. Its opening allowed her to symbolise her psychic opening, but, at the same time, it represented a wholeness. In other words, the opening of the self requires a sense of integration. The atmosphere of the sessions where she evoked these objects was phantasmagoric. Then Deniz found another object, the head of a deer with its horns cut off, in a salesman’s cart in the street. Provoking dread in whoever imagines such a scene in the street, the object had the signification of castration. She had told her analyst that the female deer had no horns. So, she had found an object that served as a mirror for her female body image. These two objects in the external world led to the feasibility of having an internal image of herself, “the porcelain girl”, to whom she referred when she returned from summer vacations. The extreme fragility and vulnerability of the object came to symbolise her emotions during this separation. Then followed the image of herself as a girl in pink pyjamas. Thus, the
construction of the female body image of a human girl had been possible, as a result of the feminine and maternal qualities of the analyst.

**References**


CHAPTER ONE

Gender as heritage of the first qualitative differentiation

Paul Denis

The question of gender is, today, a central topic in many psychoanalytic and psychopathological studies. Stoller (1964), by focusing on the very early organisation of what he called “gender identity”, has profoundly changed our ideas about identity building in girls and boys.

The gender identity nucleus in Stoller’s view

For Stoller (1964), gender identity development—to be masculine or to be feminine—is built on what he calls “gender identity nucleus”. The latter consists of the conviction that his or her sexual assignation is anatomically and eventually psychologically correct and that it is the first step toward the individual’s eventual gender identity. Yet, is it legitimate to speak in terms of “conviction” at such early stages in psychic development? We think that it is more correct to consider such a conviction as the result of the whole developmental process.

Stoller also expresses something curious, that gender identity has nothing to do with any role or object relation. What we understand from this statement is that gender identity is independent of sexual
object choice. It is true, for instance, that a very feminine woman with a clear feminine gender identity can choose a homosexual or heterosexual love object. Nevertheless, this independence is only relative and a very firm gender identity may lead to a specific object choice or to a specific kind of role in the social area. In a sense, Stoller's statement indicates the narcissistic value of gender identity, which is independent from object choice.

In another way, Stoller tells us about the importance of the parents' attitude, their overextended role in their child's perception of his or her own sex. The child is taken into a kind of a narcissistic relationship with his or her parents. They impose on their child the role of a girl or that of a boy, and the child's role responsiveness to it is very strong. However, this influence is not unilateral. Both parents' attitudes can play complementary or contradictory roles in building gender identity. It is important to see that gender identity is a qualitative distinction; anatomical sex is an objective fact, while gender is a subjective one and admits contradictions.

Another point that Stoller affirms as obvious for building gender identity is the fact that the boy lives in a state of fusion with his mother. The same is also true for the girl, and this fusion creates the feeling of a femininity canvas. Therefore, the boy would have inside, in the very core of his gender identity nucleus, a feeling of femaleness, but why should we think that the mother and the female correspond to the same thing in the baby's mind? In addition, why should we consider the mother and child relationship in terms of fusion? The mother is part of the baby's psyche; the father is also part of the baby's psyche, if he is included in the maternal care. Why should the mother be immediately a female in the baby's mind?

The mother is feminine before becoming a female

If we follow Gaddini's (1968) views, the baby's identifications with his or her mother are, in the beginning, mimetic ones. The baby tries to produce in him or herself the effects of the maternal presence, but also those of the paternal presence or those of another person. These are the first partners of the baby's formless primary sexuality. The first vocalisations are imitations of the mother's voice, but this kind of imitation is independent of sex, even if the voice is feminine. Voice has
a gender, but no sex. In the same way, we consider that, as Laplanche (1997) states, enigmatic signifiers which are transmitted by the mother’s behaviour are more linked with gender than sex. For Laplanche, the mother gives her baby, through her way of loving, caring and feeding him or her, messages that carry sexual latent significations. Those messages are not enigmatic for the mother herself but for the baby, who is unknowingly soaked in a gender pattern given by the mother. But the mother is not alone and other gender patterns are assigned by other persons, such as the father.

Gender is, first, qualitative

Gender is essentially qualitative and admits different nuances—gender nuances—for the person him or herself or for others.

It is necessary to distinguish between the two sides in the development of different gender aspects. First, the perception of the other person’s gender from the baby’s point of view, and, second, the perception of the way in which this person lives the masculine/feminine opposition, his or her gender, and the contradictions driven by this opposition.

In the beginning, differences between parents are qualitative. The baby lives a formless sexuality, without differentiation between sexes. It is possible to consider it in terms of primary homosexuality, because, in the baby’s mind, the other’s sex is the same as his or her own. The difference between persons is similar to the difference between hard and soft toys.

During this phase of formless sexuality, undifferentiated in regard to sex, differences between male and female, and especially between mother and father, are only made from qualities: their smells are not the same, they do not take the baby in their arms in the same way, some cheeks are soft, others have beards, and so on. The first distinction between parents is made from qualities, before the recognition of anatomical difference.

However, the sexual anatomical difference is, at first, a small difference: it is only when it is understood as a constitutional difference ruling sexual roles and procreation that there is a Copernican revolution in the child’s mind. The mother is a woman, a female, only after this change, retrospectively, gives another value to the past
relationship. It is the same with the father. It is when this recognition is achieved that the child’s identity will become a proper sexual identity, not only a gender identity.

**Gender and psychic bisexuality**

The formless sexuality comes to differentiation qualitatively at the gender level. The sexual level, the anatomical, is a second one. The two levels, gender and sexual, run in parallel ways. It is not possible to be simultaneously male and female, but it is possible to be feminine in one way, masculine in another. Feminine and masculine are also dependent on social context. Sex is objective, whereas gender is subjective.

The important question here is that the unconscious will not resign itself to its effects, despite the recognition of anatomical differences. Psychic bisexuality elaborated by identifications with both parents continues to be operative, even after the recognition of anatomical differences between them and even after the child’s awareness of his/her anatomical sex.

What Freud describes as the child’s identification with “the father in his own personal prehistory” (1923b, p. 31) and his or her identification with the mother as the first form of link with the object, both refer to gender identifications. These identifications are polymorphic and are not organised as a demanding nucleus imposing sexual identification. We are leaving aside here Stoller’s idea of a “gender identity nucleus” which has been established early. We consider that gender remains bivalent and is the basis of psychic bisexuality. It does not concern a “gender identity nucleus”, but a “gender complex” organised like an ellipse with two focuses, one masculine and the other feminine. Sexual identity will take form on this first background. In this sense, each child builds his or her sexual identity in their own way, mixing the knowledge of anatomical sex and gender complex.

**Divorce between gender and anatomy**

How can we understand the fact that some persons affirm a sexual identity opposed to their anatomical sex, considering a qualitative gender difference as a constitutional one? They give primacy to
qualitative differences in anatomical difference. They might request a surgical sex change. I presume that the idea of a “gender identity nucleus”, powerful enough to induce sexual identity, was transmitted to Stoller by his patients’ conviction that they had a woman’s soul in a man’s body and the feeling that it had always been like that. “My mind is right whereas my anatomy is false.” The conviction in regard to gender negates the reality of sex. This situation is similar to the organisation of a fetish in which the lack of a penis on a woman’s body is negated by cathecting a fetish. To affirm a gender identity contrary to the sexual anatomy is a kind of psychic fetish.

A “gender fixation” of this kind would appear in an early traumatic situation, after a moment of psychic disorganisation. In a psychic situation of abandonment by the mother, the child would identify with her in order to keep her inside him. In the case of one boy, who had developed a cissy-boy syndrome after the birth of a brother, his mother was very eager to have a girl, a fact that facilitated the choice of a gender identity that expelled male identifications. It was an identification with the lost object, as in melancholia.

I proposed some years ago the idea that fixations were organised during a depressive period (Denis, 1992). Gender is a qualitative notion and precedes the recognition of anatomical difference between the sexes. If a subject builds his or her identity based on this qualitative difference and not on the anatomical difference, it is because of an early fixation, the survival of a period where sexuality was formless. The fixation to a gender identity would be organised in an early depressive period, in a struggle against a state of depersonalisation.

The value of this kind of gender-based identity is essentially narcissistic and it is a means to restore an early wounded narcissism.

References


Male homosexuality in analytic treatment

Jacques André

Florent

Florent’s sexual life seems to be a classical example of Freud’s “On the universal tendency to debasement in the sphere of love” (1912d). “Classical”, in the sense that Freud is trying to define a generic pattern of male sexuality: “Where they love they do not desire and where they desire they cannot love” (p. 183). A rather dismal view of men’s sexual life, reduced to a binary opposition: tenderness with one woman versus sensuality with the others. This is the stuff of most novels; an example is Kundera’s Tomas in The Unbearable Lightness of Being:

Making love with a woman and sleeping with a woman are two separate passions, not merely different but opposite. Love does not make itself felt in the desire for copulation (a desire that extends to an infinite number of women) but in the desire for shared sleep (a desire limited to one woman). (1994, p. 24)

Freud is convinced that for the “man of culture”, it is extremely rare, if not impossible, to have the “highest psychical estimation” and experience the “greatest intensity of sensual passion” with one and
the same woman. The common solution is to split that which cannot be joined together. With “my dearest darling wife”, sexual activity “is capricious, easily disturbed, often not properly carried out, and not accompanied by much pleasure” (p. 182)—what a sinister account of marital life! But with the other woman, the “mistress”, “sensuality can be freely expressed, and important sexual capacities and a high degree of pleasure can develop” (p. 183). However, this is at a very high price, that of “psychic debasement”, the only solution allowing the doing away with “refinement in their modes of behaviour in love” (p. 183).

Florent speaks of his partner, and mother of his children, with love and respect, but never with passion. Sex is reduced to minimal frequency, but this does not seem to be a source of conflict. The only exception was when they decided to conceive, at which point each made the necessary effort and, while other couples find it so hard to conceive, they were surprisingly successful, since both times they tried they succeeded.

“A bitch in bed, but not in life.” Florent has a taste for formulaic maxims, and this one guides his sex life. He has mistresses, brief affairs that never last more than a few months, and avoids relationships that could put his married life at risk. With these encounters, he can let loose his dominant fantasy: “They’re all bitches asking for it.” The words, the positions, are an enactment of “debasement”.

So far, nothing very original: the classical division between tenderness and sensuality, a clear separation between the two faces of the first love object, the mother and the whore. Had Florent lived in Freud’s time, his sexual life would probably have followed this well-trodden path. Since then, however, the sexual lives of adults have undergone deep transformations. Sex used to be one of the most private things in the world; today, it has “gone public”, owing to what has been called the “sexual liberation” or “revolution”. Although the first signs began to appear in the 1920s, this “liberation” gained full speed in the 1960s. Both sexes were concerned, of course, but, first and foremost, it affected women. In all times and cultures, whether repressive or not, men’s sexual freedom had been inversely proportional to the control imposed on women: on the one hand, frigid conjugal order, and, on the other, the sensuous heat of the whorehouse. But times have changed, and, as a result of contraception, “woman” is no longer synonymous with “mother”, and sexual desire no longer tied to having children.
Perhaps a sign of these new times is that the taboo of lost virginity has become relatively obsolete in recent decades. More so today, with globalisation, the trends of the Western world have reached even the strictest cultures, those of the Maghreb, for example, where the conflict between the growing freedom of women and the weight of tradition has produced a new medical speciality: hymen repair, to preserve the “innocence” of the bride on the wedding night.

However, the sexual “revolution” did not only free the woman in women, but in men as well. The most recent wave of emancipation has to do with the sexual choice, the freedom to desire the other or the same (homos) sex. In this instance as well, society has changed fast: today, in Madrid, where not so long ago the pro-Franco and Catholic order reigned, Opus Dei style, gays and lesbians passionately kiss at the Puerta del Sol.

The new status of homosexuality has made it possible for Florent to play out the bisexual variant of his main fantasy. “I am accustoming myself”, wrote Freud to Fliess in a letter dated 1 August 1899, “to regarding every sexual act as a process in which four individuals are involved” (Masson, 1985, p. 364). Of course, the infantile roots of bisexuality are still there, but Freud was speaking of identifications, and not of a sexual encounter involving two couples in real life. Today, playing out this fantasy is almost banal. Florent can, thus, switch from being the man who debases to being the woman who is debased. He regularly visits a male prostitute who mistreats, insults, and sodomises him, inflicting upon him what he inflicts on his mistresses. Yet, these two activities are not exactly equivalent for Florent. Indeed, he shares stories about his affairs and female conquests with his pals, but the psychoanalyst is the only one to know about his life as a “debased woman”. An indication of how difficult these visits are for him is that he has to drink before going. The idea of a “homosexual relationship” is perfectly incongruous for Florent, as is the sight of two men kissing. This is surprising, as he is a successful playwright and his plays are full of kinky jokes involving “buggerers”; the central character of his plays is a mature man whose underlying fantasy is almost transparently visible, a sort of combination of “a child is being beaten” (that is, loved and penetrated), and “a woman is being debased”, in both cases by a powerful and libidinal father.

Florent often speaks of his sexual life during the sessions. He is perfectly satisfied with things as they are and does not expect analysis to
change any of it. What he wants is something else. His plays always get a full house, he earns a lot of money, and his main fear is an empty theatre. This is a primitive anxiety, a sense of being close to the void; this fear is what brought him to analysis. Indeed, his sexual activities are good for him, he feels; they fill the emptiness.

* * *

Although words are not things, what words represent does have an impact on things. The word “homosexuality” was coined at the end of the nineteenth century. Before then, one spoke of “sodomites” or “inverts”, but mostly there were insults. As Foucault (1980) wrote,

We must not forget that the psychological, psychiatric, medical category of homosexuality was constituted from the moment it was characterised—Westphal’s famous article of 1870 on “contrary sexual sensations” can stand as its date of birth—less by a type of sexual relations than by a certain quality of sexual sensibility, a certain way of inverting the masculine and the feminine in oneself. Homosexuality appeared as one of the forms of sexuality when it was transposed from the practice of sodomy onto a kind of interior androgyny, a hermaphrodism of the soul. The sodomite had been a temporary aberration; the homosexual was now a species. (p. 42)

A species to which one patient, Daniel, claims to belong: “I’m not a man, I’m not a woman, I’m gay.”

In his work, and, in particular, as concerns this very personal issue, Foucault hovers between political criticism and analysis, thus lending some confusion to his conclusions. Even if “homosexuality” has become an object of scientific enquiry, bearing a scientific-sounding name, it still falls under social control, it still remains an object of disapproval and marginalisation. Perhaps the shift from the biblical (Sodom) to the scientific realm is the first historical step in a long evolution, in which the legalisation of same-sex marriage is the most recent, if not the last, development. Nineteenth century science is not alone in showing interest in homosexuality; literature also reflects this shift: even before Wilde’s Dorian Gray and Proust’s Baron Charlus, Balzac gave a famous literary depiction of homosexuality with his flamboyant character, Vautrin. Oscar Wilde’s trial in 1895 can be understood in a number of ways. The writer spent many years in prison and died shortly after he was freed, but his plea in favour of
“the love that dare not speak its name” was met with applause, and became a historical milestone.

In the western world, the historical period from the nineteenth century onwards sheds special light on the representations of sexuality between men; however, it is only part of a long story. To speak of “homosexuality” (for instance, when speaking of Ancient Greece or Rome) before the end of the nineteenth century is an anachronism and an error. Pascal Quignard (1994) writes,

The Greeks and the Romans did not distinguish between homosexuality and heterosexuality. They made a distinction between activity and passivity. They opposed the phallos (the fascinus) to all the orifices (the sprintias). Greek pederasty was a social initiation ritual. (p. 20)

Through ritual pedication (pedicare means penetrating the anus; one cannot speak of “sodomy” in Ancient Greece) of the pais (the young boy), the adult transmitted virility to the child through his sperm. The Greek verb describing this act, eispein, gave the Latin “inspirare”. “The loved one submits to the inspirator, the older citizen, and receives in exchange the ability to hunt, and culture, which come together in war” (Quignard, p. 20).

It would be a gross error to conclude that “homosexual freedom” existed in Ancient Greece or Rome. If a freeman penetrated the mouth (irrumare) or anus of a slave, social morality had no problem with that. But if he was the one sucking (fellare) or being penetrated by another man, such passive behaviour was considered abominable. Hadrian using his slave, Antinous, for sexual purposes was in the order of things, but his falling in love with him shook the Empire. Sexuality and love among men (but also among men and women) are governed by the boundaries between what is permitted and what is prohibited, and this is true in every society, every culture. Among the Baruya (New Guinea) studied by Maurice Godelier (2007, p. 175), “homosexuality” is limited to the world of boys and adolescents, and to the act of fellatio: the older boy (who has not yet known a woman) gives his sperm (first of all substances, the life principle) to the younger one to drink. If a boy refuses to swallow the semen, he risks death. This practice is part of the social construction of relations of power. It is a social constraint and only secondarily refers to sexual pleasure.

One last example is the Guayakis (Indians of Paraguay), described by Pierre Clastres (1972). Here, we have a radical distinction between
the world of men and that of women: men go hunting while women go picking. Men carry bows (a woman is not allowed to touch one), women carry baskets. This is true of all the members of the group, except one... His hair is long like a woman's, he carries a basket and cannot touch a bow, he lives with a man as a co-wife. This mixture of exclusion and tolerance (through a reversal of signs) can be found in other groups: for a long time, the *makomè* (ma-commère), the homosexual figures of Caribbean societies, were objects of hatred, both despised and, to a certain extent, accepted on condition that they showed a parody of femininity and wore a feather boa and high heels. The “queer” persona represents a similar compromise. In the context of today’s very wide range of different homosexual behaviours, we can see how the “queer” figure was more an imposed than a chosen persona.

This historical and cultural digression aims to show that representations of homosexuality have considerably changed in recent years. Even the most macho locker-room atmosphere is no longer what it used to be. Gareth Thomas, the glorious captain of the Welsh rugby team, was able to reveal to his family and team-members that he was gay without endangering the scrum. However, things are not that simple: laws might have changed, but insults remain either in fact or in spirit, and the unconscious sources of hatred are unaware that the world is no longer the same. “Coming out” is no longer expected. “No one is expected to declare they are straight, why should I have to tell the whole world that I am gay?”

The psychoanalytic approach reflects these profound changes, both in practice and in theory. Indeed, psychoanalysis is deeply anchored in this double movement: timelessness on the one hand, and social and historical variations on the other. The timelessness of individual psychic processes does not mean that nothing ever changes, but that all sexual “choices” are deeply rooted in early loves and hates. Children, as we see them now, are also subject to the historical evolution of representations; they are very different today from what they were several decades ago. Yet, even today, “His Majesty the Child” is subject to this internal “other”, the unconscious, which governs his needs and fears.

Gender studies have shown how gender (male/female) is the product of assignation rather than “nature”. However, the ideological extension of this idea is debatable: if assignation is no more than a
question of discourse, then another discourse is always possible and
gender can be created; like the festive drag queen, one can change
genders, if not sex—although that is precisely what transsexuals try to do by becoming the “woman” they are. The unconscious criticised by
gender studies is cultural and language-bound; conversely, the uncon-
scious of the psychoanalyst, with its infantile sexuality and the corre-
sponding early determination of sexual “choice”, is regarded as politi-
cally incorrect and generally ignored by gender studies.

The main contribution of psychoanalysis to this question is to
propose a psychogenesis of homosexuality. Or, rather, a multiple
psychogenesis, for two reasons: because homosexual “choice” is the
result of different psychic histories, and because, for a single individ-
ual, psychic determination generally combines different sources. The
love of a man for a man is rarely the product of what would seem to
be the simplest route, that is, the love of the father, or the brother, but
it is the case when the love object is a woman, through identification
with the loving–loved father.

The use of the word “homosexuality” has become widespread, and
psychoanalysis has, regrettably, joined the club. With the prefix
“homos”, which means “the same” (sex), an essential element is left
out: the presence, one might say in some cases the overwhelming
presence, of the “other” sex. The anatomy of the partners is a mani-
fest given, but it says very little about psychic reality.

It is impossible to give an exhaustive picture of the different
psychogeneses of male homosexuality. In the same way as with
male–female relationships, clinical experience enables us to construct
a few repetitive patterns; none the less, our certainties are constantly
shaken by the surprise of a new construction. Here are a few exam-
pies of such constructions.

The “simplest” is the result of identification. The parents (mother
or father or both) want a girl. When a boy is born, they are disappoin-
ted. The psychic solutions to this disappointment are various
and linked to the depth of the unconscious roots of this wish. Some-
times, the force of the unconscious wish is such that, despite conscious
recognition, it does not accept reality: “It’s a girl.” The child is identi-
ified by the adult’s unconscious even before he has been able to start
building his own identifications. In this case, the adult’s identifica-
tion of the child will supersede anatomic reality, even if this “vicissi-
tude” does leave room for plasticity in the person’s life. This form of
“homosexuality” (but “femininity” would be more exact here) can be observed in some children, in their attitudes, their games, etc. Some more secondary identifications, for example, with the sister, because she is her father’s chosen love object, can also play a part in this psychic construction.

For this “girl”, a frequent outcome will be to love men. For Laurent, the sight of a young opposite-sex couple passionately kissing in the street is an immediate source of arousal. He is the girl who feels the boy’s hard penis pressed against her. One of his frequent fantasies is a rape fantasy (he is the one being raped), a gang of thugs falling on top of him and abusing him forever. He has become a sort of specialist of all the representations of the martyrdom of Saint Sebastian. He “doubly” likes Sodoma’s version (Uffizi, Florence), and very much admires the one by Mantegna (Vienna), but his favourite version is Guido Reni’s (Capitol Museum, Rome), because Saint Sebastian looks so much like a “girl”.

Sometimes, more mysteriously, the “girl” likes other “girls” . . . The discrepancy between psyche and anatomy is such that sexuality between men can be closer to female homosexuality (an eroticism based on tenderness and surface rather than penetration). Maybe this is what is at play in Marcel Proust’s (1966) description of Albertine’s nakedness:

Her two little upstanding breasts were so round that they seemed not so much to be an integral part of her body as to have ripened there like fruit; and her belly (concealing the place where a man’s is marred as though by an iron clamp left sticking in a statue that has been taken down from its niche) was closed, at the junction of her thighs, by two valves of a curve as hushed, as reposeful, as cloistral as that of the horizon after the sun has set. (p. 74)

The opposite image of this femininity of men is the hyper-virility cultivated by some homosexuals. Castro, the gay neighbourhood of San Francisco, with its groups of close-cropped, mustachioed men showing off their muscles and Harley Davidsons provides a striking picture of this way of being. One does not have to be a psychoanalyst to perceive the underlying homosexuality of these very macho male groups, from the army to the cantina (Latin-American bars frequented only by men), to the rugby team. One of the surest signs is precisely, and paradoxically, their hatred of homosexuals, a central target of
insults, or other violent forms of hazing reminiscent of Spartan initiation rites. So much hate can only be a way of keeping at a distance what might be so very threatening. The Vichy regime and its fascist cult of virility re-established the crime of sodomy, which had been abolished by the French revolution. In his film *The Damned* (1969), Visconti shows the SA¹ being put to death by Hitler as a homosexual orgy during which they are massacred. Visconti had the intuition that unconscious fantasies were dangerous, that freeing the drives could lead to the destruction of the group. The group can only survive through repression and denial of its deepest bonds.

Sade (1965) rightly pointed out that things were once different: “Plutarch speaks with enthusiasm of the battalion of lovers: for many a year they alone defended Greece’s freedom. The vice (sodomy) reigned amongst comrades-in-arms, and cemented their unity” (p. 327). Are we witnessing the return of Achilles and Patroclus? The most recent victory of American gay soldiers is the right to march in the Gay Pride march in uniform.

So, what is the psychogenesis of this kind of homosexuality? This man, quite obsessed with his erections, is not likely to consult a psychoanalyst. However, we can probably say without much risk that all the demonstrations of virility, phallic narcissism, the mutual and immediate presentation of penises during sexual encounters are the sign of the strong presence of “horror feminae”, a horror of the feminine, the equation between feminine and castrated. Indeed, most homosexuals express disgust for the female sexual organ. In the words of a patient, Arnaud: “The vagina? A bottomless pit, a red, sticky, open hole no dick can ever fill”. It is not enough to mention castration, or castration anxiety. Behind this castrated organ, there is an abyss of unknown, a very dark continent, a sea of darkness, which makes every man a child forever. Once, Arnaud had sexual intercourse with a woman, and swore he would never do it again. After it was “done”, he had run to the bathroom to scrub his penis with black soap so hard that he almost scrubbed the skin off.

Freud is the first to have suggested a psychogenesis of homosexuality, not homosexuality in general but more specifically pederasty, that is, when the object of love is a young man/boy. It is a complex development based on mirroring and identification. It begins with a mother–son couple, a sensuous and seductive mother, a mother who can never be replaced. *The one and only* woman, forever. The later
object choice is a mirror image of this couple, narcissism playing an essential role: a man loves a young boy (the fantasy image of one's previous self) just as he was loved by his mother.

The word “homosexuality”, with its emphasis on “homos”, the same, unwittingly underscores the importance of narcissism. “It’s incredible how we look alike”, says Edward, speaking of his partner. Not only do they have the same “look”, they are similar even in the smallest details, such as having the same bald spots, wearing similar glasses, same skin colour, same way of dressing, not to mention their tastes, from sashimis to Kathleen Ferrier. Edward and his double will grow old together; they have already begun to do so. They live a life without real conflict, with a minimal amount of sex (at least together); very often, in these configurations, the classical split reappears, between a no-nonsense conjugal life on one hand and one-night stands on the other. Many homosexual couples last much longer than opposite-sex couples. Narcissistic libido can “go on forever” in a way that object libido cannot.

With regard to the other side of the picture, not psychogenesis and infantile origins, but psychoanalytic practice, there have been obvious changes. Freud lived in a time when homosexuals were hated and despised. Today, even if this hatred is disapproved of, it has not disappeared, and not because of “homos-phobos”, fear of the same, unless one perceives that it is one’s own unconscious homosexuality (fear of being the same) that triggers the hostility.

Times have changed, and one sign among others is that teenage boys and girls can freely express homosexual love without causing outrage among their schoolmates. Psychoanalysts listen to patients talking about sex lives that were unliveable not so long ago. Psychic bisexuality is the most commonly shared thing in the world; it is the direct result of cross identifications, tied to the primal scene fantasy and the double configuration of Oedipus complex (love–hate for opposite/same sex parent). For a woman, to enjoy a brief sexual encounter with another woman is nothing new. Two women can easily share a bathroom, and women have always had an easier access to their homosexuality than men. Men’s difficulty with homosexuality is probably tied to their attachment to the patriarchal model, their defence of male domination, but there are other, deeper reasons, in particular penetration, or intrusion, anxiety. Yet, these reasons, however strong, are now giving way. Today, even if he is not homosexual
in the sense of an unconsciously determined choice, a man can give free rein to his bisexuality for a night. Like Florent.

There was a time when psychoanalysts believed that a “real analysis” had to reach unconscious homosexuality, with the belief that this is what is truly repressed. However, some analysands seem to express the reverse: that sexual relations between men is easy, a-conflictual, while a relationship with a woman is charged with excess, with the weight of anxiety, and involves sexual risk. It is much easier to passively be a man’s “woman” than to have to meet a woman’s insatiable demands.

Mark

Mark is a young man under thirty, and he is impressed by how fast he can switch positions: in the morning he can masturbate over a homosexual picture, and in the evening have fully satisfying intercourse with a woman. Today’s world, with its gay bars, gives him the opportunity to experience his femininity. His pleasure is twofold: looking at his partner’s erect penis and being sodomised. Just as for Florent, this is no more than a “hook-up”; it is not a relationship. He perceives the element of love in his male friendships, but one should not mix everything up.

Mark expects analysis to help him out of this indecision, which he finds psychically exhausting. He would like analysis to help him conquer a male and virile position. Although in times other than today, such a wish could have been construed as serving social convention, for Mark it represents something else, a psychic battle for the ability to turn towards the world and the object, in other words, being able to take a risk and swim in deep waters. Mark’s situation is an example of how homosexuality can become a position of withdrawal, shielding from depression.

This can also be said for female homosexuality: Lea is bisexual, men and women have an almost equal place in her love life. However, now that she is past thirty, she seems to prefer women. Among her motivations, there is one certainty—and a source of anxiety: with a man, she will inevitably be abandoned the day he is attracted to a younger woman and decides to leave her. Homosexual choice offers a narcissistic security which heterosexual choice does not.
Mark shows quite clearly the link between the homosexual position and separation, or abandonment, anxieties. More than just being “the girl”, what he wants from the sexual act is passivity. The passivity of the first child for whom being cared for and being loved are one and the same, and are condensed in “being penetrated”. Conversely, anything requiring courage, facing the unknown, professionally or in relationships, or even when taking a trip, all these moments are tied to the idea of virility and, as such, trigger anxiety: the fear of not being able to face the situation, of being lost, of being a disappointment to . . . the world and to women.

When he masturbates, he almost always calls up a “homosexual” fantasy. Wish fulfilment is part of it, of course, but mainly, it seems, narcissistic gratification. On the one hand, masturbation satisfies the drives, on the other, it reassures the helpless child. A few times, when he was far from home, alone in a world he experienced as hostile, the union of libidinal satisfaction and narcissistic regression had led him to perform fellatio on himself. Such an act—a physical feat—presents the spherical image of narcissistic completeness: to be both the mother’s breast and the child’s mouth. The thumb-sucking child is also on this regressive path, back to paradise lost, back to the time before separation between mother and child, before the separation between the sexes.

At one moment in the transference, we were able to develop together a construction of this sexual complexity, based on four levels:

— on the first level, the most regressive, closest to the state of helplessness: self-fellatio. This circle reproduces the closure of the mother’s womb and brings together, as closely as possible, sperm with milk.
— on the second level (I quote here Mark’s words, in all their crudeness), passivity: I am a girl who is being anal-ly fucked.
— on the third level, a switch to the active form and the conquest of the object: I am anal-ly fucking . . . a woman (“anal-ly fucking a man” does not appear in Mark’s fantasy world).
— on the fourth level: I am genitally penetrating a woman: by far the most dangerous, difficult, and anxiety-filled enterprise.
A few concluding remarks

How can we distinguish between what is due to social repression in a given culture at a given period in time, and what can be ascribed, in a deeper way, to psychic repression? Establishing such a distinction does not mean opposing them in a binary fashion, since both dimensions can easily be combined. Psychoanalysis has often been criticised for underscoring the a-temporal nature of unconscious processes, but psychoanalysis is far from indifferent to the influence of society and its changes: the unconscious deals with historical context in the same way as dreams refer to the previous day: with this material, the unconscious constructs its own reality, but psychic reality is never the bare reflection of the surrounding world. Psychoanalysis must beware of two opposing tendencies, one which would be to consider the unconscious as transcending all social change, the other to consider psychic reality as a simple reflection of one’s environment. On the one hand, an abstract universalism denying cultural difference and historical change, on the other hand, scattered empiricism, unable to grasp permanence.

Given the liberation of homosexual behaviours and the accompanying changes in what patients say on the couch, psychoanalysts can no longer assert that the femininity of men, their passivity, is the essence of what is repressed. Actually, the very idea that there could be such an “essence” of what is repressed is objectionable, since what is repressed, what is for each person absolutely unacceptable, is specific to each person’s life story.

It is unfortunate that the word “homosexuality” has become the accepted term, since it emphasises the notion of “same” sex, that is, manifest reality, erasing psychic complexity. A single word can cover many different psychosexual realities. There is no prototype of homosexuality, be it masculine or feminine.

Note

1. SA: Sections of assault (Sturmabteilung). This was the paramilitary organisation of the Nazi party, created by Hitler in 1921 and directed by Rohm. The rivalry with the latter led Hitler to eliminate the principal leaders of the SA in the Night of the Long Knives, 1933.
References

I should like to thank Jacques André for the many stimulating points that he has put forward; it was very interesting and constructive for me to compare the differences in the way Jacques and I deal with the main issues. Although I fully agree with his final remark when he states, “There is no prototype of homosexuality, be it masculine or feminine”, I think that homosexuality has become a kind of “umbrella word” under which we find a variety of different psychopathologies. Very often patients—men as well as women—come to us and the first thing they do is announce their homosexuality as though presenting us with a visiting card that will guarantee them a pseudo-identity. Others come asking for help about contingent problems, loudly proclaiming their homosexuality as the healthy and resolved part, almost as though it were a narcissistic support or a phallic prolongation. Certainly, my clinical experience has helped me to understand so far that, in most cases, declared homosexuality seems to have little to do with sex and desire but, rather, with defence organisations and areas of confusion at different levels. My comments will privilege psychic aspects and I shall leave aside sociocultural, legal, or political considerations.
To enter into the heart of my discussion, I shall mention some points of contrast stimulated in reading Jacques André’s chapter and his clinical vignettes. While reading the interesting excerpts about Florent, Laurent, and Mark (I was sorry not to know more about them) as examples of male homosexuality, I told myself that I was using this expression in a purely descriptive manner. In fact, although the vignettes were very brief and, as far as I could understand, not completely contextualised in the here-and-now of the analytic dialogue, I often thought more in terms of undifferentiated confusion and primitive aggressiveness rather than of homosexuality, and patients still a long way from being able to integrate sensuality with sexuality, or tender exciting contact with drive vicissitudes.

Sensuality and sexuality

Regarding this point, I am fully in agreement with Jacques André in believing that the starting point is what Freud wrote in 1912d about the two areas of masculine love. However, in focusing on the duality between tenderness and sensuality, Jacques André, following Freud, uses the term “sensuality” in the same way that I use “sexuality”. This is not an irrelevant detail.

Freud used the terms “sexual” and “sensual” as synonyms, but today, in the light of our acquisition of better instruments of psychoanalytic investigation, we can distinguish between these two components in order to deepen our knowledge about love—both masculine and feminine—and its vicissitudes. From my point of view, sensuality has to do with the sensorial, therefore with tenderness, warmth, and contact of archaic quality. Sexuality, on the other hand, is a term that suggests drives.

In line with the thinking of Winnicott (1988), Gaddini (1969), and, more recently, of Jacqueline Amati Mehler (1992), I think it is fundamental to distinguish between these two concepts. Sensuality is connected with pleasure provided by sense organs. In this way, we could say that sensuality in the form of tender and exciting contact belongs to the area of needs. It represents a guarantee of the survival of the self—therefore of “being”. Sexuality, which, in its more mature, genital expressions includes sensuality as the earliest phase of “affection”, concerns the area of object relations, of desire, an area that is
exquisitely drive-orientated and that requires a quota of healthy aggressiveness, and is, therefore, conflictual.

**Masculine and feminine**

What does it mean in these vignettes to think in terms of masculine and feminine gender? How do we use these categories? For example, Jacques André writes, “the sexual ‘revolution’ did not only free the woman in women, but in men as well”, as though he were suggesting an automatism between male homosexuality and feminine identity. Yet, are we sure that male homosexuality has to do with feminine identification? Often, our clinical work shows us that the homosexual “solution” adopted by men is intended precisely to defend a masculine identity, sometimes as a defence against a symbiotising maternal intrusion. To what are we referring when we say this: to primary identifications, or to imitative areas, or to secondary identifications?

The complex vicissitudes of identity formation, in their turn, refer back to a densely packed concept—a kind of a Russian doll—that contains other concepts: incorporation, imitation, projective identification, adhesive identification, primary identification, introjection, secondary identification. At what level of organisation of his psychic structure did Florent identify himself “with the feminine”? How possible is it for him to distinguish between self and not-self, between masculine and feminine? Could it not be a case of a regressive undifferentiated state rather than of an identification?

At the clinical level, perhaps it would be better in these cases to avoid using terms linked to sexual identity, and to limit ourselves to listening to and recognising the psychic area that is being activated at that precise transferential moment of that particular phase of the process. I believe that identifying oneself with the aspects, parts, or functions of another person does not necessarily imply the fact of assuming their sexual gender, and I agree with Simona Argentieri (1982) when she indicates that this automatism is a risky “intellectual shortcut”.

What is Florent referring to when he represents himself as a violent and degrading male and a passive and degraded female? Are we sure that he is representing something that has to do with sexual
identity; are we not running the risk of attributing a phallic–genital value to predifferentiated sexual symbols (Gaddini, 1969)?

In the case of masculine and feminine, why do we automatically think of the masculine as an intrusive and violently active quality and the feminine, in contrast, as a passive, warmly inviting, and containing quality? Are we thinking in biological terms: an overhanging, penetrating image on the one hand, and, on the other hand, an image that is concave, inviting, and warm? Perhaps by thinking in these terms we run the risk of reinforcing a defensive pathological splitting that, as Argentieri writes, at a conscious level concerns the mother and the father, the female sex and the male sex, while, at an unconscious level, corresponds to defensive splitting rather than to authentic differentiations regarding anxieties and conflicts.

Certainly, it is true that we must not overlook the importance that one’s own anatomical shape can have in mental representation and in fantasies; however, this consideration does not lead us to concur with the assumption that anatomy is a destiny. Fenichel, in his *Psychoanalytic Theory of Neurosis* (1945), wrote that what is defined as male and female depends more on social or cultural factors than on biological factors, because, without doubt, impulses with active aims and passive impulses are present in both the sexes.

As far as sexuality in general is concerned and feminine sexuality in particular, I think that today, thanks also to COWAP and its initiatives in the last fifteen years, we now have at our disposal a much wider range of studies that have re-examined the complex development processes of how women’s gender and sexual identity are constituted, and have re-signified, within the relational dimension, all the classical parameters of the “masculine”. A review of the relevant international literature would take too long, so I will only mention, among others, Chasseguet-Smirgel, McDougall, Pines, Argentieri, Alizade, and Welldon.

Many studies have attempted to rescue the feminine image from the Freudian triad of “masochism, passivity, narcissism” (to which weakness of the superego has often been added), restoring it to its libidinal–aggressive instinctuality and its responsible subjectivity; in the same way, they have tried to liberate the masculine image from that of mere aggressive instinctuality.

Again, we read, “The new status of homosexuality has made it possible for Florent to play out the bisexual”. On many occasions I
have expressed my perplexity regarding the concept of bisexuality—so fundamental for many of our colleagues. I think it is an ambiguous concept in psychoanalysis and I am led to think more in terms of undifferentiation. As far as Florent is concerned, I wonder whether suggesting this concept would not lead to the avoidance of a difficult complexity. The risk is that of confusing the different levels of development, thus denying to the mental structure its conformation of layered archipelago with vertical, horizontal, and diagonal corridors (like an Escher landscape) in which there are areas that are more or less blocked even at very early levels, completely undifferentiated, still far from any kind of sexual connotation. In 1933, Freud wrote, “We, on the other hand, standing on the ground of bisexuality, had no difficulty in avoiding impoliteness” (1933a, p. 116).

In the case of Florent (and I agree with Jacques André on this point), the central aspect seems to be “his main fear” of an empty theatre: an anxiety of emptiness (of introjection, of identity), a desolate internal theatre that he angrily tries to fill with sexual activities (they fill the emptiness), perhaps in order not to lose himself. A nineteen-year-old “homosexual”, during a very difficult phase of psychotherapy in which he began to doubt his “certainty about his identity”, said to me, “Help: I feel empty, I have a black hole, I am disoriented; before, I seemed to have a certainty, now I’m terrified, it’s as if I did not exist.”

So, despite appearances, rather than a choice, homosexuality seems to be more a defensive move which is easier to make today than in the past.

Similarly, the case of Mark and his way of moving rapidly from masculine to feminine makes me think of an attempt to defend himself from the narcissistic insult of not being “everything”—male and female—behind which, in some cases, we can find the most terrible insult of all: that of being mortal (Zucconi, 2004).

In brief, when we are speaking of homosexuality, as when we are speaking about male and/or female sexuality, the focal point remains how the oedipal and pre-oedipal levels interact with each other; how does the meeting between Narcissus and Oedipus occur? Which are the fundamental vicissitudes of aggressiveness in their encounter—at different levels—with the libido? How have the first defence organisations been articulated regarding archaic anxieties of integration–non-integration, of loss of self, and of annihilation? It is important to
consider how successive stages of growth have been conditioned by what happened before but, also, through a “retroactive re-signification”, how the “after” reorganises and reconstitutes the meaning of “before”.

To conclude my brief reflections, I should like to use the example of Visconti’s orgy suggested by Jacques André. I think it represents very well the generic and merely descriptive valence of the term “homosexual”. That orgy, in fact, is a symbol of the extreme sadistic perversion of the moral degeneration of the Nazi régime—an excellent representation full of violence, promiscuity, body parts as partial objects, which forms the main element. The fact that the participants are of the same sex is—in my view—absolutely secondary.

I thank Jacques André very much for his stimulating chapter, and hope that I have suggested some questions as a starting point for discussion.

References

The interplay of social change and psychoanalytic understanding is demonstrated by how we have dealt with homosexuality, more than by any other issue—more, even, than female psychology. For example, Freud was a leading voice against the repressive forces of his day, in particular against laws that criminalised homosexual behaviour (1930). In a newspaper interview in 1903, he stated categorically, “Homosexual persons are not sick.” By the 1980s, however, the American Psychoanalytic Association had become the most conservative and tradition-bound of the mental health organisations, our theories and our attitudes reflecting the thinking of decades past. Social change had left us far behind.

Consider, for example, the early homophile organisations, the Stonewall uprising that catalysed the modern gay rights movement, the growing acceptance of gay men and lesbians in mainstream culture in the 1980s, the formation of a cohesive gay community to fight the AIDS crisis, and the rise in academia of gay and lesbian studies. Nothing in our professional literature or in any discussions at our national meetings would indicate an awareness of this social upheaval as a progressive current.
In the bitter 1973 fight over removing homosexuality from the American Psychiatric Association’s list of diagnosable disorders, the American Psychoanalytic Association took no official position. Nevertheless, a petition signed by many of our members, and a letter from our president urging the APA leadership to postpone any decision, left little doubt that “the psychoanalysts” opposed this change (Bayer, 1987).

Was it rigid adherence to our theories of neutrality and psychic reality, designed to prevent our clinical work from being too easily swayed by external reality, that kept us uninvolved and ignorant of social change? Were we too self-important to think we might learn something from the larger world of ideas and social movements, as well as from colleagues in other clinical disciplines? Or was there an underlying anti-homosexual bias that blinded us to new understandings of the lives of gay men and lesbians?

We like to think that our advances arise, not from political or social pressure, but from better explanations and solutions to clinical problems. In other words, change comes slowly from inside. In the case of homosexuality, however, I believe it is the other way around. It has not been scientific discoveries but breath-taking social changes in popular culture, in courtroom decisions, in public policies, and even in religious organisations, that have goaded us into rethinking homosexuality and have inevitably evicted psychoanalysis from its heterosexist closet.

I do not mean to imply that unscientific or inappropriate changes were forced upon us by politics and society. Rather, psychoanalysis had so isolated itself from other scientific and clinical disciplines, and had so girded itself in the mantle of pure analytic process as the source of all knowledge and wisdom, that it took some rather dramatic changes to wake us up. It became apparent that we had lost the place of leadership in the world of ideas that psychoanalysis once enjoyed.

In 1993, when the national organisations of all other mental health professions (psychiatrists, psychologists, social workers, and others) formed a coalition to support President Clinton’s initiative to allow gay men and lesbians to serve openly in the military forces, this group did not even ask the American Psychoanalytic Association if we would like to join them. They apparently either assumed that we would decline or, more likely, simply did not think of us at all. We had become irrelevant.
Not only were our ideas considered bankrupt, our clinical services were widely considered harmful to gay men and lesbians. Even analysts who were otherwise friendly and supportive of gay colleagues advised them not to seek treatment with psychoanalysts. In the audience of a gay-themed play on Broadway in the early 1990s, just the mention in the dialogue of someone going to a psychoanalyst evoked loud hoots and jeers from the audience.

Of course, not all psychoanalysts were so blind and misguided. A few joined the debate with newer thinking, and many quietly went about their clinical work, respecting their gay patients’ autonomy. But, as a profession, we allowed the most biased thinkers among us to speak for us. And our patients, our profession, and our members—both straight and gay—suffered.

Some have claimed that the “gay activist movement” in the American Psychoanalytic Association forced its agenda upon us (Socarides, 1995). How ludicrous! In the 1991 watershed year, when the non-discrimination policy was finally adopted, we had exactly one self-identified gay member. Although Isay was a forceful voice who deserves much credit for initiating changes, he hardly constituted an invincible movement that could overpower our governing bodies.

Rather, our members began to see the absurdity of cherishing a theory that could not explain these new observations in the world around us. New, non-stereotypical images of gay men and lesbians were everywhere—on TV, in movies, in a few of our colleagues, in some of our friends, and in many of our children. When openly gay candidates were accepted in a few institutes in 1993, some faculty members admitted that it was their first experience of actually knowing a homosexual person other than as a patient. Now they found themselves teaching impressive, sometimes outstanding candidates who openly identified themselves as gay, lesbian, or bisexual. A few colleagues were emboldened to openly declare their own gay identities.

A gaping disparity grew between our old stereotypes and these new images. So when new leaders arose in our organisation, our members were ready to institute changes in our policies and attitudes. We were neither hijacked by the ACLU nor shamed into political correctness. Rather, we rethought the issues with greater wisdom, surmounted our heterosexist bias and ignorance, and began to look and listen differently. If unbiased observations of lesbians and gay
men did not fit our theories, perhaps it was the theories that needed changing. And, at the least, discriminatory policies and practices based on those theories could be corrected without waiting for new theories to be developed.

At the conference on Women and Power at Emory University in Atlanta, Georgia, Ethel Person (2000) made the important observation that social change is never initiated by powerful insiders. Change in our psychoanalytic understanding of gender and sexual orientation began in the women’s movement and in gay liberation movements out there in the culture, not from within our field.

Now that we have embraced social justice for gay men and lesbians and have made our organisations more gay friendly, we have the long, slow task of reformulating our concepts of development. We are just beginning to think in terms of a normative developmental course, rather than a pathological one, for boys and girls who will grow up to be gay (Corbett, 1996; Goldsmith, 2001; Phillips, 2001).

Clinical changes

New theories of development will evolve slowly. Fortunately, our clinical work needs no new theory—only the unbiased application of psychoanalytic principles. But that will require conscientious work on the part of individual analysts to overcome their bias, heterosexism, countertransference, and lack of knowledge about the lives of lesbians and gay men.

Much of the problem with treatment for homosexual individuals in the past was that it was simply bad analysis. We overlooked the departures from neutrality, the use of directive–educative methods, and the manipulation of compliant transferences for the misguided goal of changing sexual orientation (Mitchell, 1981). Psychoanalytic principles were abandoned in the zeal to cure homosexuality. What a different perspective we have when we do not automatically assume that a gay or lesbian orientation represents pathology but in fact may be the natural sexual expression for this person.

For example, a typical subtle communication from a presumably unbiased analyst occurs when his male patient, who is struggling to clarify his sexual desires, is aware that his analyst seems interested when he talks about his date with a woman but remains coolly silent
when he mentions his recent date with a man. The analyst may be unaware of his different responsiveness, but it will not escape the gay or bisexual man who has spent his life attuned to subtle disapproval of his “abnormal” desires.

I do not mean that homosexual object choice is never defensive, never represents the sexualisation of other needs, never has compulsive or perverse uses. What I do recommend is that we begin our analytic explorations from the perspective that sexual orientation and psychopathology are independent dimensions (Cohler & Galatzer-Levy, 1996) and that we conclude otherwise only when there is supporting evidence. This will help to overcome the small voice of bias within the analyst that says, “It’s not normal for a man to date a man; it probably represents his fear of women.” In fact, it may simply represent his sexual desire that was fixed in him at a very early age and is as natural for him—and as unlikely to change—as an opposite-gender object choice is for others (Freud, 1920a; Roughton, 1999, 2000b). His apparent anxiety when dating women may simply be the discomfort that would be reasonable for a man to feel when he is expected to act on a desire that he does not feel, along with shame for not feeling it. The subtle disapproval communicated by his analyst will reinforce that anxiety and shame.

Clinical case

Now I present some clinical material from 1975, which represented a turning point in my understanding of homosexuality, and then look at the same material from today’s perspective as another turning point. Hence, “The two analyses of a gay man,” borrowing from Kohut’s 1979 title, “The two analyses of Mr. Z.” In fact, my patient had only one analysis, the implied second one being a reconceptualisation of old material from a new perspective—as we now know was also true of Kohut’s second “analysis” (Strozier, 2001).

It was 1975, just three years after I had graduated from the psychoanalytic institute, when Ben sought treatment with me. (This case was summarised in my 2001 essay, “Four men in treatment: an evolving perspective on homosexuality and bisexuality, 1965 to 2000”.) Our meagre classroom discussions of homosexuality had focused on the concept of homosexuality as phobic avoidance of the opposite sex and
the possibility for change through analysis (Ovesey, 1969; Rado, 1949). At first, this had generated hope, because it now defined homosexuality as a neurosis that could be cured rather than as an unchangeable perversion. But this new approach had not worked for me personally. My five-year analysis that ended in 1970 proved to be a pseudocure, based on the exploitation of a compliant transference, which evaporated shortly after termination.

Being married with two young daughters, I was determined to make another attempt to rid myself of homosexual feelings. So I began a second analysis with a different analyst in 1973, two years before I began seeing Ben. I was also reading the early self-psychology work of Kohut (1971), Goldberg (1975), and Lachmann (1975), in which they described the self-restorative function of sexual behaviour. Although their focus was primarily on heterosexual patients, I began to understand that homosexual acts might also represent attempts to maintain or restore a cohesive sense of self. This not only made sense to me intellectually, but it was also an analytic perspective on homosexuality that conveyed a feeling of respect and empathy for the patient—a quality present in Freud’s writings but lost in much of the later psychoanalytic literature. It also resonated with my own second analysis, which was now less focused on getting rid of my homosexual desires than on understanding their place in my life and in my self-identification as bisexual.

I give this brief personal background in order to set the context for my work with Ben—there were rich, parallel analytic processes, leading to the possibility for enhanced understanding but also for countertransference distortions and enactment complications.

Ben was twenty-seven. He had an MBA and a promising career as a financial analyst, and he was married to a professional woman five years his senior. During the second year of analysis, a baby daughter was born, and his joyful involvement in being a father was striking.

Ben sought help for depression and a sense of emptiness. Difficulty with male authority figures was a central concern in that he was both highly competitive and intensely sensitive to either praise or criticism. Lately he had been finding some relief for his anxious longings through anonymous sexual encounters with men that left him feeling a deep sense of shame. He was a bright and aggressive achiever who blazed a trail of success through high school and his first year of college. But then something happened that reversed all this. He was
severely depressed, began spending his weekends escaping into a fantasy world induced by hallucinogens, and dropped out of all other social activity. Six months later, in danger of ruining his academic record, he managed to pull himself together and, without any professional help, returned to proving himself through achievement.

As we sought to understand what triggered this depression, it became clear that he had responded to feeling rejected by a series of close male friends toward whom he had felt a special bond of intimacy and love. Although for Ben this closeness was somewhat erotised, none of these was an overt sexual relationship. Nevertheless, his intense need apparently frightened each of them away, which compounded the shame he already felt because of his dimly perceived sexual attractions to these friends. His solution was to numb the feelings and escape. And, to avoid ever being this vulnerable to hurt and shame again, he closed up emotionally and secretly ruminated about his masculinity and his sexual orientation.

Ben had some heterosexual experiences with two different women before he met the woman he married. He found it very pleasurable, particularly enjoyed prolonged foreplay and intimacy, and usually felt relaxed and tranquil afterward. Sex with his wife was less satisfactory, because she was inhibited and less interested than he was. Before he married, Ben’s sexual experiences with other males had been limited to a few instances of mutual masturbation. He was attracted to good-looking men with well-developed bodies, but he thought his longing was more for intimacy than for sex.

In 1975 my understanding of Ben’s pathology was in terms of narcissistic deficits and vulnerability to shame, and I thought of his homosexual preoccupations as an attempt to repair his incomplete sense of self through mirroring experiences with other men. Ben seemed a good example of my new understanding that sexual activity may be one way of restoring a fragile sense of self. This would seem especially apt in same-sex behaviour in that the fragile, vulnerable self finds a reassuring mirror image. In fact, the analytic work with Ben was carried out largely around the vicissitudes of a narcissistic transference, periods of homosexual “acting out” (as I thought of it then), along with very real progress in growth and self-understanding.

After initially feeling exposed and vulnerable, he became more comfortable and quickly regressed to a surprising degree, giving the
first indication of circumscribed areas of narcissistic pathology in what had initially appeared to be a relatively well-integrated personality. Regressive moments were characterised by mild episodes of depersonalisation related to his fear of merger or engulfment when he felt too close to me or when boundaries were in some way threatened. In the fourth month, he developed an idealising transference, which progressed over several months to an expanding sense of himself and some grandiosity. This was confined to analytic material and showed up outside only as derivatives that enhanced his life (weight lifting, reading books on the use of power, etc.).

In many ways, Ben was an ideal analysand. Workable regressions during the sessions were paired with a remarkable self-observing capacity. He quickly grasped and integrated insights, with the interpretations often coming from him rather than me. Ben had evolved three ways of restoring a sense of wholeness: the first was in his competitive struggles and remarkable achievements. This left him fearful of the inevitable conflicts with authority figures and vulnerable to retaliation from competitors, as well as a constant pressure to avoid the pain of failure. Ben’s second avenue of compensation was in relationships with other men, which he initially sought in intimate friendships. Finding the rejection by these friends too painful to risk again, he turned to anonymous sexual encounters. As analysis progressed, a third avenue came into being in the transference relationship, where his longing for intimacy began to find some solid reality but was periodically displaced by anger or sexual acting out, whenever he needed to create a safe distance to reassure himself of his autonomy.

Rather than giving a systematic case presentation, I have chosen to follow certain threads: Ben’s feeling inadequate and needing to prove himself, his desire for love and intimacy, and the meaning that having sex with men had for him. Was it acting out, as I thought at the time, even though I accepted its useful function in filling his narcissistic needs? Or was it, as I now think, the natural expression of his sexuality? Or both?

In the second month of treatment, Ben’s apprehension about resuming analysis after a week’s vacation led him to talk of his many early fears: he remembered being afraid to go to school, to ride the bus, to go to the lunchroom, to play baseball. What was he afraid might happen, I asked. Being beaten up by bigger boys, getting in a
fight, he replied. He felt he could not hit back. His father had been disappointed and critical because he was not good at baseball. He would pray for God to help him be a good baseball player. Then he expressed anger at his father for expecting so much and not being supportive. This early, I chose not to interpret the transference aspects, but today I might do so.

In the next session, he reported having felt angry with me after the last session. He felt uptight about telling me his weakness, and he knows nothing about me and my weakness. I commented that he feels this as competition and feels at a disadvantage with me. He then talked about how important physical appearance is to him—both his own and those with whom he has a relationship. He worries about how he looks to me; then he said he finds my appearance “acceptable”. He feels sheepish to be so concerned about this. I thought, but did not say it, that he shifted from feeling disadvantaged in competition with me to the one area where he felt superior—that of appearance.

The next day he spoke of experiences in the past when he had to prove his manhood and was afraid. As an exchange student in Peru, he lived with a family whose sons were learning the art of bullfighting. He was afraid but forced himself to get in the ring with a bull. His next associations were to a few months ago when he went into an adult bookstore, which turned out to be a gay establishment with private video booths where men could engage in sexual acts. He left, but then came back and allowed himself to be picked up by a man and went home with him. They engaged in mutual masturbation and then had a nice talk afterward. He felt kindly toward the man but had no desire to do it again. He thought that he had rationalised away the guilt but found that it was still there. He especially did not want to tell me.

The next day, he was anxious, afraid of my disapproval. I pointed out that he did not feel guilty until he thought about what I might think. He said he really felt bad about the experience but that it did have one positive aspect—a friendly intimacy. He felt better after talking about it, and he felt my tacit acceptance.

I skip now to a session a year later, fourteen months into treatment. For two sessions he had talked of feeling lonely. He wanted me somehow to fill the empty void in him, but he knows that is not my role. He spoke of wanting to be “in love” with someone. As he was leaving, he told me that he would be away the week after next, which
reminded me that I needed to tell him that I would be away the Thursday and Friday prior to that. This was poor timing on my part.

Not surprisingly, that night, feeling lonely, he went to the bookstore but left without making contact with anyone. When he got to his car, he found that he had locked his keys in the car and had to break a window. This attracted attention and embarrassed him in the parking lot. He still felt secretive and ashamed about going to a gay bookstore. Then he talked more about wanting to be loved, to have someone who loves him and wants to make him happy. In the next session, my notes are only a brief summary, but I wrote a comment to myself: “he really opened up in the area of the narcissistic deficit, which he tries to fill with the homosexual acting out.”

The next day, he felt better and was more able to talk about his sexual fantasies. Getting a blow job has a “selfish component”, he says. He gets satisfied and the partner only gets gratified through admiring and pleasing him. At this point he had only received oral sex.

A few weeks later, he felt afraid of the deepening emotional relationship with me—a fear of being vulnerable, of being hurt, but also just a fear of having to talk about feelings. He told of seeing a beautiful man coming out of the gay bookstore, and he felt “a strong emotional charge”, a mixture of desire and fear. He identified this as looking for his idealised self, but also for someone who shares this secret side of himself, that is, an attraction to men. He associated to having seen me on a recent Saturday at a mall wearing jeans. That was like having a view of my private life, again like sharing a secret. He likened this to seeing a mirror of himself and feeling whole. With the man at the gay bookstore, it is sharing this secret attraction. With me, it is feeling understood, that I am in tune with him, and it has the same effect. Following this session, he struggled with resistance, intellectualising and talking about outside events, and he forgot to come to one session. He was able to talk about his fear of the closeness: it is as if he runs away at the slightest hint of it, he says, like being in the woods at night, hearing a sound and being afraid.

A week later, he continued to explore this “secret life” and what it means to him—an exciting sense of freedom from being trapped in a straight, dull world. It is also acting out some undefined need. And it is best of all when it is a shared secret with a close friend, giving him companionship with total acceptance. In college it was the drug scene; recently it has been the gay bookstore experiences.
The next day, he was having some mild dissociative feelings—a vague, dreamy feeling with someone, maybe his mother, saying to him, “You’re bad, really awful, so bad you’re not worth being around.” This was not a memory but a felt reconstruction. He talked about not feeling lovable after having exposed his inner life. “Always there is the feeling of the ‘bad me’ that has to hide and cover it with a ‘good me’ through achievement.” This was just before my summer vacation, which he insisted was no big deal. He resisted my suggestion that his feeling unlovable might be linked to my going away. But then he wryly warned me to watch out for sharks if I went anywhere near the beach. The session ended with his saying he was having warm feelings that he wanted to keep private.

Two weeks later, on my return, he had “almost” decided to quit analysis. He is in a lot of pain in his outside life and fears that analysis will blow everything up, change his whole life, that he will give up everything. At first I thought that he was only paying me back for going away. But “blowing up, changing his whole life, and giving up everything” suggested something else. I asked what had happened while I was away that he was uncomfortable telling me.

He had been in San Francisco on a business trip, had gone to a gay bathhouse, and had a sexual encounter. He really liked this man; there was a lot of affection and shared feelings; and with much reluctance he let me know that he had tried giving oral sex—and that he had liked it. After telling me about this, he decided maybe he did not have to quit analysis after all. His fears of my disapproval were eased, but what about his fear of changing his whole life and giving up everything? Astonishingly, in retrospect, we did not explore the meaning of those phrases. What I did write as a note to myself, however, was: “But explore the acting out aspect of this.” That is, I focused on the transference meaning of his “acting out,” rather than his fear of the possible life-altering consequences of allowing himself to acknowledge and act on his homosexual desires.

What I thought we should explore was the transference meaning of this happening while I was away. But that implied that I thought his need to compensate for, or retaliate against, my absence was the determining factor, whereas now I would at least be open to the possibility that he was finally allowing himself to follow his natural sexual wishes even if he could only do so when I was away. That is, doing something new while I was away may be acting out, but it also may
represent greater freedom to try out new, adaptive behaviour at a time when having to tell me about it is temporarily in abeyance. This differs from older interpretations, where we always assumed only the pathological meaning for behaviours that were outside heterosexual norms and failed to explore how they might represent the norms of same-sex life.

In the next session, he said he had felt so much better, that it only takes a few words of acceptance to turn his whole mind-set around. Then, following my note to myself, we explored the San Francisco experience in the context of my absence. In the course of this, I referred to him as “a hungry guy”, explaining that I meant that his need for love and approval was like an appetite and that he was always hungry. This struck a very responsive note with many associations: as a child he was always hungry, and his mother chided him for eating too much. He tries to quell his hunger and not demand what he wants, because he has no right, or because it will overwhelm others. He also associated this with feeding his baby daughter her bottle and feeling love and intimacy with her, something he did not feel from his parents.

When I reread these notes after twenty-five years, I cringed. Calling him a hungry guy sounded so much like his mother chiding him for wanting too much. But I think I conveyed by my tone an understanding of what it feels like to be hungry and unable to ask for what you want. And his response was one of opening up.

Several months later, at the end of the second year of analysis, he said that the two hardest things for him to talk about were his sexual feelings for men and his positive feelings for me. It is easier for him to tell me that he hates me than that he loves me. The next day, he felt annoyed, vaguely angry with me. He is aware of rapidly alternating desire for closeness, then annoyance. That night he went to the bookstore again and had a very passionate, satisfying experience. He said it was a transient physical and emotional intimacy and implied that oral sex had been mutual. He said he felt very good afterward, and I had the impression that he stopped just short of saying that he felt fulfilled. The next morning he was very turned on and wanted sex with his wife. They did have intercourse, but her rigidity pretty much ruined it for him.

That was on the weekend, and now on Monday he is castigating himself, referring to sex with the man as “acting out”, feeling guilty,
and again afraid to talk about it with me. He spoke rather gloomily of feeling trapped in his life. In hindsight, sex with men seemed more exciting and fulfilling than with his wife.

Later, he confirmed the mirror aspect of the sexual object choice—he prefers someone his age, his size, nice looking, intelligent, warm, accepting. “I guess if I looked in the mirror, that would be it.” But that was not it either. He emphasised that it was not just a mirror. He wants contact with another person; it is very important to him to be loved by a man. He is aware that, in spite of his fears and doubts, he is beginning to break out of the old restrictions, at least in sessions with me and when he has sex with a man. But he has to trust me to know what is happening, because this territory is new and frightening to him.

Another time, he said, “My self-concept comes almost entirely from the reflections from other people. That’s why people are so important. If they aren’t there, I don’t exist. I feel like a bubble in the ocean—everything on the outside and nothing on the inside. (Pause.) Somehow this is connected with the sex thing.” I said, “Yes, when you find a mirror image that seems like part of yourself and merge with it through sex, then you feel whole. No wonder it feels so good.”

What I intended to convey was that his sexual activity with men, as well as his liking it, were understandable. But he focused on my unintended implication that having sex with men was pathological and therefore something he should work to rid himself of. He responded angrily: “It’s my secret thing; leave me alone with it. If you understand it, it will go away or else you’ll expect me to give it up.”

Over the next few sessions, we continued to work with this interpretation and his response. I clarified the difference between identifying the need and having to give up the behaviour; and with further working through over time, he came to realise “that you really want me to be free . . . to develop in my own way; and you make no claims on me.” Later he said, “I have this contented, centred feeling, like I’m becoming myself.”

With this progress in building a more cohesive sense of himself, Ben was able to reclaim some of the power he had delegated to me. His fears of merger and rejection diminished, and he began to feel a sense of wholeness that came from within himself. At this point, feelings of competition resurfaced but now were tinged by the angry desire to defeat other men, rather than needing to win primarily to
bolster his self-concept. This introduced what seemed another motive in having sex with men—revenge and the wish to dominate. Linking this to his anger at his father and authority figures, including me in the transference, he then saw how some of his acting out had expressed his anger at me.

With further analysis of both the competitive and the mirroring needs in the transference, Ben experienced a shift in his feelings about physical relationships with men. He still felt attracted, but it was now more for closeness and less a sexual urge. I interpreted this as his beginning to undo the sexualisation with which he had invested other needs (Coen, 1981). My retrospective view is that this interpretation again assumed that his homosexual feelings were not valid as sexual feelings and that they had only a defensive or reparative function and meaning.

As we approached the end of Ben’s third year of analysis, he had come to feel more and more a sense of wholeness. His vulnerability to slights had diminished significantly, allowing him to feel more contented with his life in general. He was gaining a national reputation in a highly competitive profession and was being rapidly promoted within his company. Despite some disappointments in his marriage, his daughter was such a vital part of his life that he did not consider divorce as an option.

His mother developed a fatal brain tumour, and her impending death spurred him to work through the conflicts that had prevented his being close to her. As part of the same process, he explored more deeply the rivalry with his father, which allowed him to have a more mature friendship with him.

This phase of Ben’s analysis was consistent with what Kohut (1977) described in the analysis of some narcissistic patients. After prolonged analytic work on the deficits in self-structure has led to improvement in self-cohesion, there often follows a period in which oedipal issues emerge and are rather quickly worked through, more like a normal developmental phase than a pathological template. Oedipal conflicts with his father came into the analytic material, were easily interpreted and worked through. It is important to note that during this oedipal phase there was no increase in his homosexual yearnings or any noticeable decrease following it.

There was a parallel shift to oedipal configurations in the transference as well, and again interpretation and resolution of conflicts went
forward easily. Ben’s relationship with me both deepened and took on a more mature character so that, when he informed me that his insurance benefits were soon to run out and he would like to cut back in frequency of sessions, I suggested that instead we consider his readiness for a planned termination. He readily agreed to this suggestion, which ushered in a six-month termination period. During this phase of the analytic work, Ben experienced some mild regressions, and he reverted occasionally to “acting out” sexually, but overall it was a very productive termination process that consolidated his insights and led to further resolution of the transference. At the end, he remarked on how profoundly his life had changed, and I felt very satisfied that this had been a good analysis and an appropriate termination.

However, in looking back over this material, I noted a particular session during the termination period. It was Ben’s thirtieth birthday. He spoke about his goals in life. When he thinks about making a major career change, for example, he still feels an emptiness. And he conceives of this emptiness being filled only by loving someone—and being loved—really touching someone in a way that is not fully met by his wife and daughter, whom he does love. I wrote a note to myself: “This is still the hunger that he tried to satisfy in sex with men; but what is an alternate solution? He hasn’t quite found it yet.” How prophetic.

Six months after termination, Ben called to tell me that his wife was suing for divorce. Either being careless, or perhaps unconsciously intending to be caught, he had left the phone number of a man he was having an affair with where his wife could find it. His concern was not so much that his marriage was ending but that his wife thought he must have lost his mind, and he wanted to discuss how to talk with her and help her understand. We met for one session, and I learned that he had fallen in love with a man, that the relationship fulfilled both sexual excitement and loving intimacy, and that he was now convinced that this was the direction he wanted his life to go.

About a year later we met by chance in a public place, and he proudly and happily introduced me to his lover. Fifteen years later (1993), I read in a newspaper article that he had died of AIDS. Named as survivors were his daughter and his companion. His professional credits mentioned that he was a senior vice president of a nationally recognised financial institution and that he had been identified as one of the outstanding men in his field by a leading business magazine.
Knowing little of Ben's life following termination, we are left with more questions than answers. I wondered about unresolved transference and self-destructive acting out, both in his choice of life course and in his acquiring HIV. He had tended to withdraw or act out whenever there was some empathic failure on my part, especially when he felt rejected by me. And, of course, it was my suggestion that we consider terminating, when he had only wanted to decrease the frequency for financial reasons.

However, those thoughts are based on the assumption that Ben's choice about his sexuality was pathological and that getting AIDS resulted from taking life-threatening risks. If analysis in the 1970s had freed Ben to seek the sexual life he wanted with carefree abandon, this would have occurred prior to our knowledge of how HIV is transmitted and therefore would not have been knowingly self-destructive.

It seems clear, as I thought in 1975, that Ben's acting on his homosexual feelings during the analysis did serve a self-repairing function and did at times represent acting out—just as heterosexual activity may serve the same purposes. But I now also think that the homosexual part of his bisexuality was the stronger and that divorce and a committed relationship with a man represented growth and freedom rather than pathology. Perhaps intimacy and fulfilment eluded him in marriage, because his desire could not be fulfilled with a woman. Or perhaps it was not a matter of differential strengths of sexual desires but that he met an individual, who happened to be a man, with whom he could have the intimacy he lacked with his wife (Roughton, 2000a). I emphasise the "perhaps", because this is speculation and illustration. We have no way of proving any formulation.

Would I do anything differently today? In 1975 I thought that Ben was bisexual and that the homosexual need was activated primarily to fill his emptiness and to restore his less than cohesive sense of self. I thought that need had diminished with analysis and that he would then be able to sublimate the homosexual part of his bisexuality and maintain a marriage that he wanted to continue. Now, twenty-five years later, I would more fully explore his homosexual yearnings beyond the use of them as narcissistic repair. And I would be more aware of the need to avoid even subtle implications that his homosexual feelings represented only pathological or restorative use of sexuality.
Another way of putting this is that my older understanding would focus on the homosexual behaviour and how that was activated and used in the service of narcissistic compensation or acting out. In my newer way of thinking, the focus would be on the self needs, realising that sexual behaviour may be used in the service of narcissistic compensation or acting out. If one is a gay male, that sexual behaviour would be with another male just as, if one is a straight male, that sexual behaviour would be with a female. But one is neither gay because he is narcissistic, nor narcissistic because he is gay. He is narcissistic and gay, and the two have no more necessary causative or pathological link than would be presumed in someone who is narcissistic and straight.

The attitude I communicated to Ben in 1975, I believe, was an acceptance of his homosexual yearnings as a symptom, but not as a natural part of his sexuality. I look back to several missed opportunities to explore this: the greater intimacy and fulfilment in sex with men than he experienced with his wife, the San Francisco experience that he feared would lead him to give up everything, his realisation that sex with men was not just a mirror but a desire for shared love with a man, the way he had always tried to quell his hunger and not ask for what he wanted, feeling that he was trapped in his life, and my prophetic note about his not having found an alternate satisfaction for the hunger he tried to fill with sex with men. Perhaps the reason was that the hunger for men was just that—his natural affection, love, and sexual desire (Roughton, 2000b).

In our current emphasis on intersubjectivity and the analyst’s emotional participation in the analytic process, this retrospective reanalysis calls for a closer look at my role in Ben’s analysis and in his life decisions. It is difficult to reconstruct my actual day-to-day feelings from twenty-five years ago, but events in Ben’s life and my own at that time point to a parallel process.

Why, for example, did I overlook those opportunities to explore Ben’s homosexual desire as natural, rather than defensive or compensatory? At the time, I was in my own analysis and struggling with whether I was going to accept my homosexual feelings as real and what I was going to do about it. I was consciously invested in finding a solution that allowed me to continue my own marriage. This was also Ben’s conscious intent at the time of termination.

I was certainly not aware of trying to influence Ben’s decision about marriage, but did he take my avoidance of a fuller exploration
of his homosexual desire as a message? How he would have interpreted that message could be anything, from feeling that I was uncomfortable in talking more about his desire, to feeling my disapproval of his considering leaving his marriage.

What I can say is that, as far as I was consciously aware, my intent was helping Ben find what felt authentic for him, rather than having an agenda for him. On the other hand, Renik (1993) points out that what we analysts are less able to acknowledge about our own subjectivity is what we are more likely to enact with our own patients.

Ben’s marriage lasted only a short time after his analysis terminated. He then chose to live his life as a gay man. Although my similar choice to divorce and live my life as a gay man was made only many years later, there is no doubt that, during Ben’s analysis, that course of action felt like a forbidden desire that I could not bring myself to choose. Did I somehow communicate that conflicted wish to Ben by what I chose to explore and to ignore? Some would suggest that Ben picked up my unspoken wish, constructed from subtle clues in my selective focus on his material, and that he acted out my forbidden wish for me.

What do I think was the extent of my influence on Ben’s choices—first, to stay married, and then later to accept his homosexual desire? I do think that an analyst co-creates the analytic process, that what material he chooses to comment on constitutes a “back-channel” of communication beyond what he says in words, and that he exerts a strong influence on the interaction in the analytic session.

We must be careful, however, about assuming that a plausible explanation of a behavioural choice means it was causative. Although the analyst’s subjectivity may partly determine what gets explored and what is avoided in the analytic process, it is unlikely to be the determining factor in the patient’s major life choices, except possibly in those patients whose psychopathology makes them especially malleable and vulnerable to influence. Ben wanted approval and validation, and he may have sensed that I would approve a decision he also wanted. But he was also robustly independent enough to make his own decisions based on what he wanted.

At most, I believe that my own parallel conflicts may have influenced how the material unfolded, may have limited the participation he needed from me to explore his desire, and may have interfered
with his being able to work through his decision while he was still in analysis.

Could the outcome have been different with my current understanding and perspective? My conjecture is that Ben’s choice of a male partner would have been the same, but that he might have been able to work through to this choice during his analysis, and therefore with greater understanding and better integration of his sexual desire. As it was, both the psychoanalytic theory of the time, and my own investment in not being homosexual myself, steered us away from helping Ben explore this as an acceptable option for himself. We can see how easily such subtle steering by the analyst can happen within what appears to be an unbiased, non-directive analytic process.

Summary

I want to return to one of my original points. We do not need a new technique for working with lesbians and gay men in analysis. We simply need to rid ourselves of our old (mis)understandings of the origins and development of homosexual and bisexual orientation and object choice; we need to rid ourselves of the heterosexist assumptions about what is normative in human life; we need to be aware of anti-homosexual bias in its masked and subtle forms, of countertransference, and of how little most of us know about the lives of gay men and lesbians. Only then can we approach our gay and lesbian patients with the unbiased openness and respect that can make analysis the same for them as for our straight patients.

References


If there is no such thing as a baby without the mother, then there is no such thing as an adolescent without the environment, be it hostile or favourable, or both. I felt this was a subject to which I could make a contribution. As I worked on the text, the entire theme began to seem much more complicated to me. Would it be too broad or too specific? Did addressing homosexuality in the adolescent girl pose the risk of establishing too rigidly particular times and movements, moreover, in only one sex? I turned to Winnicott for help, taking from Selected Letters (Rodman, 1987) a fragment of a letter addressed to a man:

I wonder whether you can make use of this idea. Everybody is bisexual in the sense of the capacity to identify with man and woman . . . I think that the study of man’s identification with woman has been very much complicated by a persistent attempt on the part of psychoanalysts to call everything that is not male in a man homosexuality, whereas in fact homosexuality is a secondary matter or less fundamental and rather a nuisance when one is trying to get at man’s woman identification. (p. 155)

I would like to extend this observation to everything that is not feminine in a woman, a point that would shed light on many
problems that arise in both male and female adolescents. Adolescents are expected by those around them to conform to the family and group culture in which they are immersed. We should not be surprised, therefore, by the strategies adopted by them in order to avoid being pigeonholed in a pre-defined way. The title of my chapter, “The same and the other”, introduces some initial ambiguity into my remarks. While the other can ultimately be defined, the same can have multiple meanings. Is it a double? The uncanny is never far away; we have only to look in the mirror. The duality of the same and the other is worked out in the human psychic apparatus, externally by the sense organs, but also by internal messages that are transmitted by the drives. In our day and age, the sexual hits the headlines, and is condemned or trivialised, and the other of the sexual in our culture is the Woman. The other is the discovery of the non-self, as a stranger, and, therefore, is unacceptable. Only the first other, the first host, is the mother’s body; the other is also the separation from oneself, definitively divided. The two have formed a single entity, and this object, the other, is only perceived as other precisely when it is lacking, when it is frustrating. Nevertheless, there was a time when this fusion would have been pleasant, a fantasy or a reconstruction.

How do we rediscover this problematic notion of the same and the other in adolescence? How is this relationship of self to self and of self to the other organised in somatic–psychic life? For centuries, the child was not considered a person. According to the prevailing cultural norms, it was the access to adulthood, sometimes characterised by rituals, which established a place for the individual in society. Adolescence, as such, hardly existed. However, the extension of the lifespan in one part of the world, combined with economic factors, has produced a major discrepancy between sexual maturity and social independence. This is just an outline of a period of life in which a new sexual adult puts an end to his or her previous roles. Adolescence, in our society, is a lengthy period, a necessary time for bringing the body and the psychic apparatus into accord, a period of separation from the preceding generation and also a time when the other sex is discovered.

Puberty, then, reshuffles the cards. Having previously been a rather well integrated companion, the body from then on becomes a stranger to itself, bizarre in one way or another. The sexual messages that emanate from it are initially alien to the ego, which hardly knows
what to do with them. Masturbation and the exploration of the body are very often negatively experienced as shameful, dirty, or forbidden because they are too close to infantile fantasies in regard to the oedipal objects. The aim, the sexual encounter with the other, is not immediately imaginable. There is a difference between what the body says and what it experiences. The body, which experiences an increase in the force of drives, will meet with the gaze of the other coming from the outside. This body, which has newly become alien and is no longer recognised by the adolescent as his or her own, instigates an entire work through the encounter of the sensory and verbal responses of the others in the family and beyond. For the adolescent girl, even though her mother’s feminising gaze is important, what counts most is the gaze of the father, who can recognise her as the woman she will become in the future.

Louise

In the psychoanalytic treatment of an adult, the traces of primary narcissism mingle with traces that originate in the wake of puberty and are elaborated through transference to the analyst. Thus, a new approach to the past and the present is made possible. What had awakened in Louise during the analytic process was the strange memory of the drawings that she had sketched alone in her bedroom when she was in her early adolescence, at about twelve years old. These sketches, that she hid at the slightest risk of someone entering her room, consisted of female breasts coming out of a bra. The remembrance in analysis of these moments produced the sensation of a spark in her lower abdomen. It was almost a hallucinatory memory, which created a paralysis in the analysis of this young woman, who was firmly and exclusively heterosexual in her adult life. She believed that she had no warm memories of her mother, whom she perceived as being cold. She had stopped calling her “Mummy” when she was only seven years old and then she had thought, with a feeling of guilt, that she did not love her. For Louise, her mother had been neither feminine nor maternal. We might perhaps imagine, referring to Joyce McDougall, that it was in the presence of an analyst who did not reject Louise’s seductiveness that she could construct, reconstruct, an erotic breast.
Although the evocation of the memory of the breasts coming out of a bra produced pleasure, what had been particularly significant at this point was the way in which Louise had been capable of actively giving an auto-erotic pleasure to herself. Thus, by drawing, she recreated, without knowing it, the pleasure that she must have experienced at her mother’s breast as a baby replete with milk, before the separation that took place between them. That was the moment when she refused to call her “Mummy”. Yet, the nostalgia that she felt for the times when this maternal breast had been erogenous brought out other memories, which were difficult to reconcile with the image that she had of her mother and her parents’ intimacy. She believed that she was indifferent to her mother and to her parents’ sexuality. It was beyond doubt that her father had loved her and in spite of her father’s love for her mother, nothing compared with the love that she shared with her father, in the absence of her mother. In one session, the perfume that she attributed to a bunch of flowers in the analyst’s office brought back, almost like a hallucination, her mother’s scent that she had smelt on a fur stole. Her mother’s scent led to the wakening of a screen memory of the mornings she spent in her parents’ bed. She had the memory of their strong smells and their laughter. Was it possible that they had a love life after she was born?

Let us set aside fragments of Louise’s analysis and comment on some points. The transition through a period of auto-eroticism in puberty, underpinned by an unconscious homosexual fantasy, turned out retroactively to be integrating a homosexual identification in Louise. She had retrieved some memories where her mother had been seductive. Consideration of this possibility allowed her to introject the bond between her parents. By drawing her mother’s breasts on paper, Louise could not only actively appropriate them, but could also identify with her father caressing them. In this rich memory, we can encounter two of the primal fantasies: Louise can appropriate her mother’s seduction, but is also excited by an imaginary scene in which her father is giving pleasure to the mother.

Perhaps not only for Louise, but also for everyone, the confrontation with the necessity to renounce the need “to be everything”, is enforced by taking into account the primal scene. The latter includes the auto-erotic encounter, in a double identification, with the self and the other, either carried out or fantasised, in its active and passive form a process that corresponds to an emergent bisexuality. I suggest here
that the identification with a homosexual object is essential for the acceptance of castration: the acceptance that the subject has nothing to do with the primal scene and that he or she can only have a place in the sequence of generations.

**Separation between mother and daughter**

One day, at a social centre, I met a young adolescent girl who was doubling over and jerking. She had not moved from her place since morning and no one had succeeded in establishing a contact with her. After a long period of being at her side in silence, I asked her what was it that shook her like this. Suddenly she lifted her head and, emerging from her silence, she shouted, “My mother!” She had been placed in an institution at a very early age by her mother, who would arrive without any notice, take her daughter back home, only to return her a few days later, unable to tolerate her presence any longer. This young girl represented this alternation in her body, the back and forth of being claimed and then rejected (McDougall, 1986). It was as if she were keeping her as a prisoner in her abdomen. This adolescent could only express her lack of a reliable and containing mother in a physical way. The symbolisation went through the body, expressing a suffering that was beyond words. I have chosen to speak about her because this hysterical manifestation, severe as it was in this case, tells us something about the detachment that every girl has to achieve from this other with whom she has been merged at the beginning of life. The girl has to detach gradually from her mother, through words and deeds of everyday life, during which the other might or might not help her with the separation.

Words, their music, and the perception of the difference between the male arms and the female arms that lift the child contribute from the outset to establish a difference between parents. There are two sexes and the baby “benefits” from both through identification and object relationships, which are indistinguishable at this point. Those are instigators of a symbolising thought in regard to sexual difference. By envisaging the parents’ violent interpretation, which is provoked by their unconscious sexuality that invades the child, Piera Aulagnier (1975) approaches the “confusion of tongues” described by Ferenczi. Both of them refer to the inevitable encounter of the child with the
adult’s unconscious sexual fantasies. In this case, Freud’s own homo-
sexuality, acted out in the transference with Fliess and then Jung,
would have diverted him from taking into consideration the contribu-
tion made by Ferenczi, one of the most innovative of his followers.

The question is not only how should the girl deal with her mother,
but also how should the boy deal with his mother. What is to be done
with this figure, pervaded by the feminine, even before birth, and then
in the physical proximity created by sounds, smells, touch, and recip-
rocal looks? How, and at what cost? The human source of the baby is
the milk that flows and the mouth that swallows it—mouth and
nipple in union in a primary non-differentiated state, in the period of
a fusional primary narcissism. What later becomes desire is founded
on the need of the mouth-to-nipple contact, in a sound bath and a
single skin (Kestemberg, 1984). I am referring here to primary homo-
sexuality, which precedes sexual difference. Its structuring and organ-
ising function prepares the way for frustration. The maternal object is
discovered in its lack, forcing the child to discover his or her body
auto-erotically. In the absence of a satisfactory hallucination, the child
rebuilds his or her narcissism as best he or she can. In a boy, this is a
period that prepares the way for feminine identifications. Connected
to his relationship with the mother, his feminine identifications assure
him of bodily sensuality in an internal continuity, preparing him for
the inevitable encounter with the father and his penis as ideal, rival,
and object of future identification. The almost orgasmic pleasure of
sucking remains in the background, still sought through pleasure and
the pain of its loss. What is to be done with the difference, when its
encounter has been denied in some way?

Homosexuality is initially feminine, for both the boy and the girl,
establishing the foundations of a psychic bisexuality in both sexes. For
the girl, this builds the foundation for experiencing the existence of
the other, who possesses different sexual organs. For the boy, this
leads to the awakening of an abundant psychic curiosity. There is a
concordance for him between the internal perception and the sight of
his sexual organs on his own body. While the girl certainly perceives
an excitation inside, both pleasant and interrogative, her sexual organ
is less visible in its excitation, whereas the boy can see his erect
sexual organ, signalling this arousal. Clearly issued or not, the threat
will establish a prohibition relating to murder and incest. However
powerful is the desire to sleep with his mother and to kill his father,
conversely it is also buried by the threat of castration. Repression originates a new order: parental authority is internalised into an agency, the superego; guilt is limited, shame should have no further cause to exist, and latency can be established. In classical terms, the girl is less exposed to this “cataclysm” to which Freud refers; she calmly enters the oedipal order, her superego, legacy of the Oedipus complex, is less structured.

Narcissism in adolescence

By introducing narcissism into his understanding of human functioning, Freud led psychoanalysts to be increasingly preoccupied with this reservoir of libido. The second topography that he introduced after his paper on narcissism, although he makes no allusion to it, brings up the idea of a partly unconscious ego immersed in an id. This topography refers to an id, in which drives reign supreme, and to a superego as heir of the Oedipus complex, which has not been shattered, as Freud had initially thought. The difficulties that he had encountered in his clinical practice raised doubts in him and led him to a shift in his paradigm. When Roussillon (1999), following Winnicott, discusses the question of survival, he refers to narcissism in a different way from Freud. In puberty and throughout the “work of adolescence”, the points of reference that were effective during childhood in relation to parents and the environment, with their reassuring quality concerning the self’s integrity, are shattered. At this point, survival becomes essential for the adolescent. Adolescents undergo a complex process of deconstruction and unlinking before any reconstruction or linking can be possible. The question for the adolescent is how to survive this period, fraught with all kinds of danger. This is also valid for those close to him, the analyst or the therapy group. The quality of the primary narcissism contributes to the foundations for survival. If a part of homosexuality can be cathected to social objects, then the game is won.

The development of the ego consists in a departure from primary narcissism and gives rise to a vigorous attempt to recover that state . . . To be their own ideal once more, in regard to sexual no less than other trends, as they were in childhood – this is what people strive to attain as their happiness. (Freud, 1914c, p. 100)
Here Freud goes on to examine the state of romantic love, which is costly in narcissistic cathexis. He considers that the girl primarily seeks to be loved. We can, while following him, correct this idea by referring to the girl in the boy or to the feminine in both sexes. The response of the other, the object, is vital for every one of us throughout life. The certainty of having been loved as a child confers on the adolescent girl a valuable narcissistic mooring from the outset. When the contrary takes place, it constitutes a severe handicap for her. However, the vagaries of life and the complexity of identifications with certain aspects of the parents will also intervene. The time at which a particular event occurs will determine if it is of a traumatic nature or not.

To love oneself, to take the risk of loving the other and the risk of a narcissistic loss, which is inevitably inflicted by the state of love. The adolescent dreams of being loved, even if to deny it.

A homosexual woman had identified with a very creative aspect of an uncle who had brought her up. He had taken her virginity as early as puberty and had convinced her that he had made her a woman. This had resulted in great complexity in regard to her affective and sexual cathexis. Although she enjoyed being creative and used her artistic talents in a blacksmith’s occupation that she carried out like a man, she was submissive, in a passive and masochistic way, to the desires of a female partner whose bed she shared. This gave free rein to an idealised, disembodied mother, who was adored like a saint. Being in a state of such fragile equilibrium, she was in danger of decompensating, so impeded was she by shame and guilt when she realised how much she enjoyed being like the rapist uncle in the creativity of her work. The idealisation of the other, with the libidinal loss it entails, is a risk both in life and in the analytic process.

Recently, on a French public service radio programme, there was a debate about issues concerning a proposed law to extend marriage and adoption rights to homosexuals. Two psychoanalyst psychiatrists, who worked at the same hospital in Paris, were invited to speak. One was opposed to the law, arguing that a father is necessary for a filiation to be constituted. He, therefore, considered this law to be detrimental to children. The other was in favour of the law, stating that it would only serve to endorse the existing situation of many children, whose lives would be made easier if society symbolically recognised that their family was, in fact, a family. I listened with regret to the
arguments of these specialists speaking from a Freudian tradition: there was an absence of any simple acknowledgement that *there is no normal human sexuality* and that heterosexuals, once they are parents, can also cause pathologies in their children. These pathologies can be related to their own fixations. Their resistance to their unconscious homosexuality constitutes a severe impediment in integrating a peaceful enough psychic bisexuality.

A father had brought his slightly pampered pre-pubescent son to a social centre. He was convinced that his son was “a homosexual in the making” because he refused to accompany him to sports halls, where he would have “learnt what it means to be a man among men”. A few interviews conducted with the son and the father by a third party helped to ease relations between them. The mother had left the father. This man, narcissistically wounded by this break-up, unconsciously expected his son to repair it. The father would attack the mother in his son’s presence, treating her as a weak woman. This caused the young boy to be wounded in his double relationship of love and identification with both of his parents. This man’s poorly repressed homosexuality rendered him incapable of tolerating the trauma of a separation. He projected on his son his own identification with the lost feminine object, but also the phallic demand that he made to him. This was verging on an anal regression: the vagina of the woman who had left him was becoming a hole. *Introjecting and projecting* alternate in all psychic functioning. When the cathexis connected with the object attacks its narcissistic reserves, the subject retracts. This is what this young boy was doing.

In the girl, before and around puberty, the other is very much the same. In the cases where sameness is experienced through friendships, these can be so strongly cathected that they include sharing clothes, jewellery, thoughts, love, and hate. With a best friend, sexuality is just present under the surface. True love and hate are still too close to primary objects, to the parents.

Dorine is twelve years old, very feminine, and sporty like her father, whose love and recognition she seeks. She provokes him in a masochistic way, akin to the fantasy of “A child is being beaten”. Feeling more certain of her mother’s love, this adolescent finds her mother’s obvious understanding of her father hard to tolerate, which becomes another reason to seek conflict, and move away from a sense of being happy in the world to a state of utter despair. She does not
present a true identity problem: she only moves narcissistically from all to nothing.

In Ana, the regressive identification predominates. She discards or introjects the world orally or anally; it is either good and to be devoured or bad and to be expelled. Thus, she alternates between bulimia and anorexia and oscillates between masculine and feminine identificatory movement. Primary homosexuality still seems to be in the foreground, preventing her from choosing between two imagos that are still poorly differentiated. As an organiser of movements of a symbolising thought, the primal scene is unconsciously present in both these adolescent girls, helping the psychoanalyst to establish an encounter and intervene as a third. Neither Dorine nor Ana is in severe difficulty.

More concerning is the way in which Véra explores an active homosexuality by drug-sharing. The drug, a transitional object too trapped in behaviour to be symbolised, prevents the confrontation with the difference. Pierced by the syringe, the skin eliminates the specificity of the sexual organs as the place of exchange with the other.

Social customs certainly change, but the feminine remains close to the demand and offer of love, in both sexes. What kind of feminine is this? Is it the feminine of a love that is shared, in an encounter of psychic bisexuality, integrating a sufficiently present post-oedipal tenderness? Or is it about experiences of evacuating an excitation? The succession of guilt and shame, connected with a vengeance that regresses to anal expulsion, can obstruct any drive integration.

Although homosexuality practised in adolescence can appear as an escape from sexual difference and, perhaps ultimately, from primary homosexuality, nevertheless some adolescents will become, sometimes as a result of analysis, happy human beings with a sexuality that satisfies them in their relationship with the other and with the world. To repeat the observation made by Freud, and, more topically, by the anthropologist, Maurice Godelier (2012): *there is no normal sexuality.*

Michel Fain (1982) refers to various homosexualities, their potentialities, and their role or otherwise in neurotic equilibria.

The child’s body, unconsciously likened to a penis, is in danger of being perforated, either by the sudden revelation of the vagina, or by the erotic quality of a little boy’s anus predominating over its vital function. (p. 114, translated for this edition).
It is the interpretation of this fantasy that places a latency-age child and a perverse adult side by side: the latter’s supposed action volatises the parental anaclisis, in this case, the education of the self-preservation instincts, to release an uncontrolled “feminine” eroticism. In place of a puberty that has appeared at the right time, what is feared is the emergence of a “premature” female sexuality, whatever the child’s sex is, an emergence that is due to the revelation of a hollow organ’s capacity for pleasure. This is at the level of an unconscious fantasy that operates both individually and collectively.

Homosexual activity in the adolescent girl, if it is lacking in tender motions, can sometimes be understood as an identification with an excrement and often as a challenge directed at an adult from her childhood by whom she has experienced herself as sullied (Tesone, 2006): “in the place of the symbolised father, the incestuous father substitutes the idealised father, a father on to whom he has projected his narcissistic omnipotence, situating him beyond castration, just like him” (p. 153, translated for this edition). The identification with the aggressor, and with his guilt —“I am treating you as you have treated me”—blocks any approach to a male partner in reality. There is a splitting between a devalued self and another aspect of the self, which, instead, conforms to an ideal of purity. This can sometimes explain a period of prostitution. Far from always being connected with rape or incest, it can occur during an actual narcissistic injury, such as being left by a boyfriend, or another event that has led to the feeling of existing as valuable in terms of a masculine image being banished without leaving a trace. What will make the difference will be the possible memory of having been looked at tenderly by a father, who recognises her as a future woman. In this deconstruction–reconstruction of self at puberty, in which the gaze of others may sometimes be comforting and sometimes persecutory, the maternal identification, when it is felt to be possible, is certainly important. However, the way in which the father, both the real father and through his avatars, has recognised his daughter as full of feminine and maternal potential proves absolutely essential. A tender and respectful father, who possesses masculinity in his daughter’s eyes, but not only that, opens the way to feminine as well as masculine identifications with his own sex. A mother who is not inhibited by classically masculine values will, in the best case, enable her daughter to overcome the temptation of returning to the mother’s breast at the slightest reversal in life. However, this idyllic
picture very rarely emerges and the process of gaining the independence of one's own freedom to exist is never painless. If this is a type of a protective masochism of life, as Rosenberg (1991) writes, then this masochism will be transformed rather than rigidified into moral masochism.

When the adolescent process appears to be blocked in inhibitions or symptoms, the play of identification can sometimes be replayed, through the *internal setting* of the analyst, in a site acceptable to the adolescent, often, as Cahn (2008) suggests, through face-to-face work in which the gaze between the two protagonists brings the real body of each to life. In this bodily encounter, desexualised by the setting, a topographical regression can occur. It is, therefore, in the “here and now” that the traumatic material can return to the drive source, rather than being an excitation that cannot be elaborated. There is a danger with the adolescent that the prohibition of *seeing* the analyst, a prohibition in the classical treatment of a neurotic, will turn into a phobia of the therapist. The prohibition of *touch* (Anzieu, 2006), *resuming or re-establishing the childhood prohibition*, provides the necessary framework for the difference between the permitted and the forbidden, establishing a place for symbolisation. Then, sometimes, at the end of a variable period, the adolescent girl can set off again towards a new stage of life, thus instigating the end of the analytic relationship. The love choice has become thinkable, as have other creative cathexes in culture and society. This time, a new adult demand comes in, in which a history is replayed retroactively in new representations and affects.

Emergence from dependency on the earliest objects, always present in the unconscious, leads to their displacement and dispersal. Once they have become taboos, it only remains possible to appropriate a particular trait, or idealise them and then to gain enough distance. It is no longer a father who is admired, but a particular charismatic figure. This is precisely how tribes are formed, rarely lacking in gurus. Social networks outside the parental gaze allow for a kind of co-existence that preserves the freedom to be alone in fantasies and in the psychic body. This can be a bone of contention with the parents, but the conflict, if it remains alive, makes it possible to evolve on both sides of the generational barrier. For the psychoanalyst, it is, therefore, through identificatory work, oscillating with the adolescent’s desexualised cathexis, that trust can be established with him or her, whatever site seems appropriate to the meetings. The psychoanalyst then has the
difficult task of presenting a non-judgemental other, but not a lawless one, one that is attentive, but not charmed. The adolescence of the psychoanalyst, worked on in his or her own analytic journey, will help resist the temptation to be a guide or a teacher. His or her sublimated homosexuality can provide for this.

The same and the other. The object, throughout our lives, accompanies us in happiness and torment. Object relationship and identification alternate, in various moments of our daily lives. Before concluding, I will refer to the three impossible professions—educating, governing, and analysing. In relation to the educative temptation, Cournut (1987) studied subjects functioning with a poor, impoverished or counter-cathexed preconscious. In these processes, the analyst is tempted, and often obliged, to speak, to elaborate by proxy, to present hypotheses, to put forward signifiers to these adolescents who lack “the words to say it”. The analyst must resist the temptation to educate, to consider himself/herself as the educative parent, even when this temptation is a resistance to the alternative temptation, that is, to be the double that has become adolescent again, both charmed and charming. Freud was right, psychoanalysis, especially with adolescents, is certainly an impossible profession.

References

It is difficult to discuss a chapter, since one attends not only to what the author writes, but also to what is not said: not words, but something glimpsed between the lines... a space where one may feel authorised to listen, but not exempt from the risk of deforming the author’s thoughts with one’s own vision or with perspectives opened by the reading. This is what the rich, condensed, and polysemic text by Monique Cournut produced in me.

It would first be worthwhile to underscore that the plural chosen for the theme of this book indicates the multiplicities of forms taken by homosexual object choices.

Monique Cournut, in writing about homosexuality in female adolescents, has chosen a suggestive title: “The same and the other”, that is to say, the pair identical/different. Her title, like a bright polyhedron, reflects multiple facets that illuminate our debate.

From the outset, her reflections consider difference as a basis constitutive of human beings: “The duality of the same and the other is worked out in the human psychic apparatus, externally by the sense organs, but also by internal messages which are transmitted by the drives”. This means that, from the beginning, perceptive sensory reality is conditioned by the subject’s internal world.
The anthropologist, Françoise Héritier (1994, p. 11), emphasises that in human societies “the way they construct their categories of the identical and the different” is fundamental.

If we accept that the principal function of the family group (regardless of its composition) is to produce alterity, this implies that both alterity and subjectivity require a construction that must be produced and is not given from the beginning.

Citing Winnicott (Rodman, 1987), Monique Cournut reminds us that in the beginning undifferentiation reigns in a time of original, fusional narcissism: before the emergence of desire, it is the time of need, of contact that is visual, tactile, and auditory, between the mouth and the nipple, enveloped in the same skin. It is the time of primary homosexuality as she reminds us, a time that precedes the difference between the sexes. This passage through infantile sexuality, and not only the child’s sexuality, is shown to be necessary for the understanding of movements that emerge again forcefully in adolescence, perhaps not only re-editing infantile sexuality under genital primacy as Freud affirmed (1905d, p. 207): “A new sexual aim appears, and all the component instincts combine to attain it, while the erotogenic zones become subordinated to the primacy of the genital zone”. The infantile of human psychosexuality remains in force throughout life as a substrate of adult sexual life. If there is primacy, I think it is achieved not so much because of the primacy of genitality, but because the anarchy of the drives is organised under the rule of the symbolic law of prohibition of incest and acceptance of lack.

As early as in pregnancy, as Braunschweig and Fain (1975) point out, the mother cathects the child in alternating positions: at times mother, at times lover, the Other is present from the outset. These authors state that the heterosexual other is, therefore, present from the beginning. Although I agree with them, I think that this idea could be expanded by not limiting the other to being necessarily heterosexual. I would consider the importance of the presence of an other which functions as a third party, independently of object choice, as a fundamental function in the construction of the child’s alterity. In this regard, I think it is important to highlight a passage in Monique Cournut’s chapter when she says that in the awakening of the erotogenic zones, of pleasure with oneself and in the encounter with the other, once this alterity is recognised, there is also recognition of the presence of the other’s other, not without rage and pain, but also with
the first pleasures of the exploration of differences. I would add that it pertains to a third party.

I do not know whether Monique Cournut thinks about it this way, but she does not mention the sex of this other. In this regard, I feel free to suggest that perhaps it is because difference, which is to say otherness, depends not only on the anatomical difference between the sexes but on the other, in that this other is different from oneself, a symbolic construction of a different psyche. As Green (1983) would put it, the other not only as alter ego, but the other as an other in its radical difference. When I speak in these terms, it is perhaps because I consider it necessary for psychoanalysis to start to think about how the difference works beyond the subject’s sexual identity. Although boys and girls identify with both parents, thus opening up to psychic bisexuality, as Monique Cournut points out, there is a primary homosexuality in both sexes that is feminine.

Monique Cournut reminds us that breast-feeding is not unerotic, and a functional splitting is necessary in the mother between the *jouissance* given to the infant during breast-feeding and the *jouissance* she gives her partner. In this regard, as I suggested above, I think that what is important to emphasise is tertiariness, the triangulation that opens the construction of alterity in the recognition of the other’s other. On this basis, the strange mathematics of psychoanalysis: to become one, we have to be first three and then two.

In our culture, Monique Cournut states, and I consider it essential, the sexual Other is the Woman. If the other is the discovery of the not-I, as an unacceptable foreigner, this first other is the mother’s body, even though the other is also the unconscious of this subject that is definitively divided and split. In any case, paradoxically, this first other is the mother.

The mother, that first seductress, in the words of Freud (in “Femininity”, 1933a, pp. 112–135): “it was really the mother who by her activities over the child’s bodily hygiene inevitably stimulated, and perhaps even roused for the first time, pleasurable sensations in her genitals” (p. 120). Monique Cournut is not afraid of her reappearance in the course of analysis, to the point that she says in the case of Louise, the erotic breast was constructed or reconstructed only when “it was in the presence of an analyst who did not reject Louise’s seductiveness”. She adds that “the transition through a period of auto-eroticism in puberty, underpinned by an unconscious homosexual fantasy,
turned out retroactively to be integrating a homosexual identification in Louise”. She proposes, not without audacity, that identification with a homosexual object is essential for acceptance of castration. Therefore, could homosexual object choice not be merely narcissistic object choice as proposed by Freud? Could homosexual object choice take place beyond or even deeper than narcissism?

For the adolescent girl, Monique Cournut considers the mother’s feminising regard is important, but the regard of a father who recognises her as a future woman is essential. Adolescent girls must go through a complex process of deconstruction and unbinding before any reconstruction or rebinding is possible. Loving themselves in order to take the risk of loving, in spite of the narcissistic loss involved in falling in love. Idealisation of the other, both in life and in the psychoanalytic process, always represents a risk for subjectivisation.

In the prolongation of sexuality theorised by Freud and later by the anthropologist Godelier, (2012), as Monique Cournut reminds us, there is no “normal human sexuality”, a proposal with infinite consequences and extremely contemporary with regard to modes of practising sexuality, with which I fully agree. We are far from the normativity of Krafft-Ebing’s Psychopathia Sexualis (1886), a long list of types of behaviour labelled pathological, which viewed the objective of sexual desire as procreation and that any type of desire without this aim was a perversion. Rape, for example, was an aberrant act but not a perversion, since pregnancy could derive from it.

Homosexuality, it is unnecessary to iterate, was considered a perversion until a short time ago, which assumed that the model of so-called normal sexuality that had to be attained was heterosexual and genitalised.

Perhaps we need to reserve the term “pathological sexuality” for cases in which a subject’s sexuality, unconsented to by the other, harms that other. Paradigmatic examples would be the case of rapists and paedophiles. Any other type of sexuality pertains to the private domain of the subject and his or her partner. A clear example is fetishism, the psychic dynamics of which induce the subject to be aroused by an inanimate object, the shoe being iconic, as so well described by Freud. This sexuality, after all, does harm to no one. From this stems the well-known joke that there is nothing worse for a fetishist than to have to confront a whole woman . . . which speaks of the contingency of the object in human psychosexuality.
Monique Cornut cites Michel Fain (1982), who considers the existence of different homosexualities and their place in psychic equilibrium, whether neurotic or not. For Dorine, her twelve-year-old patient, her regressive, anal erotisation was close to “A child is being beaten”, thus offering her erotogenic masochism. However, Ana alternated between bulimia and anorexia in what was interplay between introjection and expulsion, her pathologies not generating much concern. It was different for Véra, whose exploration of homosexuality included drugs that intervened to help her to avoid confronting the difference: “pierced by the syringe, the skin eliminates the specificity of the sexual organs as a place of exchange with the other”. This means that the practice of sexuality that is not autoerotic concerns the way the link with the other is established, although there is always a large dose of narcissism in any object relation.

As emphasised by Ternynck (2001, p. 24), no systematic correlation exists between personality and choice of sexual object. The homosexuality of puberty runs through structure and nosography. Sexual indecision, a relatively conflictive oscillation between the two poles of sexuality, is inherent in adolescence. As Freud (1920a, p.168) points out, “Homosexual enthusiasms, exaggeratedly strong friendships tinged with sensuality, are common enough in both sexes during the first years after puberty”.

I think that this is inherent to the interplay between narcissistic and object cathexis. In puberty, the acquisition of capacities for adult sexual life is potentially traumatic due to the destabilisation of narcissistic equilibrium attained up to that time. As Denis (2005) describes, this is a matter of “avoiding object cathexis in order to maintain a narcissistic cathexis perceived as indispensable for cohesion of the ego” (p. 126), the disorganisation of which would provoke a feeling of depersonalisation. He points out that the subject expects the other to exert a function reparative of his or her integrity, provide help and protection from the threat of ego disintegration in object cathexis, an unstable, oscillating balance between object cathexis and narcissistic cathexis. Denis considers that, during the period of latency, infantile sexuality preceding puberty remains active in the form of games and group activities out of the parents’ sight. This group sexual activity is marked, he thinks, by homogenerational group sexuality established against a background of sexual undifferentiation. This form of group sexuality is perpetuated in adolescence and even in adulthood.
This lack of difference between the sexes results from fear and depreciation provoked by the differentiation implicit in the sexuality of the couple.

Citing the opposition between Eros and Anteros proposed by Braunschweig and Fain (1971), Denis recalls that Eros represents the oedipal sexuality of the couple, whereas Anteros includes all group sexuality. The real opposition is no longer between Eros and Thanatos but between Eros and Anteros, derived from the name of the twin brother of Eros, who represents the love and desire that enflame lovers, whereas Anteros corresponds to the part of sexuality concerning group sexuality. The latter form of sexuality, Denis considers, escapes the oedipal prohibition and is regulated by the pleasure that each individual allows for him or herself. For this author, groups of adolescents often develop under the sign of Anteros: partners are not cathected in any stable or private way and encounters take place within view of the group in an undifferentiated manner. Therefore, we are looking at homosexuality undifferentiated in terms of sex, undifferentiated in that it manifests no motive for preference between the sexes.

The sexuality of the differentiated couple threatens the group and the cement that holds it together. The loving couple, “for all those who feel excluded has a persecutory value linked to primal scene phantasms with their cortege of feelings of abandonment and inferiority” (Denis, 2005, p. 129). Adolescent sexuality, and also adult sexuality, oscillates between these two poles of couple sexuality and group sexuality; the latter is most frequently inhibited and develops in friendships and social relations.

The same and the other. The object, all our lives, accompanies us, in happiness and torment. Object relation and identification are two modes that alternate, even in diverse moments of our everyday life, states Monique Cournut, thereby highlighting the paradoxical value of the other, in turn constitutive of our subjectivity and effective of our psyche because of its potentially traumatic value. The other, for Green (1983), as much as our drives, breaks open our psychic life and acquires traumatic value. Each of us may resolve them in his or her own way, but we cannot escape the psychic work required for this working through in human beings.

Homosexuality, the concrete quality of this term, refers to an object choice. For Freud (1920a)
The literature of homosexuality usually fails to distinguish clearly enough between the questions of the choice of object on the one hand, and of the sexual characteristics and sexual attitude of the subject on the other, as though the answer to the former necessarily involved the answers to the latter. (p. 170)

This is to say that a man with predominantly virile qualities may love only men, whereas men in whose character feminine qualities predominate and “behave in love like a woman”, may be heterosexual.

Freud adds, “It is instead a question of three sets of characteristics, namely: physical sexual characters (physical hermaphroditism), mental sexual characters (masculine or feminine attitude) and kind of object choice”. All these characters “vary independently of one another, and are met with in different individuals in manifold permutations”. Freud also remarks that the character of the object choice tends to be emphasised to the detriment of other characters, no less important, thereby closing the road to a perspective deeper than what is called homosexuality.

However, André (2005) suggests that “an analysis, in the strong sense of the term, with its implication of psychic change, may take place without the patient's sexual (genital) life being concerned” (p. 14). In analysis, it is a question of treating the patient's infantile psychosexuality, not his or her actual sexuality, independently of whether they may correlate.

For Freud (1920a), it is possible to understand the psychic interweave that leads a person to make a homosexual object choice *a posteriori*, in an exhaustive way without lacunae, but if we endeavour to go in the opposite direction, it is impossible to foresee the course of development in terms of what the object choice will be:

If we proceed the reverse way, if we start from the premises inferred from the analysis and try to follow these up to the final result, then we no longer get the impression of an inevitable sequence of events which could not have been otherwise determined. (p. 167)

In other words, biological sexuality, the determination of sex assigned by the parents and early fortuity determine the deep experience of belonging to a certain sexual identity from an early age. Homosexuality is the term coined. However, why not refer also to homoaffectivity? A term that opens, I think, to a more inclusive
choice of object of sentiments that may be involved in a link, and not only object choice from the simply sexual point of view of each subject.

In the case of homosexual behaviour in adolescent girls, affectionate relationships with their girlfriends may at times, or in a more stable way, acquire an erotic connotation that activates libidinal and affective capital through “shared auto-erotic activity” in such a way that is possible for a member of this type of couple “to experience the vitality of her feminine body by exploring the other’s body, experiencing it as if it were her own/not her own, simultaneously similar and different” (Ternynck, 2001, p. 25). This type of encounter might, in some circumstances, acquire structuring value. Ternynck (2001) maintains that, confronted by unsettling strangeness in puberty, the homosexual encounter in its mirror dimension correctly reinforces the narcissistic weave that might be defective. The mirror function proposed by a girlfriend, replacing possible maternal caresses, soothes the strangeness that may be confusing and stabilises a vacillating identification. However, this mirror experience is not without certain risks, since it could also generate the desire to regress to a fusional experience and awaken a desire for original symbiosis. This author proposes that in enquiries into the eventual transience of female homosexuality in adolescence, its value as a space to integrate experimentation with separation is recognised implicitly.

However, according to Ternynck (2001), it is important to differentiate the function of shoring up the adolescent girl’s own value in a neurotic frame from demands of reassurance of the feeling of existing in response to borderline or psychotic feelings of emptiness or non-existence.

Social customs certainly change, but “the feminine is still on the side of demand and the offer of love in both sexes”, Monique Cournut stresses, a somewhat enigmatic formula that I cannot unravel. The question is: what feminine is this? It is a vast question that Monique Cournut, prudently, does not venture to close. For a very long time, women and men were separated by the difference between the sexes; then the notion of gender arrived, concomitantly with the notion of masculine–feminine already advanced by Freud. There seems to be some confusion in our times regarding differences between the sexes; although the notion of gender contributed a new view, we now see a certain indetermination that questions sexual binarism. Although the
unconscious is atemporal, psychoanalytic theory is not, if it is to integrate the questions posed by our era into its theorising. We are seeing a mutative change the consequences of which are difficult to estimate. We have witnessed all the controversy unleashed in France with respect to homosexual marriages, which have already been approved in many other countries. However, beyond these sociological polemics, I think it would be interesting to be alert to changes operating in language. They will probably have an impact on the way we consider symbolic parental functions including the paternal principle, a term coined by Delourmel (2013, p. 107) in his report at the recent congress of French-speaking psychoanalysts.

The bill now proposed in France concerns the authorisation of marriage of persons of the same sex and adoption by homoparental families. The question that emerges is what these parents will be called, a change that will be registered in the Civil Code. In Argentina today, it is legally possible to be registered in the civil registry as belonging to the sex experienced by the person, independent of his or her anatomical sex. The notion of belonging to a sexual denomination moves increasingly further from anatomy. How, then, do we think about the Oedipus complex in these configurations?

Sex is an anatomical category and gender is an individual category that consists in the belief of belonging to one of the two genders, a belief that appears very early in life. There is a whole road travelled from assigned gender to assumed gender.

For Butler (2000), both gender and sex are performative categories realised in a language act. She also questions sexual binarism, queer sexuality, proposing indetermination as another possibility.

In the opinion of Dejours (2005), “there is nothing natural about sexual identity; sexual identity is rigorously phantasmatic as is infantile sexuality, and as suggested by transsexualism” (p. 63, translated for this edition).

However, “undifferentiation is suspicious”, states Perrot (2005, p. 19, translated for this edition). “It has a primitive, invertebrate aspect. An amoeba floating in the swamps precedes all evolution.” How may we think about contemporary sexual variants independently of historical invariants?

“All difference organises”, writes André (2005, p. 18), since it orders the polymorphism of infantile sexuality. He adds, “The Romans fixed the limit between activity and passivity. The English Victorians
invented the pair homosexuality–heterosexuality and now . . . it’s a bit confusing” (translated for this edition).

Recently, Faure-Pragier (2013, p. 5) stated that up to now, “procreating coitus, also called the primal scene, was one of the organising phantasms of the psyche” (translated for this edition). However, she wonders whether other representations might have the same function. She emphasises that symbolisation is a capacity of our psyche and not a consequence of actual family organisation. In her opinion, there could be a suggestion of a new primal phantasy that results in “a child made out of desire for a child”, independently of whether the child was adopted or procreated with medical assistance.

Freud (1920a) considered that psychoanalysis is situated on a common ground with biology to the extent that it adopts as a premise the primal bisexuality of the human individual, but he continues,

psycho-analysis cannot elucidate the intrinsic nature of what in conventional or in biological phraseology is termed “masculine” and “feminine”: it simply takes over the two concepts and makes them the foundation of its work. When we attempt to reduce them further, we find masculinity vanishing into activity and femininity into passivity, and that does not tell us enough. (p. 171)

Citing Jean Cournut (1987), Monique Cournut reminds us that the analyst must resist the temptation to educate, a resistance that screens another temptation, to be the double, become an adolescent, charmed and charming. For Monique Cournut, as for Freud, psychoanalysis, in particular with adolescents, is an impossible profession, and I agree. Yet, at the same time, and I am sure Monique Cournut will concur, it is a stimulating challenge.

References


As Joyce McDougall (1992) points out, psychoanalytic theory considers the homosexual component of the libido to be an integral part of every human being’s psychic structure. In *Three Essays on the Theory of Sexuality*, Freud writes that “. . . all human beings are capable of making a homosexual object choice and have in fact made one in their unconscious” (1905d, p. 145).

Vicissitudes of libidinal development blur what we mean by the terms “homosexuality” and “heterosexuality”, and further complicate the question of feminine sexuality. From the perspective of the mother–infant dyad, which forms the basis for later object relations, two questions appear as two sides of the same coin: why and how does the girl detach from her first object of desire, the mother, and find her way to the father? Also, how is the original attachment to the mother retained in a woman’s female object choice?

Keeping in mind the complementary nature of these questions, I would like to think about libidinal object choice in women and how the homosexual component of libido is integrated into adult personality. Starting with an overview of Freud’s 1920 article, I will examine more closely female sexuality and homoerotic desire through theoretical considerations and examples from literature and clinical experience.
Freudian considerations

Freud addresses the question of female homosexuality in his article, “The psychogenesis of a case of homosexuality in a woman” (1920a). This eighteen-year-old girl was brought to analysis by her father because of her romantic love for an older woman. Despite being quite open about her admiration for women, the girl had attempted suicide after being seen in the company of her lover.

Freud’s interpretation of the case reveals a complexity of identifications, and the patient’s object choice seems to offer a resolution at various levels. First, there is the girl’s ambivalent relation with the mother, who was far more gentle and giving towards her three sons. As a youngish woman with a past of neurotic troubles, the mother was, in Freud’s words, “unwilling to give up her own claims to attractiveness” (1920a, p. 149). According to Freud, by becoming homosexual, the girl was withdrawing from competition and retiring in favour of the mother. Reviving her earlier love for the mother, her object choice also provided a compensation for the mother’s current hostility towards her. As a result, she was passionately attached to a substitute mother, who gave her what the real mother was unable or unwilling to provide. So, in this case, the mother was never given up, but transferred first to other mothers and, finally, to a lady love.

The patient’s object choice was motivated not only by the wish to be loved by the mother, but also by a great disappointment she experienced during puberty. Her unconscious fantasy of having the father’s child was interrupted with the mother giving birth to her brother. After this disappointment, she had turned away from her father and from men in general.

Freud’s interpretation reveals that when the homosexual component of libido is in question, it is not a simple choice between an object or an identification. The creative resolution of the girl’s object choice preserves the complexity of her sexuality. The patient’s love object, who also resembles her brother, is, according to the Freudian interpretation, a complex solution, a fusion of male and female object choice, the expression of homosexual and heterosexual libido.

Mother as the primary object of love

The question of desire has never been an easy one. Freud himself devoted a considerable time to the complicated question of “What do
women want”. From a psychoanalytic standpoint, the first thing that a girl wants is her mother. The early erotic relationship to the mother is significant for both sexes, and the mother is the primary object for both the girl and the boy. For every child, the experience of weaning constitutes the primary form of object loss. Girls, however, also lose the breast as a source of sexual gratification. Unlike the boy, the heterosexual girl loses the breast and her mother as a sexual object forever.

In the beginning, the child is totally passive towards the mother who satisfies his or her needs. She is perceived as active and omnipotent. This is the mother whom a child originally desires and identifies with. However, as Elise (2008) explores in her article, “The primary maternal oedipal situation and female homoerotic desire”, the girl’s erotic desire for the mother is often unrecognised or denied. Unlike the boy, whose desire is acknowledged and then forbidden, a girl’s desire for the mother is typically erased and made invisible by society or by the mother herself. Following Butler, Elise says that “the daughter’s desire for the mother is foreclosed in a never-never land of the ‘sexually unperformable’—a possibility that can no longer be conceived of, and, thus, cannot be grieved” (2008, p. 214).

This denial, or repression, of the girl’s erotic tendency towards the mother leads to vicissitudes in homosexual as well as heterosexual female development. The mother’s denial of her own psychic bisexuality might render the girl a non-oedipal object. The heterosexual mother wants what the girl cannot give, namely, the phallus. Through this blow to the girl’s narcissism, the mother is also castrated of her previously perceived power. She is likely to be seen as lacking libido, power, agency, and activity. Then, the mother–daughter relationship could take on an angry, conflictual cast (Elise, 2008).

The girl is likely, although in varying degrees, to suffer a serious defeat in her first love affair and might register this defeat as due to her inadequacy (Elise, 2008). Developing a libidinal or narcissistic wish for the phallus, for herself or to possess the mother, the girl is then expected to reroute towards the father. Thus, castration complex leads to father identification in the heterosexual resolution of the Oedipus complex, and the active and conquering aspects of the libido are often given up.

However, turning to the father is not a simple replacement for the girl’s attachment to the mother and brings its own conflicted path. For
some women, the father then becomes an idealised object of love. However, idealisation could also occur without the father being libidinally cathexed. In such cases, women become overtly preoccupied with the meaning and implications of masculinity. A patient says, “The idea of being a simple woman fills me with horror. Women bore me to tears. I prefer masculine company.” Masculine identification may lead to homosexual or heterosexual object choice. The internalised father plays a significant role, but is never accepted as an object of desire. Clinical experience reveals that in the cases of overtly homosexual women, the father is neither idealised nor desired. Either he does not appear in the analytic discourse or he is described in terms of disgust. A patient says, “I cannot stand my father, the noises he makes with his throat and coughing.” Perceiving the father as an intrusive figure, she avoids closeness with him. The complexity of maternal and paternal imagos is revealed through different solutions in each case. In some cases, the idealised phallic image of the father changes into an impotent and castrated one. In others, such idealisation seems never to have taken place, due to the dominating maternal ego. It may also be the case that the father appears so dangerously seductive that he has to be excluded as a love object.

The varied oedipal make-up of female sexuality seems all the more incomprehensible in so far as we regard it solely through object choice or its changes. In his late work, “Female sexuality”, where he touches on the fate of pre-oedipal maternal attachment, Freud points to cases of heterosexual women who “remain arrested in their original attachment to their mother and never achieve a true change-over towards men” (1931a, p. 226). This insight is repeatedly validated through clinical experience with heterosexual women, where homoerotic longings appear as a motive behind the psychic conflict.

In some heterosexual women, homosexual fantasy is retained through a competitive attitude towards other women. A patient of Moss (Moss & Zeavin, 1999) is a typical example: having unsatisfactory relations with men, she is all the more preoccupied with having a man’s penis inside her. She feels incomplete without a man. Not having a man makes her feel inferior to other women, and when she is with a man, she seeks affirmation from other women. Affirmation makes her glorified, especially if the man is good-looking. The heterosexual fantasy of getting a man is linked to a homosexual fantasy in which she establishes an erotic tie with a woman. The case strikingly
points out the sense of inferiority or, rather, the narcissistic wound experienced by the woman. As the daughter of a family with three children, the patient thinks she is excluded by her parents. She feels that she is not good enough to attract the mother’s attention or to possess her mind.

Without the mother’s secure presence, gratifying sexual relations become intensely problematic for many women. Similar to Freud’s patient, they want something from the mother that is unforthcoming. As Elise (2008) states, “A mother’s heterosexuality, if it does not incorporate a healthy integration of homoerotic desire . . . can lead to a primal rejection of the girl, of her genitals and of her sexual power to attract the one she desires” (p. 220). Following the author, it can be claimed that the good enough mother would generally provide the sensual foundation for erotic desire to develop in a healthy fashion, for both heterosexual and homosexual individuals.

Interplay of femininity and masculinity in Virginia Woolf’s Orlando

Virginia Woolf’s semi-biographical novel Orlando (1973) remarkably depicts the complicated path of feminine libidinal development and its ties to the primary attachment to the mother. Inspired by Woolf’s female lover, Vita, the novel follows the protagonist, Orlando, the servant and lover of the Queen, through a period spanning from the reign of Queen Elizabeth to the Victorian era. Frustrated in his love affairs and literary venture, Orlando finds himself transformed into a woman during his service in Constantinople.

The first time we hear Orlando speaking in the novel, he says that he is alone. He is sitting under an oak tree, which is a highly cathected image and also the title of the poem Orlando struggles to write.

How Orlando discovers her femininity is a mystery in the novel. It is written, “nobody has ever known what exactly took place later that night” (p. 131). It is a night of revolt against the sultan and Orlando is robbed. Then, three figures come into Orlando’s room and speak one after another. In their brief speeches, the ladies seem to voice Woolf’s projections regarding femininity and motherhood. The first one, the Lady of Purity, tells the sleeping Orlando not to speak. Then the Lady of Chastity says, “I am she whose touch freezes and whose glance
turns to stone . . . when I walk, the lightnings flash in my hair; where my eyes fall, they kill” (p. 135). Finally, the virgin Lady of Modesty says that her eyes are covered and she cannot see. With the pressing voice of the phallic trumpets, the ladies cover Orlando with their draperies and leave. Meanwhile, the word “truth” is repeated again and again. The next morning Orlando wakes up with a form that combined “in one the strength of a man and a woman’s grace” (p. 138).

In my opinion, the novel playfully depicts a symbolic change of sex. However, it is also significant that the author makes a conscious effort to reply to such an interpretation. Woolf writes in the novel,

Many people . . . holding that such a change of sex is against nature, have been at great pains to prove (1) that Orlando had always been a woman, (2) that Orlando is at this moment a man. Let biologists and psychologists determine. It is enough for us to state the simple fact; Orlando was a man till the age of thirty; when he became a woman and has remained so ever since. (1973, p. 139)

As a character that transcends both time and sex, Orlando’s story seems to reflect primitive fantasies of omnipotence. The denial of the difference between the sexes is often pointed out as a significant feature of Woolf’s life and works. Here, however, I would like to concentrate on the fact that Orlando appears as a fusion of the author and her lover, also revealing the author’s longing for her mother.

In *Moments of Being*, Woolf describes her lover, Vita: “She was the whole thing; Talland House was full of her; Hyde Park Gate was full of her” (p. 83). Her descriptions of Vita to some extent resemble the phantasy of omnipotence of a child, who does not acknowledge the mother as a separate person. Woolf says in *A Moment’s Liberty*, “[Vita] . . . lavishes on me the maternal protection, which, for some reason, is what I have always most wished from everyone” (p. 203).

Merging fantasy with reality, *Orlando* appears as a playground for Woolf. In an entry in *A Writer’s Diary* regarding *Orlando*, she writes, “I want to kick up my heels and be off” (p. 104). We learn from her diary entries that the writing of the book is also an effort to overcome the unbearable feelings she experienced after the loss of her mother. According to Woolf, *Orlando* had helped her release from a haunting obsession with her mother. Again, in *Moments of Being* she says, “when it was written, I ceased to be obsessed by my mother. I no longer hear her voice; I do not see her” (p. 81).
Woolf’s mother had died when she was thirteen years old. The author’s descriptions reveal this painful experience as a loss of sense and direction. Death of the mother revives the experience of the infant separating from his or her mother. A short passage from Woolf’s *Moments of Being*, in my opinion, beautifully voices the pre-oedipal silence haunting the author’s mind:

Nothing remained stable long. One must get the feeling of everything approaching and then disappearing, getting large, getting small, passing at different rates of speed past the little creature; one must get the feeling that made her press on, the little creature driven on as she was by growth of her legs and arms. (p. 79)

Was Orlando or Woolf herself homosexual, bisexual, or intermittently heterosexual? Both manifest considerable variations in their object choices. According to the literature on Woolf, the author shows constant oscillation between attraction for father and seeking of mother. Shirley Panken (1987) suggests that the author mirrors the achievements of her father, who was also a man of letters and a biography writer. The feeling of unavailability experienced by Woolf regarding her mother or Vita may have mobilised masculine strivings.

Despite Woolf’s conscious obscuring of sexes, it seems striking that Orlando rediscovers and finishes the long awaited oak tree poem as a woman. For Orlando, poetry is “a voice answering a voice . . .” (p. 325). That might also be an answer to the question of what women want . . . As Elise says, following Benjamin, “. . . women want to want, to have a sense of agency and desire – sexual subjectivity” (2008, p. 212).

Psychoanalysis teaches us to regard sexuality within the context of a person’s psychic experiences. We need to keep in mind the Freudian idea that all sexuality is grounded on disappointment, our genitals are inadequate, and our objects are unavailable.

**References**


CHAPTER EIGHT

Inside Sisyphus's nightmare: destructive narcissism and death instinct

Raquel Cavaleiro Ferreira

Joel was thirty years old when he first came to see me. He called me about nine years ago, with a sense of urgency in his voice, telling me his analyst had sent him to me because he needed to work with a female psychoanalyst. This seemed somewhat strange and my first impulse was to say no. However, I noticed a kind of hopelessness in him (behind a polished and cold voice), which meant he expected me to say no. Something about that made me reconsider this refusal.

Joel was a vulnerable, pleasant-looking young man, although very short-sighted. He dressed formally with attractive and well-matched colours. He thanked me for agreeing to see him, but told me that he did not have much hope, if any. He felt that he had been sent away by the other psychoanalyst but did not want to talk about it. Since the age of twenty, he had seen various therapists without results. He knew that he always chose male analysts and could not see why he would do better with a female analyst.

As we spoke, he looked at me as a resource that he could use. From his demeanour, I assumed he believed his look would have an impact on me. At the same time, he tried to keep a fluent and intelligent conversation with me, doing his best to cover any hesitation or silence.
He demanded analysis because of my profound impotence and total lack of interest in anything or anybody. (Text in italics are the patient’s words.) Ever since he was a child he has been consumed with the need for great success in his career and life. He was desperate for power and to be able to take the lead and demand the respect of others, but felt threatened by humiliation and solitude.

He had already conquered some successful career achievements. The problem was his lack of satisfaction, because when he achieved what he wanted, he realised it was not what he wanted after all. When his attempts to conciliate and placate his feeling of failure and dissatisfaction with himself and others increase, he starts to react. He feels it as a provocation and begins conflicts with others, resulting in his dismissal or resignation from his job. Why? Because he could not be told what to do, or to run errands for other people. He then tells me that the same thing happens in his sexual life. I have always been homosexual and I see myself as paralysed and totally decadent. In critical periods, when he feels inferior and rejected, his sexual adventures increase and his relationships become numerous and promiscuous (through Internet sites). He has been haunted by death images. That’s why I come here . . . Perhaps I want to die in order to kill what I do not like about myself: my body, my morality or lack of it . . . my soiled past.

I felt in him an insatiable desire to be aesthetically and intellectually appreciated, but also a contradictory feeling of existing as a non-existent person. Nevertheless, in spite of feeling imprisoned and lost in this misguided search, he then had a certain strength and hope in himself, although unconscious, that led him to try a psychoanalytic process again. I hesitated to take him into psychoanalysis, especially because of the risk of suicide. At the same time, I noticed that the patient, having already failed various attempts at therapy, had not given it up. This signalled a certain ego strength.

His story reconstructed during the analysis

Joel describes his childhood as very dark, sad and lonely. I never had what I wanted. He lived in a suffocating environment with his aged, inaccessible, lower middle-class parents. His twin brothers were nineteen years older and he always felt them to be very distant, although he admired them because they were older and free; there was also a baby who was
supposed to be born six years before me but my mother had a miscarriage. In his mind, he had been born because his parents very much wanted to have a daughter; his mother repeatedly complained about almost dying giving birth to him. For the rest of his life he tried not to disturb her. Many times he would have liked to go outside and play with other children but did not because his mother would be upset or sad if he got dirty.

I wanted that, I preferred to keep my looks clean. I remember spending hours at home wishing that my friends would visit me, wishing to have new people in my life, but I never admitted these feelings because I thought it was weakness. About his father, he said, He always looked sad, stiff and grey and my mother looked sad because of my father.

His father, belittled and humbled by his mother, became the object of Joel’s violent indignation, especially when he sank into a depressive state. Joel was four years old at that time.

The patient was a sickly child. He describes himself as a very shy child. Joel considers himself to be homosexual from the age of eight. At the time he craved for sweets constantly and claims to have put on weight, the reason why his mother got angry. During adolescence, he felt a platonic attraction for some schoolmates.

His father died of cancer a short time before Joel began to see me. He told me, But that’s not why I came to see you. My father and I have been very distant for a long time and so I felt very little. My father was already dead before he died. Alienated from his father, he could not mourn him.

The psychoanalytic process

The analysis began eight years ago and continued three times a week until a few years ago; after that, we had four sessions a week until the present time. This was difficult because, among other aspects, in his previous therapy he had only a weekly session. Joel found it difficult to understand the need of four or even three sessions a week.

The beginning of analysis was very frightening for him. Joel brought to the sessions a very organised and prepared mental agenda. Devastated by insomnia and compulsive acting he enumerated, almost endlessly, lists of to-do subjects (work, sex dates, shopping, tidying up). These lists always seemed to occupy his mind. Joel talked to me but not for me. I felt there was no room left, even though it
seemed that analysis was not an issue for the patient; he needed to protect himself that way. When, at this stage, I introduced any simple word, immense agitation and anger would burst out. I felt he was like an anguished baby looking for someone’s lap and not finding it. I also realised that the words he used frequently expressed a perverse technique: could you please tell me what to do so I can do it. He planned some perverse actions, like an artist who wants to make an idea real, feeling despair and alienation when it did not work.

The patient’s narcissistic disturbance was linked to insufficient primary containment. He felt great helplessness since early childhood. He perceived the parental couple as empty and lifeless.

He was not intimidated by large amounts of work, but was easily dissatisfied even if others appreciated it. He always tried to placate himself, but when he failed he seemed to need to be provocative. During the first year of analysis, he worked in a multinational corporation enterprise and should have written an urgent report. However, he did not, because he did not want to give his paper to an odious and incompetent boss, and whiled his time away looking at pornography on the Internet, in spite of knowing that the administration surveyed its usage. Confronted with his behaviour and fired, he sued the corporation out of pure hate and in order to have a negotiating margin and to feel indemnified: I cannot stand to feed the others.

Frequently, Joel spoke of his compulsive sexuality since childhood, connecting it with his homosexuality and his feelings of humiliation. In critical periods, the homosexual acting out was intensified in numerous promiscuous contacts made through the Internet. He was only interested in body image and only wanted clean sex (disconnected from affection). Afterwards came emptiness, disgust, and then hunger. Joel was frequently assaulted by death thoughts.

He tried to hold on to the relationship with his mother. After the sessions, I felt very sleepy and hurried home to rest, and to talk to my mother about what we had talked about in the session. Indirectly, his mother opposed Joel’s analysis. She told him he was sadder, worse. She made him various appointments with psychiatrists, neurologists, bio-energy therapists. Joel scrupulously went to all appointments, completed the suggested examinations, began treatment, and then left.

In a session, after an interpretation where he tried to deconstruct some confusing paradoxes that appeared in the transference, and while talking about feeling unsatisfied with his life, Joel said,
I feel stuck [breathing with distress]; I don’t know which path to choose. If I go any deeper, I don’t know if I like men even though I was never interested in women. I feel you understand me, but I don’t think you can feel what I feel [he moaned], because I won’t let you, I am afraid of disintegrating or, even worse, that nothing is left if I let it happen. I feel desperate, dying, even if I understand that it’s ridiculous.

Childhood memories appeared in a dense atmosphere between dream and reality. He then remembers a story told in the family, of being about eighteen months old when he got lost on an immense sandy beach. He also speaks of another early memory, of having left his grandparents’ village when, as an infant, he travelled to America with his parents, because of his father’s job. His maternal grandmother was left behind. Joel seemed to adapt well to the change, being a healthy baby, but three months after arriving he suddenly became ill. For three days he did not eat or sleep, had a high fever, and cried desperately. His mother later told him that she only understood what was going on when she got a letter informing her that her mother was dead. Thus the myth that Joel was a prodigy, able to predict death, was born in the family.

I realised that Joel’s mother, his idolised self and internal object, removed in large part the possibility of him cathecting relationships with others and himself. I could understand the weight it represented for the patient, feeling obliged to be in between mother and analysis/analyst, a dilemma which could annihilate him.

The patient began frequently to bring dark dreams to the sessions, where he saw himself as persecutor or persecuted, in a sombre and disturbing atmosphere, where evil was irresistible and perceived as a still image interrupted by a terrible, shapeless threat. I interpreted it by relating the excitement caused by the destructiveness of the dream figures to the disturbance felt in the dream, which made it impossible to keep on dreaming. When the patient was able to discuss his dreams, eventually linking them to his childhood nightmares and interrupted play, he would become paralysed by angst.

I was looking for open interpretations that stimulated his curiosity, in order to allow the opening of the analytic field to emotional language and narrative transformations within the session. He said,

When I look back, what’s clearer to me is how afraid I felt. I was very afraid of being rejected and of being myself. How could I play? My mother made such efforts to make me beautiful and if I got dirty it would mean more
work for her. I think I feel the same now at work . . . An image scares me. I imagine myself mutilating, making a deep cut in my neck. [He repeats the sentence, but in a cold, mechanical tone; criticising his mother immediately brings up fantasies of mutilation and death.] I don’t know when this started but it was very early. In school, when I wasn’t the first I couldn’t even stand up. I would sit and cry. In high school things only changed when I started to make up stories that made me grander.

Once Joel, frightened by the power of his perversion, fell into a state of acute agonised distress when his boyfriend, A, suddenly left him, ending the relationship, after having been deceived several times.

His mother’s sudden death of a severe heart attack left him in deep suffering and self-hatred. He felt immensely deprived and abandoned, and reacted by torturing those around him, and himself. Dangerous acting-out intensified the self-mutilation; the pleasure of inducing risk simultaneously appeared—road rage, car accidents. Suicidal ideation increased.

I felt that Joel’s agonised state, a state of nameless terror, was beyond what he could bear. The identity crisis and wounds caused by his mother’s death activated guilt feelings: I should have guessed, suggesting a cryptic identification with his mother.

He tried to hold on to the fusional relationship with her. The severity of this depressive conflict was very significant. He found it very difficult to come to terms with the reality of his mother’s death. Joel did not speak openly about it; however, I became aware of the fact that he was consulting a clairvoyant in order to establish contact with her. When he realised that he was being wronged, he became very disillusioned: It’s all rubbish and trickery.

Joel then told me he was living in his mother’s house so that it continued to be lived in and would not deteriorate. He felt very distressed. The house was not large and, in order to make space for his belongings, he had to pack away some of his mother’s and his own. This dilemma often caused him to feel exhausted and unable to do anything; he felt in panic and on the edge of chaos. Death and destruction fantasies led him to the cemetery on rainy days: in order to feel what my mother would feel underground, lashed by rain. Afterwards, he felt like an idiot, because he was not able to find anything, not even her ashes, and also because he realised that his mother could not feel anything any more.
Having to share his inheritance from his parents with his brothers proved a great difficulty. His brothers were interested only in money and wanted to sell everything, including estate and houses. Joel found this unacceptable because these things were important for his mother and he wanted to protect them. So he decided to keep everything and pay his siblings, which caused him considerable financial stress. This also brought on very violent destructive feelings towards his brothers, the world, the analysis, and himself. He felt he should safeguard the non-destruction of his mother’s world, in order to keep her alive. His feeling of guilt became very intense and unbearable, his superego and ego ideal extremely harsh. At the same time, he felt imprisoned and ruined by a life he did not want to live. Even moving a simple object that belonged to his mother, for example, a tea cup, brought on deep feelings of guilt and sadness. The presence of his boyfriend, C, with whom he shared the house, was at once very necessary and unbearable. Joel saw himself as a zombie. He felt dead like his mother. He fought to preserve his mother’s world to the last detail. If a plant in his mother’s garden started to wilt, even if it was a plant that he disliked, he felt an immense terror. To avoid this, he carefully watered the plants, fed them compost, and asked the gardener for help. Everything ought to stay as it was. Countertransferentially, I was immensely afraid that he would not survive. I often felt as if I was working in an intensive care unit, fighting daily to keep Joel alive. I often thought that five or six weekly sessions would be much better. I was touched by the patient’s melancholic depression and his determination to fight against the feeling of distress that enveloped him.

One day, Joel said he had moved to an office very close to mine. When I was not in the sessions, I started to experience an intense feeling of imprisonment, which left me suffocated. However, during one session, as I listened to Joel, I suddenly started to relive an experience of my own personal analysis. On that occasion, I had become very aware of the breathing of my analyst, of the atmosphere of the room in his house, and of those moments in which he was becoming sick or feeling very sad. Later, I thought about how this empathy with my analyst had helped me during difficult periods. I gradually became aware of Joel’s need to feel my presence. I realised that, more than an imposition of the patient’s destructive narcissism, it was an immense, anguished call that his infantile libidinal (and dying) self was communicating to me; subsequently, I became so sensitive to our inner
rhythms that I began to feel disturbed. At times, I felt and watched myself while feeling that we were breathing and moving as one, as if I were pregnant. At other times, I anticipated his gestures and words. I began to realise that Joel needed to materialise this reality, by existing physically in osmosis with my breathing, my rhythms, my voice, my being and the other babies (the patients) who shared my space.

I realised that Joel, in close identification with his mother and, thus, feeling moribund with her death, transposed to me his fantasy of being carried by his pregnant mother. On my side, I felt pulled into an oneiric state, where this shared experience was, at a certain level, impossible to formulate. It was as if, unconsciously, Joel and I were weaving a lost part of his self, ingrained in the object, and processing a bio-psychological micro-recognition in order to enable him to stay alive.

I cannot state with certainty the kind of reconstruction that took place, but there certainly was an alphabetisation of beta elements, made possible more in the sequence of deep emotional experienced movements than in verbal interpretation. This enabled him to experience the reality of my living presence and not feel abandoned. At the same time, this external movement was perhaps crucial for Joel to achieve a perceptible representation of his internal reality. My presence seemed to give him certain tranquillity. Later on, he said he had started to recruit people for a team. For the first time, he made an attempt at teamwork. He selected a woman and two men who did not have a great deal of experience but seemed competent. He was aware that he had selected them mainly for their personality. For the first time, he felt that he was working with the team and not against it.

He talked to me about consultancy work, financial engineering, business evaluations, and his desire to purchase a factory. He could not say no to anything, and ended up doing much more than he could handle. When asked about the history of the business, his qualifications and experience, he felt the need to create a fiction bigger than reality. Three months later, Joel informed me that he would be moving and that his office would now be in his mother’s house. This was a way to keep his mother alive and safe; a difficult decision to make, for he did not want the house to be closed up and start to deteriorate, but at the same time he did not want anyone to tread on his mother’s sacred floor, not even himself. He even bought an elegant, thick carpet to cover the floor. His different houses made me think about scenes
from his dreams, of how, in an external or internal world, he continued to perform for me. I reflected that, although Joel was making a narcissistic investment in himself, he was also investing in himself in another way. That is, by mirroring the analyst and investing her with a narcissistic form, he was investing in himself through the object.

This malignant self-destructiveness had always been prominent throughout the analytic process. In the transference, it became evident that it was irresistible for Joel to withdraw whenever he felt something good happening. Masochism appeared almost always related to feelings of greed and perfectionism. Deeply wounded by his objects, he demanded perfection. I felt his despair and feared a suicidal acting out. The struggle between the will to live and the will to live with his dead mother, forever in a dead, deadly world, implied and still implies a devastating tension.

The following three sessions took place recently in the same week.

**First session, Monday**

*P*: Today I’m totally disconnected. I do not remember anything from the last session . . . I do not even know if I was ever connected, I do not think so. Maybe because I got frustrated, and I had to rush to do my stuff. It’s so unpleasant, but it’s the only way to put up with this.

(I remember the transitional objects from his childhood, seen from a distance because they were kept tidily in a closet, his parents unable to consider this child’s wishes, but also the way he himself deals with this in analysis. Upon realising the importance of playing, he considered games were things of no importance. He did not care about his toys or other children. I see this as a way of diminishing the importance of his relationship with me, but also an attempt to deal with separation and loss caused by the weekend.)

*A*: Disconnecting both from analysis and me becomes easier than feeling the connection in my absence.

*P*: I try to connect; but it seems so hard to me that I back off from it.

Tonight I had a dream that was very light. I tried to remember it even during the night, but I forgot it afterwards. In my dream there was a party, maybe my mother’s birthday party. There was a grand reception room, balloons, and many people I did not know. I was with C,
inside the room, looking for a store location. It was strange to search there, in that huge space that kept changing. The floor had a Gaudi something on it. It was made of jade leaves, in hues of green and pink.

Then someone fell and died in front of me. I forgot almost the entire dream, but I do not ever remember so much colour or festive atmospheres in my dreams. I did not feel very colourful in it, but I’d like to remember more; I felt out of place, the store space was almost ridiculous. I had no room, but I did not want it anyway because it was overly ornamented and organic. I could not possibly get anything in, and did not want to be there. It was too kitsch.

When I woke up, I could feel the poetical possibilities of the dream. There are parties but I do not get in to them. In the dream, my mother was very involved with the party, and there I was, looking for a store, the room I did not have. I felt uncomfortable, as if part of me was missing. The person who fell looked like part of me, or maybe I was killing it. Even someone like C would suspect I could have killed that person. Maybe the fear will lose me.

[Pause.]

(I felt touched when Joel began telling me about this dream of colours and parties, whose importance he himself spontaneously recognised. Then I thought about the meaning of only having a small room in a huge party, a ridiculous room, a roomless room where he felt withdrawn and out of place. Killing his observant part or letting himself be killed by it, the rage and hate felt by the fear of losing both his mother and his analyst. I reflected on his feelings of solitude and emotional helplessness from a very early age, but I also thought that in this dream there was finally colour, there was room to grow.)

A: You were able to dream a vivid, colourful dream where you were celebrating your mother’s birthday. But it seems you felt you only have a ridiculous little space for yourself, maybe a voracious part of you attacking the other part you feel as dying, sad and lonely.

P: I’m satisfied with the change in my dream, but sad because I can’t feel the party. I think I have an inability to feel festive. I feel sad and lost.

A: As little Joel did, feeling parties were not for him.

P: Talking about my past is very deceptive. I can’t find anything constructive about it. There was no party. I was too fearful; maybe the guilt was no one’s, but a flaw of mine and I should adapt to it. I dream of breathtaking things and great causes, but I always thought that it
was a mistake. I was unbearably conceited. My parents were different. It feels like destiny. There’s something external or internal I could not understand and was often unbearable. The party makes me feel like the sacrificial victim. I think about my desire to have children, and after I think how foolish it is. With my work, my projects, it’s the same. With a loving relationship, it’s the same. I feel hurt by the way I see things. Maybe I am afraid, as happens in the dream, of placing my feet on the ground and falling on my head, ending up dead.

A: And that terror ends up chasing you.

P: That’s not my biggest fear; my biggest fear is of losing my image. But what worries me now is the absurdity of this authoritative harshness.

A: Your fear to see what you see brings to mind Andersen’s fairy tale, “The emperor’s new clothes”. Only the child, or the infantile parts of your mind, sees what’s there to be seen—but the mind is forbidden to see anything out of deference to the emperor; the impostor part of your mind wins.

P: (a little smile) It’s true.

Second session, Tuesday

P: Today I was dreaming as the alarm clock rang. The dream was very close to reality. C and I had been working until midnight in real life. In the dream we were at the hallway of a building, and we saw a security guard go by . . . I am making an effort to reconstruct the dream because I can’t understand the way I woke up. Maybe it’s related to the dream, but it’s the awakening to a harsh reality where everything looks bad, even analysis. It’s like waking up into a numbing state that I myself create. It’s looking sideways and seeing C, thinking I did not want him there. Not feeling any affection for him, or thinking about how he’ll live, moneyless, when I leave him, or thinking about my work and the uselessness of these long nights, pretending to do something so as not to feel the pain. This is numbing but it’s so real! Today I do not feel like being here. There’s something in me that feels repulsion for the analysis. This is hard for me. (I feel Joel’s suffering is being used as a means of triumphing over the analysis, over me, and over his developing self. The patient continues his masochistic game of expelling his life-seeking self.)
A: Maybe you feel repulsion for the analysis and for the suffering it causes.

P: You say it as if it’s deliberate, but it’s the truth. It seems more real to me, even more exciting.

(Again, the sadistic, destructive resistance, submitting him to the slavery of this invasive, sinister part of his mind where he, by projective identification, deposits his pleasure and power.)

A: Why?

P: It does not bring me anything; it takes it all away from me. [Pause.] As in my dream. It seems that I’ve been at it all night, maybe I could find a meaning but I do not remember the dream very well. I remember a blond boy; he was looking at himself in the mirror. He was sitting cross-legged as if he was posing. He seemed to have had plastic surgery and was checking the result. C and I had left the meeting and were just looking. After that, I see a man, but from where he was coming he would not open the door to us. Then the security guard shows up with more people and I woke up.

(He and the other in the dream, the other whom he sees as his own mirror-image is, on the other hand, also looking at itself in the mirror in a nearly infinite succession. But still there was a difference: the double was the same, but looked at him strangely. Who was it who did not open the door?)

A: Did you recognise the boy in your dream?

P: I do not know . . . I really do not. My feeling is that I was looking at him, observing his gestures, looking from head to toe and thinking that this guy was worth nothing. [Pause.] It could be a lot of things, me and my concern about my body image. He had an unpleasant face. I evaluated him, as I evaluate people, out of the wrong criteria. Of course he had a lot of me; it was almost identical. I could be aiming to be a mirror-object. In fact, what happens in my life is a reflection of what I am, something going nowhere. Something that intellectually does not seem like it, nor does its physical appearance, but at the end is sterile. I’m nothing.

A: A fate that you repeat out of the fear of change.

P: Because I am that destructive part of the dream, when forced to (in the original: to be pulled out using a forceps, as in a birth). I end up going towards destructiveness. How do I stop this? I feel repulsion, contempt, and nausea, watching the dream boy.
A: Do you really feel you are that representation, in spite of feeling contempt and nausea?

P: I suspect I am becoming parrot-like. Maybe I feel that doubt because, in spite of the surgery, he was ugly. Deep down I do not know if this is not always a lack of image. Why can’t I feel myself in the things I do? Why do I want things for which I have no skills? Is it why I feel there’s a mental boycott? I try hard to build a body of work that means something. But the more frustrated I feel, the more I feel the appeal of the image. [He moans.] I feel it to the point of self-mutilation and after that I pretend nothing exists. It’s a moment when everything seems to be stuck. Yesterday, lying by C’s side, I felt paralysed. I felt desireless, not in my skin, and putting up with things that mean nothing to me. I thought about my analysis but I did not want to bring that here. I looked at a book placed on my bedside table that has been lying there for months, without me reading it. I thought, This is what I do in my life.

A: You mention a parrot as a form of automatic speech. But you want to understand that part of you that strays in yourself.

P: I drag things but never know where the load, the resistance, is. The load is the effort destroying me, a load I try to keep; it is obvious to me now that every path seems strange, and I always follow the same one and if I leave it I feel everything will collapse; I am afraid to begin anew. But there is nothing new and everything repeats itself. Maybe I’ve learnt image is the most important thing even though I know it is not. In the beginning there was something worse: the need, the affliction, and the hunger that will make a dog eat anything. The mistake begins there. After the image there’s no need to flee. It’s paradoxical because at the same time I find it very important but I think it’s immoral to disclose it . . . two contrary positions, both excessive. I have no reason to think this obsession is criminal, but I do not even realise it.

Third session, Thursday

[Silence.]

P: We seem to have interrupted for months.

A: It’s odd, your feeling, because it’s not a feeling that comes from a process that ends. It seems more like an escape.
P: It’s not true . . . Tonight I remembered a dream and it was interesting because I felt connected. It was about the old city, where something had happened but I do not remember what. Yesterday, when I finished work, I saw a film, *Kramer vs. Kramer*. It stirred a childhood memory in me. I remember it was the first time I was home alone, my brothers were not in, and my parents had gone to the cinema. I’d never seen the film, but I remember the emotional tension I felt in my parents when they got home. The film reflected the break-up of a couple and the fight over their son’s custody. I do not know if it was because my parents were considering a separation. For me, having seen the film now made me think about the frivolity of my thoughts; I think that a few years later my mother did not leave home because she did not have the circumstances to take me, and she did not want to leave me alone with my father because it would be hell to me. I understood and speculated in my mind; to speculate is useless.

A: Useless speculation, when it allowed you to get in touch with the little, angst-ridden Joel feeling the tense atmosphere between his parents?

P: It’s gratuitous. I do not even know if it’s true. It’s what I wanted at the time; a few years later I did not even think about it any more. But it’s odd; it’s a shame that a film might have determined the life of a family. I’m sure it has generated a hesitation, and that hurts me. It hurts me that my mother did not go on with her life because of me, and that everything has turned out so sad. I feel there’s a handicap in me and that I am condemned to this.

A: It is odd to consider that the handicap is in you, it’s your feeling—that you feel condemned to live in that shallowness. You do not go in. Could that child want to be alone with his mother?

P: That paralyses me and I want to free myself from the past. I must tidy up that past. I can’t dispose of it, but it hurts to think about it. It’s not fair.

A: Is it not fair? The little boy in you seems to feel lost and fearful.

P: It’s not clear to me; I wanted to be with my mother. Only later I thought that it would be difficult for that to happen; how would we live? I remember that I was in the middle of my crisis with A, my mother was living with us, and one night she confessed it to me. It was such a sensitive moment that I could not say anything. Coming close to that, even now, is a sort of blasphemy.
A: You talk about blasphemy as if some of your feelings and thoughts are taboo.

P: In some areas they are and I do not know how to handle them. In most cases they are shameful, like my parents’ divorce . . . I remember being home with my parents and peeping through the keyhole when they had locked themselves in the bathroom. I do not know how to explain what I feel about that. My wish for non-exclusion is wrong, mostly because it shows that I’m obscenely hungry. I can’t explain why my desire for connection or to not be alone is something mean and shameless. It’s true, there’s an emotional part of me I do not get; I’m a creature that wishes for inclusion so intensely that I dream with another form of connectedness, one with more affection. At the same time a part of me wants none of that and finds it ridiculous. I do not know if it is because I feel feeble, and I think it has been like this since I remember myself.

A: Because you felt prevented from living love.

P: Yes, hence all the work in order to be more autonomous, stronger, harder. All lies, all artificial. And even nowadays I am fascinated by the coldness, and worried sick with what I feel.

(I thought about the terrible weight he dragged for being the prodigy baby that announces his grandmother’s death, but could not foretell his own mother’s death.)

A: Thus entombing the love you feel in order to be closed in the coldness of death.

P: A side of me feels aggrieved by that because I do not live with my hunger and my dream. I do not know . . . it comes from afar. A great part of my destructiveness comes from that bad relation. If too much of a dream emerges, a great deal of destructiveness arises. I felt a surge of emotion because of the film but I immediately wanted to crush it because of the pain it caused me, and its inappropriateness.

To conclude

Writing about a clinical case is particularly difficult, since it demands the capturing and reducing of what essentially happened throughout years of analysis.

This patient’s personality was dominated by a destructive narcissism and perverse functioning, due to the character of the primary
objects and a failure of the primary containment. Omnipotent fantasies, having subsided, twisted his experience to such degree that reality seemed to conform to his deliriform psychotic experience. This organisation took him to a certain degree of retraction of the self and to a sexualised refuge, to the use of the body as a masturbatory object and a means to fight depression. As an adult, his sexual partners were mostly anonymous, found through virtual searches and disconnected from reality. The emergence of dreams was a turning point in the patient’s analysis. Afterwards, his mother’s sudden death triggered a brutal reaction, causing a psychotic plunge, rupture, non-containment, and a serious risk of suicidal acting.

The dependent part of the self was subject to an enormous pressure to ignore truth and insight while the destructive side of the self, dominating the personality, immobilised and destroyed the healthy parts. The patient was able to reach them but, having been split and projected into his objects, they did not seem available; deeply rooted in envy, they were often shadowed by idealisation.

Through the analysis, the patient is becoming more integrated.
Raquel Cavaleiro has reflected on multiple issues that arise in the transferential–countertransferential process established between herself and Joel, a patient with a narcissistic identity disorder. Joel had been marked by early narcissistic traumas that resulted in extremely difficult work for the analyst in the transferential–countertransferential space.

As it is impossible to comment fully on the complexity of a case that surpasses all that could be said about it, I have privileged my reflection on some of the sexual characteristics of the patient. Joel considered himself to be homosexual. I will centre my discussion on certain aspects of his sexuality, a sexuality that operated as an act of compulsive discharge and was of a defensive nature. I will also reflect on the status of the object of discharge and its relationship with the primary objects, which was essentially incestuous (Racamier, 1995).

Death drive

As the three analytic sessions presented by Raquel Cavaleiro indicate, Joel had gone through a melancholic crisis after his mother’s death.
From the beginning, he seemed to be prisoner of a fortunate contradic-
tion, highlighted by the analyst. If this contradiction had not
existed, the patient would never have had the opportunity to undergo
analytic work. On one hand, he wished to stand out aesthetically and
intellectually and, on the other, he felt like a “non-existent person”,
without being able to communicate and longing for solitude. What
had driven him to analysis was precisely this dread of no-relationship,
“disobjectalisation” in André Green’s (2005) sense and “desire for no
desire” in Piera Aulagnier’s (1975) sense.

Green (2002) defines the relationship between death drive and
narcissism as “negative narcissism”. It consists of an aspiration
towards zero and is an expression of a disobjectalising function the
shadow of which falls on the objects and over the objectalising process
itself. The disobjectalising function radically opposes itself to grief and
aims for the return to a primary state of fusion with the object. It is a
question here of a destructive form; destructivity refers to the elimi-
nation of the objectal narcissism of oneself and the inner self.

Aulagnier (1975) has made a very rich contribution to the concept
of negative narcissism. She highlights the fact that in an inevitably
violent encounter between the psyche and the world, a minimum of
pleasure is required to ensure the cathexis of the representation activ-
ity. When the object of desire entails displeasure, a split takes place
and the individual desires to have no desire, as well as the disap-
pearance of an object that could provoke it. It is another way of inter-
preting the death drive.

Narcissistic perversion

Joel remembered feeling he was homosexual since he was eight years
old. Which homosexuality is the one he presented to us? His homo-
sexuality, which concerned a pre-genital sexuality of perverse nature,
can only be understood if we take into consideration a person marked
by early traumas and imprisoned by the dread of disintegrating.
Eiguer (1993) defines narcissistic perversion as eagerness for veneration,
as is the case here. It constitutes a perverse modality in a narcis-
sistic organisation. The acting out lacks pleasure and protects him
against the perils of ego disintegration. A perverse narcissistic indi-
vidual experiences pleasure through the other person’s alienation, in
a specular fascination. However, it is a fragile pleasure to the extent that it is permanently dependent on the other person. The other, by imposing his or her desire, can lead the individual to the edge, to the depths of helplessness. This is what happened to Joel every time he was aware that he criticised his mother.

His sexuality was characterised by a particular aspect in which the object was of almost no significance, and sexual satisfaction became a secondary matter, compared to one of greater importance: the narcissistic satisfaction of existing as a psychological individual and, therefore, of being able to accomplish the necessary differentiation. Joel manifested a perversion that was not erogenous, but narcissistic. His aim was to be worthy and to be able to exist; that is to say, his aim was not sexual, although certain aspects of sexual perversion can be inevitably associated with it. Joel would be in that group of patients nowadays considered as “difficult cases”. These are patients whose pre-genital forms of sexuality should be scrutinised.

We can see how, in the past two decades, sexual polymorphism has been recovered as a potentiality and is not regarded as an imperfect and unfinished stage that needs to be perfected. Pre-genital forms of sexuality and their meanderings allow us to widen our psychoanalytic comprehension of severe cases. Today, we try to identify which are the motions of desire in these individuals. In Three Essays (1905d), Freud had already stated the autonomy of object choice in a homosexual or heterosexual subject. The analysis of early traumas requires the study of new identifications and new defensive systems that have been established in the person. Ferenczi’s theory has nothing to do with the early Freud, who details a poorly built triangle, where the mother fools her son who, for his part, allows himself to be fooled by her.

Racamier (1992) highlights two driving forces that characterise narcissistic perversion: first, a narcissistic seduction derived from a primary narcissistic seduction which concerns self-veneration with the goal to interdict all desire in the other, and, second, a defensive need that the narcissistically perverse individual puts to work against the grief process or against internal conflict. The patient tries to obtain a double immunity, in regard to internal conflict and to the object. This is what Joel experienced in all areas, with his analyst, with his mother, and with his partners.

On the other hand, narcissistically perverse individuals try to manage their inner pains and contradictions through an overestimation
of themselves and primitive infantile megalomania, which are related to narcissistic seduction. An individual like Joel really believed that he took his father’s place in regard to his mother. This perversion is not quite erogenous, but narcissistic; it is a variation of a moral or character perversion. Joel took pleasure through other people’s denigration. On the other hand, he craved veneration. This is the perverse form of narcissistic personalities (Eiguer, 1993). What motivates the perverse form of narcissism are anti-depressive, anti-conflictual forces, as well as the need to soothe oneself against psychotic anxiety or disintegration distress. These concern, of course, partial drives, although their aim is to achieve something that is not libidinal, but narcissistic. What the individual searches for is the original unity; pleasure is experienced by the alienation of the other and by the fascination of its specular image.

Compulsive sexuality and the object

The compulsive aspect of Joel’s sexuality was manifested in specific moments, in a behavioural way rather than in fantasies, although the three sessions that the analyst presents indicate a patient who was able to dream and associate. But we are also told that when the patient felt inferior, there was an increase in “his sexual adventures”, tending to promiscuity. His sexuality then became compulsive. In my opinion, Joel’s compulsive sexuality was limited to a series of self-soothing behaviours.

The object here is not significant; what acquires importance is the possibility of acting out the discharge. It is more about the use of a fetishistic object (Kestemberg, 1978), and not so much about an object that is desired or loved for its own sake. Or the aim is to search additively for a series of objects, as with drugs, but these will not be able to substitute for the primary object, which has failed. The object is denied with regard to its significance, but not with regard to its existence.

Lack of individuation

The background of Joel’s sexuality was constituted by a lack of individuation and a desire for fusion. The latter, however, resulted in
terror, precisely for this same reason. Here are some of Joel's words: “Perhaps I want to die in order to kill what I do not like about myself . . . my body, my morality or lack of it . . . my soiled past.” I found these words interesting because I believe they refer to the patient’s basic issue. Joel desired to die, as the last means he had at hand, in order to separate himself from the control his mother exerted over him. Joel could only exist as an individual through physical death. He was the alienated object of a phallic narcissistic mother who held her son hostage. Only death could liberate him from this alienation.

On one level, we could think that Joel would be complying with his mother’s desire to give birth to a daughter but, on another level, he seemed to identify completely with his mother’s desire. She expected him to satisfy her, a price he had to pay for escaping death when she gave birth to him. In his fantasies, he believed, as his mother conveyed to him, that he could have killed her during his birth. Therefore, he decided not to exist in any form that could offend her, that is to say, even by existing, as it was precisely his existence that bothered his mother. When he was a child, he would not get dirty; in this way his poor mother did not have to clean him.

As soon as he questioned anything related to his mother or to his past “suffocating environment”, he was assaulted by fantasies of death or suicide. Was it a masochistic necessity to be punished for trying to escape from his mother and for desiring to exist? Rosenberg (1991) would define it as “death masochism”, where binding forces fail in their aim and lead to disconnection. It is a search for pain and splitting. In these cases, the patient masochistically cathects the pain and all the territory of displeasure. This is the case of some forms of psychosis with mutilations, as with the patient whom de M’Uzan (1972) refers to.

In melancholy, the superego becomes a “pure breeding ground for the death drive” (Freud, 1923b); that is, it becomes as cruel as it can be, when, in addition, the ego does not work as a filter. The despotic character of the superego equals the necessity of not splitting and staying confused with the object. There is no doubt that a part of the pleasure derives from the masochistic scenario that feeds the superego’s wrath: the ego demands punishment coming from the superego. Perhaps, when the ego-superego tandem disappears, the last reason to exist ceases with it. Joel offered himself as the victim to the unleashed cruelty of his superego in a complete sacrifice, in order to
preserve his mother as an object. At the same time, there was a narcissistic pleasure that enclosed the incestuous amorous breeding. Joel’s homosexuality could also give rise to the following question: is a homosexual relationship incestuous?

We know little about the half-disappeared father. Perhaps Joel also identified with him and with the depressive state we learn that the father experienced. But, after all, he was a father who “was already dead before he died”. The triangle had never been well constituted. The mother fooled her son and he allowed himself to be fooled by her with the idea that he was better than his father. Either the father was castrated by the mother or he castrated himself.

A few years ago, I had the opportunity to study Jelinek’s book, The Pianist (Burdet, 2008), where I had found the same longing to escape from the “folie à deux”, and from the asphyxiating relationship with the mother, as was the case with Joel. The pianist would place pins in her skin, in order to delineate herself from the narcissistic mass she constituted with her mother. On the one hand, she would desire to be in fusion with her and return to the womb, which we can interpret as a manifestation of the death drive, and, on the other, she was, like Joel, subject to a titanic fight to find her way to individuation.

For Joel, it was the same desire to delineate himself from the narcissistic undifferentiated mass formed with his mother; the desire to outline himself, just as a figure is outlined on a sheet of paper, was, in my opinion, what lay behind the cuts that he inflicted on himself. These cuts were like desperate cries in petition of individuation: “I imagine myself mutilating, making a deep cut to my neck”. It is preferable to feel in that way than to feel dead like his mother, in spite of having said that “I feel I am dead like my mother”, in the second session presented.

When I wished to describe Joel’s homosexuality, it struck me that I tried to establish a parallelism with what had happened to the female character in the novel, The Pianist. In order to understand the psychosexuality of a man who defined himself as homosexual, what had come to my mind was the sexuality of a woman. Ultimately, I would say that it was not a coincidence that in both cases the sexual issue, in the sense of genital sexuality, had no importance. Conversely, both of them concerned personalities with a narcissistic disorder. Joel, as well as the female character of the novel, was frightened by the prospect of a breakdown: “I am afraid of disintegrating”. They came from a
complex milieu that was marked by an excessive incestuous relationship (Racamier, 1995). Their sexuality was dominated by pregenital forms, where seeing and being seen were important. Masochism in its peculiar forms of self-sadism and the search for pain acted as demarcation lines that were necessary to differentiate themselves from the other.

Joel talked about his destructive part and his “mental boycott”, which were opposed to a healthier part of himself that dreamt, analysed, and brought his dreams to his analyst. His mother’s death had triggered a melancholic crisis in him. Since Freud, we know that melancholy constitutes the paradigm of narcissistic regressions. Between melancholy and moral masochism lies a theoretical tension. In both, we find an “unmistakably enjoyable” self-reproach and self-martyrdom, and, in melancholy, masochism corresponds to a narcissistic regression. The narcissistic regression that characterises melancholy is marked by an apparent desexualisation. In Joel, there was a fight to differentiate between the object and the subject, between the masculine and the feminine, and between agencies. But masochism and melancholy work in opposite directions: in a melancholy crisis, masochism tries to restore the object. The object needs to be searched for, as well as the elements for differentiation. We could say that, with Joel, the analyst works hard towards objectalisation, in André Green’s sense, and towards facilitating a bonding task, in Freud’s sense. At the moment of his mother’s death, the patient had recourse to dangerous acting out and mutilation, and he enjoyed extreme risk. Surely, it corresponded to a narcissistic pleasure to feel himself existing.

**Relationship between patient and analyst**

Joel’s relationship with his analyst represented the third. In spite of all his mother’s efforts to propose alternative therapies and her “impeachment of his relationships with other objects”, Joel stayed with his analyst. On the one hand, he did not tolerate the defusion of the object, he sold his mother’s belongings after her death, and he walked on the floor where she had previously walked. On the other, his search for a female analyst might be understood as his struggle to overcome the desire for fusion. Or, the impossibility of going beyond the desire for fusion offered a somewhat healthier point that tied to
his demand for treatment “because of my profound impotence and
total lack of interest in anything or anybody.”

The analytic work fulfilled, at the same time, a function that facil-
itated individuation, even though it was realised through a moment
of confusion/fusion. This moment was probably very important, to the
extent that it gave him the possibility, through this breath, this
“breathing for both”, as if the analyst were pregnant, to be under-
stood, to be in fusion and “to be born again”. It was a very moving
moment indeed.

The analyst did not remain trapped as his mother had done and
offered a structuring mirror where the patient could look at himself.
The mother could not tell her son who he was, but whom he had to
be for her. She had perverted the law, as if she signified that the law
equalled the incest law. “Be me and do not bother me.” She could not
represent the third. She allowed neither mourning nor differentiation.
Conversely, the analyst reflected a different image to the patient,
different from that conveyed to him by his phallic, narcissistic mother,
who was eager to possess him as if he were prey. The analyst could
help him in the process of deconstructing his identity.

The patient’s search for a “clean sex lacking emotions” is under-
standable; it concerned his effort to distance himself from an exciting,
fusional relationship with his mother and from the “incestuous”
atmosphere described by Racamier (1995). In the same context of
“clean sex”, the recourse to the idealisation of “coldness” is also signif-
icant. We could read it from different points of view: it implied being
cold like the dead mother, in identification with her; on the other
hand, the necessity of being cold could be comprehended if we take
into consideration the cauldron of passions existing between mother
and son; in this case, there could be room only for coldness. The exis-
tence of the cauldron required a permanent flight from excitement.

The role of the body image

Joel remarked that, in his relationships with other men, “he was only
interested in the body image”. As I have just noted, it concerned a split
between sex and emotion, but it was, at the same time a search for the
double. The latter was based on his narcissistic (or melancholic) iden-
tification with the mother, which Freud wrote about in his study on
Leonardo. Joel looked for another person like himself, which was his way of attempting to escape from his mother. He was in search of an external body image, outside the peculiar jumble of a “body for two” (McDougall, 1989). Thus, he could protect himself against the alienation of the identical. His search for the repetition of the same was his way of differentiating himself from the identical.

Joel needed to “see”, to watch the form, the silhouette of another man similar to him (“He had a lot of me”), similar, but not identical. This visual search, to watch and to be watched, was a narcissistic necessity for his existence. It fulfilled a similar function to the cutting and the harm he inflicted upon himself. Obviously, this kind of sexuality was a desperate attempt to exist, a defence in the face of the dread of becoming crazy, a defence against psychosis. Joel said, “my biggest fear is that of losing my image”. He searched for himself, for his image among other things, in order not to become crazy and not to end up swallowed by his mother.

The normal fusional relationship between the mother and the baby, which consists first in depending on the mother, had not been adequately resolved in Joel’s case. Normal primary homosexuality, which is valid for both sexes, corresponds to the first identification with the mother. The reference to the term “primary homosexuality” is not adequate, to the extent that sexual differentiation is still not known at this stage. However, with Joel, when it is question of a narcissistic disorder that has not allowed the establishment of a relation with the object, then it is not possible to define the sexual identity of the subject in terms of homosexuality or heterosexuality. Joel affirmed at one point that he was homosexual, although he did not know it for sure.

In the melancholic state, a melancholic core would substitute for a gender identity core that is necessary for the building of sexual identity. When an early melancholic situation is caused due to maternal abandonment, the child identifies with the mother so that he or she can retain her and fight against depressive moments. Joel had suffered from maternal abandonment and had, several times, been taken away from his mother in his early childhood.

The understanding of early traumas is, in our opinion, what enables us to comprehend Joel’s “homosexuality”, which is based on his identification with the mother. A proto-homosexuality, or a neo-sexuality (McDougall, 1989), where the quality of the object is
irrelevant and what matters is the object's similitude with the becoming subject. This form of sexuality especially fulfils the function of a soothing act which provides the possibility of existing psychically and fighting for differentiation and otherness. In Joel, the drives manifested themselves anarchically. To see and to watch became unusually important and contributed to the search for a unified image outside himself that could reflect him. They also served to protect him against psychosis and disintegration.

The term, homosexuality, entails a contradiction: “homos” refers to the narcissistic and “sexual” refers to the objectal. Denis (2005) distinguishes between the terms “homosexual” and “homo-narcissistic”. The first relationship with the object is sexually undifferentiated. Primary homosexuality constitutes the origin of what will later become asexual and tender. Primary homosexuality, which consists in an undifferentiated sexuality and polymorphism, leads eventually to sexual differentiation. It is the moment when the parents become father and mother for the child. At this point, it would be important to clarify what differentiates the homosexual from the homo-narcissistic and the homoerotic.

Sandor Ferenczi was the first psychoanalyst to define homoeroticism and to highlight the primacy of narcissism over objectalisation. He proposed the term in 1911 to refer to homoerotic subjects of a narcissistic nature who had not accessed the objectal and the sexual. Homoeroticism implies that a sexualised representation of the parents has not been sufficiently constituted. Jean Bergeret (1999) also distinguishes between different classes of homosexuality: between a regressive post-oedipal homosexuality and a form of antidepressant searched for, as in a mirror, through homoerotism. This would be typical of those who look for counselling due to a break-up with their partner.

The case presented by Raquel Cavaleiro raises a question about current sexual identities in our society and the psychoanalyst’s role in regard to them. The psychoanalyst is confronted with different forms of sexualities, heterosexuality, transsexuality, homosexuality, bisexuality, and has to treat them analytically in the light of narcissism. Can we suppose that the changes in regard to these sexualities are effects of early traumas that imply new forms of identification and defence? Do new winds blow and does the analyst observe and listen to new forms of sexuality? I leave this question open, as it would need further
work, and I end my discussion by thanking Raquel Cavaleiro for the vast richness of the clinical work that she has offered us.

References


Analytic work with a female homosexual patient has, in view of the transference and countertransference relationship and of what was experienced in the here-and-now of the session, led us to question the type of object relations that the patient developed, and the impact they have had on the patient’s capacity for differentiation and autonomy. The patient’s presenting problem was her difficulty in decision-making, although what appeared to be her real challenge was accepting and defending her own desires. To uphold one’s own desires, one must first feel oneself to have been accepted and loved. It is in this way that good internal objects can be introjected. These objects provide the strength necessary to tolerate the disappointment that follows upon failure to be the other person’s ideal object. They also enable us to contain the aggression awakened when upholding our own identity. In the case of the patient presented here, early loss of all family support compounded the process of differentiation and self-confirmation, thereby accentuating the intricacies of this process.

Psychodynamic understanding of her lifelessness, passivity, and her need to care for her objects will allow us to comprehend the way she defended herself in order to avoid a struggle with her own
feelings and needs. To protect herself from these feelings and needs, she projected part of her mind into the object, thereby turning the object into the repository of her impulses, desires, and conflicts. In consequence of the object being thus invested, she recognised neither her own needs nor her limitations, feeling compelled, however, to care for the object, submitting to the object’s requirements and demands. Hence, her manic idea that she was essential to her object. To keep her balance, the patient had to perpetuate the following type of bond: she yearned to feel sought after by her object, an object that she could then think of as needy, and in this way shield herself from the pain of separation from the object.

The clinical material that we will present is that of a woman, aged fifty at the time she came for a consultation. Her speech was monotonous, her tone of voice flat, her gaze evasive, and somewhere between sorrowful and resigned. She had already undergone two treatments, the first being a psychotherapy followed by a psychoanalysis that lasted many years, ending finally when the analyst relocated for professional reasons to another city. It also ended because, as the patient expressed, “It would have had to end one day.” She specifically stated that these treatments aided her in pursuing her studies and in improving her work situation. Several months after finishing/interrupting her analysis, she requested a new consultation due to her difficulty in making decisions.

In the initial meetings, the patient described her early years as being affected by her parents’ emigration when she was three years old. Despite this tender age, she described what was, for her, the very painful experience of the loss of the extended family on both the maternal and the paternal sides. She believed that her parents’ decision to emigrate was not for economic reasons, but due, rather, to the difficulties that her mother had with her father’s family, and most especially with the patient’s grandmother. She described her mother as a woman with a strong character and her father as a good man who was, however, unable to manage conflictual situations. When not at work, her father took refuge in his friends at a bar, and often returned home clearly drunk. This situation caused her parents to have frequent arguments. The patient reported feeling very bound to her mother, and experienced her mother’s concerns as her own. In this sense, she remembered being small and waiting restlessly by the window at her mother’s side for her father’s return from work.
Although her mother did not work outside of the home, the patient used to help her with all the household chores.

On entering adolescence, she told her parents that she was homosexual. She says, “They didn’t take it well, and the subject was never brought up again.” Without relating it to her homosexuality, she talked about her mother’s suffering when she used to go out. If she got home late this was, for her mother, a sign that her daughter’s life was blighted, while her siblings, who had no curfew imposed on them, were never a cause for concern. She explained how her parents extolled their achievements at school and in other areas, while her own accomplishments never brought the slightest praise. Her school performance in pre-adolescence worsened, and although she had made a start with higher education, she was unable to get beyond the first year. At nearly thirty she began again, and with great effort managed to finish an undergraduate degree, eventually finding a job related to her field of study. Prior to beginning this new treatment she had had several long relationships with different partners, with whom she always took a passive and submissive role.

This initial introduction to the patient allows us to question the benefits of her previous treatments, and requires us to reflect on the kind of bond she established in the light of the great contrast between the years of treatment, and the fact that she scarcely seemed aware of her internal world. Her gains were expressed in terms of progress made externally at school and at work, and she appeared to have only scant awareness of the impact made on her life by all her difficulties. Another aspect to be taken into account is her childhood. Her early years were spent in a homely environment. She lived in a small town surrounded by her extended family prior to her parents’ emigration, after which the whole family, including her parents, suffered the loss of all their reference points. In addition, her mother became pregnant once again. It is here that we can glimpse her parents’ underlying conflict—a conflict that goes well beyond the reason given for the move. That is to say, the parents, in fact, did not get on well with one another, and their grief over their many losses appears here. Both mother and father took refuge from their suffering in different ways. Alcoholism became the father’s sanctuary, while the mother looked for shelter in her poorly differentiated relationship with her daughter.

Our attention is also drawn to the silence that reigned when the patient confessed her sexual tendencies. This silence was twofold: the
family’s silence, and the patient’s own internal silence. It was almost as if she believed that by giving no voice to her sexuality she could deny its existence and mute her desires. This situation was repeated in her previous analysis, where her sexuality was not discussed.

During the first meetings, her request for treatment seemed to be motivated more out of a need for external support. Similarly, she might have accepted the analysis offered more out of her dread of a breakdown than out of a desire to have a better understanding of herself.

In the first years of analysis, she used to go over to her parents’ house two or three times a day, including weekends to take care of them, and mostly to care for her mother, who had suffered with senile dementia for years. In analysis, her sessions centred round her concerns and her protests regarding the effort required of her to care for her parents. Although she never requested help from her siblings, she was resentful of the meagre help they provided. If they did help her, they did not do it well enough. In consequence, this situation caused her partner to object to the time she spent taking care of her parents, and created a distance between the two women. The patient would then complain about her partner not being understanding, and she would experience the demands on her time as just one more of the exigencies life made on her. These external situations acquired a great deal of weightiness in the sessions. The patient repeatedly described circumstances in which she felt that she had to deal with everything while others just stood by, incapable of recognising how burdened she was. She clung defensively to a repetitive tirade where nothing could be done. This shield with which she protected herself indicates how few resources she had, and how hopeless she felt about the analyst being able to give her something useful. She felt condemned. Despite all her dissatisfaction, however, she seemed to be revelling in her grievances.

Her passive and resigned attitude, her flat tone of voice in addition to her concrete form of speech filled with silence conferred a lifeless atmosphere to the sessions. It was also her way of hushing any protest or halting any thought that could bring instability to her life. Only occasionally were intense feelings evident in her, such as when she would burst out crying, sobbingly giving an account of her relationships with numerous relatives, and especially speaking about her paternal grandmother, evoking different shades of light and
childhood smells. All this stirred up in the analyst a great desire to help her, but also a sense of tedium, given the repetitiveness in the sessions. As a session proceeded, the analyst would often feel tired and sleepy. An understanding of the effect on the analyst prompts us to consider the dynamics of the transference and countertransference. Thus, when the patient projected, among other things, her lifelessness, the analyst could feel herself forced to bring life into the session, but interventions of this type were easily felt to be attacks that threatened the patient’s fragile balance and were unable to be used to gain insight. Progressing in analytic work requires observing just how the analyst’s interventions are taken. At times like this, the patient was not capable of understanding. She could only desire to be understood. Hence, part of the analyst’s fatigue and sleepiness represented her efforts to aid the patient to feel her to be mentally present. That is to say, maintaining contact with the patient in an effort to understand her. It was of paramount importance for the patient to have the experience of feeling understood in order to develop a desire and ability to understand herself.

On the one hand, the importance that external reality acquired put at risk the analyst’s mental capacity. Both analyst and patient becoming trapped in this reality seemed to be expressing the patient’s quest for the analyst’s complicity and alliance to fight off the external abusive object, namely, her partner. It seemed likely that the patient attempted to repeat with her analyst the mother–daughter alliance where the abusive object who caused all of the pain was the father.

A year after beginning analysis, the patient felt forced into marriage to appease her partner. (Same-sex marriage was legalised in Spain in 2005.) This phase was experienced with great suffering because she had to tell her family, and confront the homosexuality that she felt to be so shameful. She had to recognise and verbalise what was evident, but had been silenced for years; she had to openly show her desires and live in accordance with them.

As analytic work continued, her dull, devitalised presentation of the first phase improved. Gradually, her defensive attitude softened, and she was more in touch with her feelings and was able to associate more. As she developed a better understanding of her suffering, contact with her internal world improved. She began to show her grievances and opinions in a more verbal and explicit manner, to defend them with an increasing acceptance of her limitations, and to
occasionally ask for help. At work, she was able to take on more tasks. This achievement, however, was not experienced with satisfaction or hope, but, rather, she feared she would not be able to manage well with the added responsibility.

Some clinical material is now presented, along with some comments, concluding with some considerations about the patient’s losses and countertransference.

**Clinical material**

This clinical material comes from the days preceding the parents’ being admitted to a nursing home, and it was the first time that the patient was faced with separation from them, now no longer being directly involved in their care. Previous to this, her parents lived for nearly a year in the patient’s home with her partner and herself. During this year, whenever she considered a nursing home, it was usually because she had felt coerced by her partner, before feeling able to reach that decision of her own accord.

She begins the session complaining, obviously angry with her partner for not contributing to either the economy or the organisation of their home. She goes on to give a detailed explanation of how her partner, having helped the patient to get a job interview, offered to take on different activities without payment, but to do so needed the help of another woman with whom she had been in love a few months earlier. The patient says that she cannot stand this any longer; she is fed up with having to do what her partner wants. It makes her feel as if she were cemented to her, as if she were there to do her bidding, and she does not want to do anyone’s bidding.

The analyst interprets that she is angry because she felt forced into doing things, driven by the desires of others, or moved to solve her partner’s problems to avoid her partner’s anger. She then feels lost because she does not know how to protect her own desires and needs. With a muffled, sad voice, she replies, somewhat pitifully:

> All my life I’ve been wondering who I am, and how I have developed as a woman, how I have experienced my sexuality with shame and guilt because I did not want anybody to find out. Nobody helped me, and I did not allow anyone to help. I felt that what I needed was inappropriate and
wrong. I didn’t know what to do. I thought it was better to not have any sexuality. I just felt that what I needed was unacceptable or bad. And that it was better to feel just what I felt, which was that I did not deserve anything.

[Silence.]

When I was a child and later an adolescent, nobody spoke about women being homosexual. It was something you hid. Boys and men were more “visible”, and people gossiped about them. Men were said to be fags and sissies, but nobody spoke about homosexual women. The subject was avoided.

[Silence.]

First I fell in love with my friend, Katy. It was the first time that I was aware of being in love with a woman. Katy had a boyfriend, and she left him. I got up my nerve and told her about my feelings. She said she also felt something for me, and I was horrified, and ran away from her. Soon Katy found another woman and they were together for ten years. I stepped out of the picture so she could be with that woman because I did not want to hurt her, but I could not be with my friend. I was afraid of fulfilling my own desires by living with a woman. My next relationship was with a lesbian, but she got pregnant and wanted to live with the baby, the father of her child, and with me, and I couldn’t take that, so she left me for that man. Later I had another relationship, but I spent all my time waiting for her while she was off studying. Now I’m with a young woman whom I thought would possibly leave me for a younger woman, but she’s fallen in love with a woman my age.

The analyst’s intervention is related to how she feels she is rejected if she approaches others with her wishes and sexuality, and how she worries that she can harm her girlfriend, her parents, and her analyst. This fear perhaps allows us to understand the time she has needed to be able to bring this to analysis. The patient continues in a low voice,

I’m not aware of this, of what happened to me, I only feel my need for curiosity. With my parents gone now I feel a great emptiness and guilt, and I wish it had not happened that way. On the other hand, I had to do it because I couldn’t look after them any more. I can’t do everything, and I can’t soothe their anguish either, nor can I stand to see how strange and forlorn my mother feels. As if all of this weren’t enough, my partner is in
love with someone else and I feel abandoned by her. I think if I fell in love with someone else I’d be afraid of hurting her.

[Her voice becomes weaker and shakier.]

My partner does not think that she hurts others, and she also fails to see me as her partner. I’m not her mother. I’m her partner. I know that to grow up it’s important for her to follow the thread of her destiny and that she must do the things she likes.

She stops, and then continues, It’s hard to put your parents in an old people’s home!

The interpretation focuses now on how she feels the analysis can help her; if it helps her to grow up and to live her own life, then she feels she is abandoning her parents. This feeling is not new, though. It appeared long ago. It has always appeared every time she has tried to live her life. When she was growing up, she always felt as though she was betraying her parents. She replies,

Yes, I felt as if I had no right to live my life. I gave a lot of importance to my mother’s anger. I was very fragile, and also became very hardened when Katy went off with the other woman. It was so difficult for me! By telling her that I loved her I was trying to find myself, my identity, but I was not strong enough, and too many hurdles discouraged me. At that time, I could have bought a flat. I had enough savings, but my mother said, “Why do you have to complicate your life?” These words were enough to put me off buying it. Maybe I was hoping that my mother would say just that so I wouldn’t have to go through with it. I didn’t even speak to my father or my brothers to see what they thought. I just gave up and felt hopeless.

The analyst tells her that she is able to see how she deals with things. We can observe how spiritless she is because this lack of verve prevents her from facing things and enabling her to avoid conflict. It is as if she were half dead. She lived half of her life trying to please her mother. She did not want to desire things that her mother would not be happy about. She felt that it was dangerous. After thinking a bit she says,

I have always hidden my desires from others because I do not want anybody to know about them. I have two wishes. I want to love and to take care of my parents. I wanted both wishes to be like communicating vessels. I brought my parents home to live with me and I tried to combine
both—my relationship and my parents. Unfortunately, though, it did not work out. I didn’t get any help from my partner. I had to take care of everything myself. Taking care of old parents is not easy, and if the partner doesn’t provide support it’s basically impossible.

[Silence.]

We might wonder what her desires and wishes are, and think about whether she can share them with the analyst. The danger of sharing them in the analytic relationship also exists. If she draws close to someone (the analyst), she risks being left, so she is instead passive as a means of retaining people beside her. She keeps her wishes and desires hidden, and uses the analysis and the analytic relationship surreptitiously as an external device instead of deeply engaging with, and internalising, them, thereby allowing real change to take place. Again, in a low, sad voice, she says,

It has been a big effort to separate from my mother and father. I did not think of them as a happy couple. I used to feel scared because they weren’t a creative couple. They always argued in real anger. My father drank a lot, and went to the bar every day, and my parents fought. I felt my destructiveness could deteriorate their relationship even more. I was scared they’d get angry with me and that would worsen everything. I would really have liked to see them happy with their children.

Yesterday I was reading a novel by a Swedish author, who wrote, “My mother always took care of her appearance, of my father, and of her children”, the children coming last. I never experienced that. For my mother the order was first her children, and then her own affairs. She was not a wife who cared about her husband. So, now I find it strange when my father says something loving to my mother because I have never seen that before. When my father sometimes takes care of my mother, it comes as a complete surprise to me.

We will now consider the clinical material from the perspective of separation and loss, and the repercussions this has on the analytic work.

Separation and loss

At three years of age, the patient experienced separation from her paternal grandmother, to whom she was very attached. She felt loved
and recognised by this grandmother. At a primitive level, all experiences of separation feel more like loss than separation, and the earlier the separation the more accentuated the risk, due to the insufficient introjection of the good object, whereas a stable, long-lasting bond provides the child with more of a capacity to sustain changes that occur while growing up. Along these lines, Britton (1998) refers to Bion’s description of the concept of the container:

Some aspect of the personality is stable and constant, and this is maintained as the only force likely to contain emergent ideas which express a new awareness of the reality of the self and of the world . . . If the relationship between this continuous self and the changing emergent self is mutually enhancing, development takes place. If, however, that continuous identity which he called the container is disrupted by new self-development or new self-discoveries, psychic change can be experienced as catastrophic since the changes would disintegrate the sense of self-continuity. (p. 27)

We may wonder, then, when the patient says, “I don’t know who I am”, if the separation from her grandmother and the family’s subsequent instability might have provoked an interruption in the feeling of continuity in her being. Perhaps this early emotional experience was re-enacted in the first analysis, when the analysis was terminated because the analyst moved away. One may wonder how she worked through this separation. Was she told well in advance, or was she suddenly confronted with the situation? How did she work through the separation from her analyst at the end of the therapy? Did she grieve for her and work through this, or did she use her analyst as an external support in lieu of internalising the analytic work, and then replace her former analyst with a new one? When she tells us that her first analysis would have to finish one day, one must wonder if she had achieved some degree of independence from the analyst and the analysis, or if, once more, she was accepting abandonment in a passive and submissive way, because soon after she again had to ask for help. Perhaps she never engaged deeply as a way of defending herself from the pain of being left. This patient presents herself as having to face established facts: she is rejected and has to accept it. Her first analysis and several romantic relationships are examples of this.

Although the patient said that her father was often drunk, she also expressed affection for him. She described her mother as being
violently jealous of her mother-in-law. The patient might have been afraid of being perceived by her mother as her rival, and then having that aggression and jealousy turned against her if she showed her femininity and sensuality. With her father, it is probable that his excessive drinking would have led him to crossing the line with his daughter. In all likelihood, the patient would have had to protect herself from his incestuous gestures and her own phantasies. Her guilt feelings about her fear of hurting her family could tie in with these phantasies.

We can also wonder if the patient ever felt someone other than her paternal grandmother to be interested in her. Her mother did not take her seriously. Her first partner ended up having a child with a man and then inviting her to live with them, but this partner never actually chose her. She also felt excluded by her next partner, and then by the analyst who left her to move to another city.

Feldman (2008) relates such primitive wounds to addictive, tenaciously repetitive complaints that fill the analytic session. He writes that

\[\text{In some patients, the inevitable experiences of disappointment and injury give rise to grievance as a means of denying the reality of loss, or the torments of the infantile oedipal predicament . . . The grievance derives its force and persistence from the phantasies of involvement in a perverse, excited sadomasochistic version of the parental relationship, with a life of its own. It is the investment in these phantasies that is reflected in the telling description of the person “nurturing” a grievance, feeding it, holding on to it, and using it to fend off reality. (p. 749)}\]

The patient believed that she was invisible to others and she did not ask for anything for herself. She said she was only interested in pleasing others. In the analytic relationship, this might be expressed by her showing herself to us as a self-effacing person who tries to pick up on what might please the analyst. Perhaps she feels that she would be rejected if she let her greed be seen. The patient’s self-effacing manner could, however, stir up in the analyst a countertransference reaction of boredom or sleepiness, and the perception of a lifeless patient.

\[\text{The transference and countertransference relationship}\]

This situation presents a challenge to the analyst and to the analytic relationship. It remains to be seen if the analyst’s perception of a self-
effacing woman expresses a closeness, or even fusion, between patient and analyst that then leads to the feeling of boredom in the countertransference. Could this be caused by the projection into the analyst of the patient’s conviction that nobody is available to care for and nurture her? The patient, however, provokes countertransference feelings of boredom and sleepiness in her analyst, and not of growing tension or claustrophobic feelings of being trapped and confused. This raises the issue of a struggle between life and death feelings.

Khan (1986) in his introduction to Winnicott’s book, *Holding and Interpretation: Fragment of an Analysis*, describes the defensive character that boredom can acquire, and the risk involved in perpetuating a situation in which an analytic process does not develop within an analysis. He writes,

> One can see how clearly tiring and boring are related together, as techniques of coping with inner stress. The boring patient is trying to maintain omnipotent control over his inner reality by obsessional over-control of language and material. His narrative is a petrified space where nothing can happen . . . the patient who compels boring narrative on us is not letting language and metaphor elaborate or change his experience. He creates a space of discourse where both he and the analyst are paralysed by the technique of the narrative as well as its monotonous and repetitive contents. (p. 3)

Bergstein (2009), quoting Khan’s introduction, writes that “He saw boredom as an experience of inauthenticity. By this I take him to have meant situations in which patient and analyst sink into the comfort of pseudo-psychoanalytical associations and interpretations, but do not touch upon primitive anxieties” (p. 614).

In order to understand these more primitive levels, it is necessary to recognise the communicative character that the projection of these experiences into the analyst acquires. A comprehension of the countertransference response in the analyst aids in understanding the nature of the patient’s anxieties. Along these lines, Bergstein (2009) says,

> However, boredom, subjectively experienced by the analyst, may also be an experiential expression of despair, a re-living of primitive object relations with an emotionally non-existent primary object. These encapsulated experiences with a dead inner object are often
transformed into psychic deadness and emptiness, experienced by the
analyst through projective identification, and re-lived by the analytic
couple in the transference situation. This emptiness, I suggest, must
find its place in the mind otherwise a whole piece of it is torn off,
leaving a black hole in its wake. (p. 615)

We find the patient’s difficulty in taking in transference interpreta-
tions to be present. The risk that the analytic work becomes hampered
by external reality is also evident. Perhaps the patient’s fear of a more
real, intense, and intimate interaction with the analyst in the here-and-
now has much to do with her feeling that closeness endangers her
stability and could potentially awaken her own impulses.

Understanding when and how a patient allows us to approach him
or her helps us to fathom the nature of the underlying relationship. If
the analyst’s interventions are in line with what the patient wants,
then we should think about an unconscious desire for a relationship
in which there is no separation. That is to say, a relationship where
closeness serves the aim of being the same, and the reality of the
difference between the patient and the analyst need not be confronted.
The patient’s persistent complaints can be a form of pressure exerted
on the analyst to adopt the same view of reality as the patient, and to
achieve in this manner a sameness between the two as well as gaining
control over the object. Another form of approach, however, is possible
when the patient is capable of tolerating the analyst contributing
with her/his own thinking, and being together in that way without
feeling threatened. How the patient experiences the analyst’s thinking
is, in consequence, determined by the quality of the separation that
the former is able to tolerate. Steiner (1993, p. 60) speaks about an
initial phase in the process of separation in which fear of loss of the
object predominates, followed by a second phase in which there is a
movement towards independence and a working through of the
experience of loss of the object. When the experience of separation is
tolerable, then the path is clear for an adult relationship to take place,
where sharing, caring, and mutual enjoyment is possible from a posi-
tion of difference. In a similar manner, the ability to enquire into
one’s own involvement in events that occur facilitates the start of
reparation. For reparation to begin, it is necessary to recognise the
attack on the internal objects. With this recognition, growth and devel-
opment can be consolidated, because creative reflection, enquiry, and
the ability to question one’s own experiences are possible.
We consider that an adult relationship is not exclusive to any one type of relationship—homosexual or heterosexual—but has to do, rather, with the degree of the individual's maturity. It is, therefore, not the choice of object in itself that indicates the pathology, but, rather, the way in which the internal and external objects are experienced. From a perspective analogous to that of other contemporary authors such as, for example, Moore and Fine (1990), our approach emphasises not the choice of object, but the psychopathology that is present in the object relationships of homosexual as well as in heterosexual men and women and informs the nature and style the bond takes on.

This clinical case illustrates how the transference–countertransference relationship is essential to understanding the patient’s inner world and the nature of his or her object relations. An individual develops his or her own identity by mobilising and organising defensive mechanisms to provide for protection from mental pain and so to survive. In the patient discussed here, the key issue was not being homosexual or heterosexual, but, rather, feeling entitled to be a person with her own thoughts, wishes, and personality.

References


As she walked into my office for the first time, A looked much younger than her thirty years, almost like a college student with no distinct characteristics that caught the eye. She was referred to me by a colleague whose daughter worked in the same school as A.

As she started talking about why she was here, two things struck me. One was that she avoided eye contact and rarely looked at me. At times, she would close her eyes and press her eyelids together for some time as she spoke. When I said something, she either closed her eyes again, or looked at me with a startled expression as if she realised just now that I was there with her. The other, which startled me a little, was the fact that her tone of voice and the particular way she spoke was the exact replica of the way my friend’s daughter, F (the same friend who referred her to me), spoke and moved.

A’s boyfriend of seven years, C, who worked abroad for the past two years of their relationship, was being relocated back to Istanbul and he proposed that they move in together. This proposal created considerable anxiety in A. She could not sleep at night, had heart palpitations during the day, and complained that she was feeling jumpy.
When C had found a position abroad two years ago, A had felt relieved because, finally, she would have a life of her own; she would have the freedom of being on her own. Things did not turn out that way. She met a female photographer, D, and started an affair with her. There was a similarity between the two relationships in the sense that in both, A was attached, almost glued, to the other. Her every move was organised around the other and she could not bear to spend a moment of free time alone.

However, as she talked about these two relationships, it became clear that they were entirely different, in fact, opposites. C was down to earth, dependable, and boring. He adored her and was by her side no matter how badly she treated him. She would “castrate” him brutally, criticising and complaining about his every move. His shortcomings infuriated her and she felt he “was not enough of a man”. They had a monotonous and infrequent sex life that was initiated mostly by him. Although she did not refuse him, she had no desire for sex with him either.

On the other hand, D was full of life and excitement. She laughed, danced, tried new things, and was very adventurous. Whenever A saw her, she felt a rush of excitement through her body. She felt she became alive. Their sexuality did not go beyond kissing and cuddling because A, although excited, “could not bear” the intensity of sensations she was experiencing.

This sense of excitement was mingled with the constant anxiety A felt throughout their relationship. D had a girlfriend with whom she broke up frequently. It was during these break-ups that she would “come running” to A, full of fantasies about sharing a life full of bliss together. After a while, to A’s disillusionment, but relief at the same time, D would go back to her girlfriend and their relationship would “go undercover” again.

As time passed in analysis, I felt a very profound dynamic emerging. A desired all and everything. Making a decision was extremely difficult, for it meant letting go of the other alternative. There was an urgent feeling of desperation to have it all as she was often faced with two different and conflictual choices in her daily life. When she realised one, her mind was constantly preoccupied with the alternative. She wanted the calmness and peace from her boyfriend, but, at the same time, she wanted the excitement from her girlfriend. She considered moving in with her boyfriend, but, at the same time, she
looked for an apartment of her own. She split off her bisexuality, became a man in her relationship with her boyfriend and a woman in her relationship with her girlfriend. However, she was able to experience sexuality and intimacy with neither.

Her extreme splitting made me think of a medallion with two faces. On one side was a Madonna-like teacher, devoted and loyal to her boyfriend, who liked reading, staying at home, and was well behaved and conservative. On the other side was an excited, almost manic woman, adventurous and fun, who liked clubbing and drinking to the point of not remembering what happened the previous night. She was extremely careful not to mix these two aspects of herself and when, at times, they touched each other, she felt anxious and depressed.

I felt she lived in a world of partial objects that were coloured by sensations rather than feelings (Klein, 1946). The smell of her boyfriend, for example, soothed and calmed her and it was the dance moves with her girlfriend that were exciting. Her world consisted of partial objects that were impossible to integrate into a meaningful whole. In that sense, she was operating on a pregenital level, sometimes even like a foetus in a mother’s womb, making meaning out of sounds and movements.

This dynamic had its roots in her childhood. She was the only child of a well-to-do couple. They were “madly in love” with each other. They had eyes only for each other and excluded anything and everything else. She was weaned when two months old and was sent to live with her maternal grandmother because the presence of a baby interfered with the couple’s busy social schedule. She was seldom visited or “summoned” to the parental home, where she often fell ill.

A’s grandmother took good care of her and A described the relationship as a close and happy one. Her every wish was fulfilled and she was spoilt. She recognised a touch of cruelty in their relationship as well. She remembered she would wake in the middle of the night, demanding her grandmother bring her milk and biscuits, which her grandmother duly did. She remembered peeing on the bathroom floor so that her grandmother would clean the mess up. She was never reprimanded for her behaviour and everything was tolerated.

The inability of the mother to physically and psychically contain A (Bion, 1962) and the all-powerful, mad “combined parental unit” (Klein, 1946) might have escalated A’s primitive anxiety about her own aggression and generated a raw, profound terror of any retaliation.
that might come from them. On the other face of the medallion, she was the sadistic one, orally and urethrally attacking her object in an omnipotent way. Her grandmother acquiesced to these impulses.

However, as A grew up, it was difficult for her grandmother to tolerate A’s genital impulses. When she reached adolescence and started dating boys, her grandmother was extremely worried and asked A’s parents to take her to live with them. A moved back into the house of the “mad couple” where both aggression and sexuality was raw and extreme. After drinking large amounts of alcohol, they would scream and yell, throw things around and hit each other. A feared that they would kill each other or themselves and called her uncle to intervene in their fights. Their voices as they were having sex in the bedroom was just as disturbing for her as their voices when fighting, for the former seemed just as violent as the latter. She was witness to this very primitive primal scene where aggression and sexuality were entangled and acted out over and over again.

In terms of transference, she idealised both me and analysis. However, there were two sides to that medallion, too. She complimented me and my looks with such vigour that it startled me like an unexpected attack every time. She was especially concerned with the accessories I wore and talked about how much she admired them. She believed I was the best analyst she could have and that we would sort out all her troubles together. She talked about how my office was a haven for her and how safe and secure she felt there. She mentioned how “cool” I was and how she wanted to be like me when she was my age. All this made me feel very uncomfortable, partly because I felt these compliments had the intention of preventing my interventions from invading and entering her while, at the same time, invading me with the scrutiny of her gaze.

The way she avoided eye contact in the first sessions was also a way of evading invasion and, maybe, fusion. It reminded me of the autistic–contiguous position (Ogden, 1989). I thought that the pressing of her eyelids together provided a cushion behind which she could protect her sense of self and a sensory crust against a danger that did not have a name or shape but was, nevertheless, there. I thought the same about the way she felt about her boyfriend’s smell. It was as if this smell protected and enveloped her at the same time. It protected her from dangers from outside and, at the same time, maintained her sense of cohesion.
A striking example of projective identification (Klein, 1946) was a session where she talked about her grandmother and her fears of being haunted by her. In the session, she talked in detail about how she would listen at night to the sounds coming from the house and the furniture that would alert her to her grandmother’s arrival. Fear of ghosts ran in the family; her mother and uncle could not stay home alone for fear of a ghost catching them off guard and entering their house. A was able to stay alone at home, but she had the fear that her grandmother, so familiar and yet at the same time so foreign, would appear and terrorise her. It was my last session and it was quite late. After she left, I was overwhelmed by a fear that there was someone in the office other than myself. In fact, all my colleagues had left and yet I listened to the sounds from the office looking for clues that someone was there. The fear was so intense that I turned off the lights and left the office in a hurry, not looking back. Although I was the last one to leave the office most nights and I had no specific fear of ghosts or being alone, that night I could not tolerate the terror that haunted me. I believe she projected on to me her fear of an indistinct quality of being invaded and attacked by another that was alien and familiar at the same time and I introjected that fear. I could understand her dread now, and I believe that was partly what her projection served, to communicate her terror about being invaded and attacked by my interpretations. Yet, at the same time, it was her aggression toward me that was projected in the form of an attack with the aim of invading and controlling me through fear.

Another example of her split-off aggression was a dream she had. In it, she was in her parents’ apartment, lying on an operating table, about to be operated upon. There was a horrifying woman running about, some of her organs falling out like a zombie, her hair in a mess, laughing and screaming like a maniac. This woman might or might not have been the woman who was about to cut A into slices on the operating table. Her associations centred around her mother and how her mother would hurt her with her sometimes inaccurate and harsh criticisms. I believed this to be true, but I also interpreted, to her strong objection, that this maniacal woman was me, putting her on the couch and analysing her to death with my harsh and inaccurate interpretations. This zombie-like woman was also herself, cutting me off into slices and killing my capacities as an analyst through her attacks.
Despite her strong fears of being invaded, she also had a desire to be fused with, or lose herself in, the other. I have mentioned how struck I was in the first session by her resemblance to, or even mimicry of, my colleague’s daughter. She admired my colleague, too, maybe more than she did her daughter, and talked about mother and daughter admiringly and extensively in the sessions. For A, my colleague was a “cool” mother who had everything; a career, intelligence, beauty, and style, as well as warmth and compassion. D’s mother had the same qualities, and A admired her and wanted to be close to her, as well. She could not identify with this daughter who had a mother with “assets and wealth”, I thought, for fear that she would attack and steal all that mother and daughter had and, therefore, regressed to the more primitive form of taking in, imitation. Also, she could only be close to a good mother through another object (my friend and her daughter) acting as a transitional object (Winnicott, 1951), due to her fears of engulfment and invasion by the terrible attacking mother who was hidden behind this idyllic façade.

During the course of analysis, D broke up with her, deciding to fully commit to her girlfriend. This was a painful loss for A and, feeling she could not stand a relationship with C, she broke up with him in return. She went through a period of being very depressed, so much so that she took leave of absence from work because she could not concentrate. She continued her analysis and would lie down on the couch and cry the whole session, talking very little. Her sobs were very different from the false way she used to cry before; for the first time, I could feel her pain as real.

A few months later, she formed a close relationship with a masseuse at the spa she attended. This woman, E, was older than she was and A had regular sessions with her three times a week, too. They talked during the massage sessions and found that they had many things in common. A felt that as if she had known E for a very long time. She felt she was in love with E. This was an impossible relationship, for they came from different backgrounds, different educations, and they had different social conditions. If they were to have a relationship, they would have nothing in common. On top of that, she was E’s client; they had a professional relationship. She felt that acting on it would be a violation of boundaries.

I was aware that A was transferring her feelings for me to E. She said that although it was an impossible relationship, E could
understand her and A felt a deep connection with her. A felt she and E were spiritual twins who could feel and understand each other fully. At the same time, she was aware of the illusion that this relationship contained; if they knew each other more closely, the “real E” would not have such a meaning for her.

These feelings were different from the sensations she used to describe before. Despite the fact that she felt symbiotically attached to E (she talked and thought of not much else, as if E took up all her internal space), she was also aware that, although a “twin”, E was a different person in her own right.

Around this time, she became very demanding of me. Those demands were concerned with the frame of analysis. She would cancel her sessions and wanted to not pay for them; she wanted extra sessions when she felt upset and she wanted to be able to reach me on the telephone when she wanted to hear my voice. I felt that deep inside she knew that she would not get what she wanted, but tried anyway, like a small child who wanted to see her mother’s reaction—perhaps, in A’s case, her grandmother’s reaction, to her sadistic and ruthless demands.

In contrast to previously, these did not disturb me at all, for they had neither the invading and controlling nor the false and whining quality. I felt like a mother soothing her demands with my words, after which she would feel calm again.

I think I was able to contain her demands and her anger (Bion, 1962), and she felt I survived her greed and destructiveness. She started to feel concern for me when I had a cold or when I missed a session. She started to construct fantasies and curiosities about my life and who I could be. Although the symbiotic quality never ceased completely, I could at times feel I was a whole person for A, which contained elements of the depressive position (Klein, 1946). I felt that this could pave the way for her to be in a relationship in the future with a man or a woman where she would be able to combine intimacy and sexuality.

Sessions

The sessions I shall present were around her thirty-fifth birthday. This was a big event for A, for she said this was “the beginning of the
second half of my life”. She planned a big party and she wanted everything to be perfect. This turned out to be such a big event that she needed help from her female friends.

Some time ago, she had said that a birthday party, a cause for celebration for most people, was a nightmare for her. She had a different persona for every social environment. She was a different person when she was with her family to the person she was when with friends from school, and to the one she was when with friends from work, etc. The idea of them together terrified her, because she would not know who to be. Over time, she felt she was able to be “one” in different situations. This birthday party had the significance of bringing together her many parts and selves. In previous sessions, she talked about how this day would be her true birth-day.

I felt that this birthday party was important for her on many layers. I felt that she was celebrating the birth of her true self that was defined internally, rather than the many selves she partially exhibited in different conditions. Moreover, I felt she was celebrating the birth of the awareness of her female self. She had brought to the session the invitation card for the party and shown it to me. She said that when she gave it out to her friends, they told her that the card was so “her”; it reflected who she was. The invitation was baby pink with a pink bow at the top. It reminded me of an invitation for a baby shower for a newly born baby girl. The references she made to a wedding and bridesmaids might, I thought, be the beginnings of a rudimentary construction where she was part of a couple in a long lasting relationship and commitment, whether with a male or a female. I felt myself following the preparations for the party, proud and elated like a mother whose daughter was getting married.

She came to the first session I will describe in a very agitated manner. She was carrying many bags filled with shopping for the party and she threw them on the chair opposite mine and threw herself on the couch with a sigh. When she lay down on the couch, her manner changed. She remained silent and looked at the ceiling for some time. She said she was looking at the flower inscriptions on the ceiling. These were laid out in sets in a specific order: one tulip, two daffodils, and one carnation, which went around the border of the ceiling. She said that looking at them calmed her down. She chanted inside as she looked at them, “one tulip, two daffodils and one carnation”, over and over again in a musical tune, like a lullaby. As she walked here, she
had the feeling that the ground would be swept away from her feet and she would faint. This birthday party was too much for her. She felt calmer now, having chanted her lullaby. This was the first time that she was able to talk about the ceiling and the lullaby.

She realised now that there were some imperfections in the inscriptions; although the number and order of the flowers were the same, the flowers were slightly different from each other. She supposed the reason for that was they were handmade individually by a master. The imperfections did not bother her; on the contrary, she liked them.

I felt that her way of throwing the shopping bags right opposite to me was her way of showing me all that she had. I felt she was saying “look at how much I have”, and that this might be the beginning of a rivalry she was ready to express with me. At the same time, she was also telling me that the weight of this wealth and rivalry might be too much for her. I felt that this was the anxiety that “swept her off her feet” and the rhythmic chanting was her way of regressing to the sensation-dominated experience she used in order to defend against anxieties of falling through the ground and dissolving into nothingness (Ogden, 1989). However, I felt that her experience of being in the room and on the couch helped her sing a lullaby to herself and she was able to soothe herself just as an adult might soothe a baby. It was through the presence of an internalised good object that she was able to calm her anxieties. The fact that she talked about the lullaby to me, an other, was, I felt, a sign of her object relatedness. Also, the fact that she grouped the flowers in threes made me think of the promise of a triangle for her. Her mention of the imperfections of the flowers on the ceiling made me think of her mother’s imperfections and mine as an analyst. I remembered how she used to react to my imperfections as an analyst, especially my absences, by curling up on the couch, not being able to talk, embedded in her own thoughts. Could this be a sign that she was better able to tolerate my imperfections and those of her mother’s, and able to soothe herself?

She went on in the session talking about the preparations for the birthday. She wanted it to be a true celebration. There would be dancing, shots of vodka, and a big cake. She could not make up her mind about what to wear and how her hair should be. She wanted a romantic look, but a modern look at the same time. Then she chuckled and said that she even thought about having the same haircut as I had, but then decided she wanted to be herself, not me. She was silent.
I felt that her chuckling was important. This chuckle had a playful quality that made me think that she was now able to play with the idea of being like me. With her, I used to feel that every time she talked about being like me, she was actually talking about being the same as me. This session, I felt that she was able to play with the idea of being really like me, taking in my qualities without taking the whole of me in. She was ready to play.

My colleague’s daughter was helping her with the preparations. A was disappointed with her because she did not put in much effort. A expected her to be as concerned as A was about the success of the party. It was her friend’s task to order the invitations, but she had put it off until there was dangerously little time left to order them. Sometimes, A felt F was jealous of her because A was having a huge party and F was on the sidelines, helping A out like a bridesmaid. A was the star and F could not stand that. Sometimes A felt F was trying to sabotage her party by deliberately delaying doing the things she was responsible for. Sometimes A did not show her enthusiasm about the party around F for fear that F would slow down even more.

Then she was silent for a long time. She said in a slow voice that she felt she was being unfair. F was actually trying to help her to the best of her abilities. In fact, it was A who gave so many responsibilities to F that maybe it was too difficult for F to handle. F was having difficulties with her supervisor at work and she was being evicted from her house. She had enough troubles of her own, and yet she was the hardest working friend she had for this party. In fact, it was all right for her to be jealous. Maybe A should be concerned with not being able to help F in her time of difficulty.

She said she thought about me as she said that. She said she sometimes imitated my tone of voice or my emphasis on certain words. This was something like that. What she said was coming from inside her but it belonged to me, too. She could only hold on to what she said and what she felt for a moment. She could not retain it. The anger would return as soon as the words were out of her mouth.

Conclusion

I thought this was a very interesting discourse. Her friend, the same friend she imitated in the first sessions, was now a person in her own
The theme of rivalry came up again, along with the consequences. Immediately following that, she brought material from a depressive position with her concern for her friend. Although she could stay in that position for only a little while, a different superego, a healing rather than a punishing one, could be observed. I felt she showed signs of the beginning of an identification with me.

I felt I could follow the patient’s development and moves from the autistic–contiguous to the paranoid–schizoid and depressive positions across time and their interplay within a specific session. Also, I could follow a line of imitation, incorporation, and the beginnings of internalisation throughout her development.

Due to the force of a primitive fantasy, the combined parental fantasy, that continued to operate in her, it had been impossible to differentiate sexually between mother and father and to identify with either of them. Therefore, this primitive fantasy could never lead to the constitution of the primal scene fantasy and the formation of psychic bisexuality. My patient searched for a narcissistic double, a male or a female, and attached herself to that object. What was more problematic was that her basic identification with the primary object was faulty to the extent that it crippled the possibility of her forming a healthy self.

I believe analysis will continue to help her further develop her sense of self and sexual identity.

References

We very much thank Ayşe Kurtul for sharing her case with us. It is always a special opportunity to look directly into the scene of an analytic ongoing process—and a challenge at the same time.

While this case emphasises several points, I shall focus particularly on “homosexualities”. Of course, this case reminds us of Freud’s case of female homosexuality (1920a), which is discussed widely in other chapters in this book.

In trying to understand the patient, I first want to discuss some theories of the homosexualities of women, starting with female development. My discussion is based on these theories.

We remember Freud’s basic assumption of constitutional, innate bisexuality, in which, as we might view it today, the cross-gender or trans-gender identifications fall victim to repression along with the formation of a heterosexual gender identity, but in which cross-gender identifications nevertheless remain in the unconscious. The fundamental bisexual object choice of early childhood enables a person later to change his or her object choice, as one possibility is lived and the other does not vanish, but is only suppressed and comes back to life in certain constellations (see also Quindeau, 2013a,b).
According to Benjamin (1997), the girl (as well as the boy) tends to identify with both the mother and father, and both have to interact in such a way as to prepare the ground for normal development and homoerotic/identificatory as well as heteroerotic/object love.

Poluda-Korte (1993, 2001, 2007) conceptualises female development that can lead to both homosexual and heterosexual orientation. She describes the “lesbian complex”, traditionally called the “negative oedipus complex”, as playing a special role in all female development. Remembering Klein (1928), and we can also refer to Horney (1924), Poluda-Korte differentiates an early and the “real” Oedipus complex. The early one is linked with processes of self-differentiation and object differentiation in the first year. The daughter’s love of the mother is disappointed by the taboo of homosexuality and by the realisation that mother also loves father and not only the child. This frustration might result in changing love to hate, sexual wishes into murderous impulses, and guilt feelings into self-destructive impulses. The narcissistic and oedipal aggression is deposited into a rigid, early superego and facilitates an object change towards the father. There is also a partly melancholic, partly sublimated, erotic identification with the mother, transforming the early homosexuality into motherliness. Poluda-Korte sees in the homosexuality taboo the following function: the love for mother changes into the wish for a child, with whom this love is to be re-established. However, in the lesbian development, the homosexuality taboo is not accepted. The aggression is not deposited in the superego but stays in the ego, keeping the homosexual desire. The good-enough mother provides the sensual foundation for erotic desire to develop in a healthy way, for both homosexual and heterosexual individuals (see also Özenen, Chapter Seven, this volume).

Looking closely at the case and remembering these theoretical points, we shall see more than one medallion with two faces.

The parents are painted as a unity, and the child A as a burden; the patient remembers having felt lonely when she was with them (and she missed a good mother). A must have fantasised what she might have done or what was wrong with her to be abandoned by them. Was she rejected because of her genitals, her missing penis, because of her homosexual wishes, and, later, because of her wishes for the father?

The daughter’s love for the mother was disappointed by the taboo of homosexuality and by the realisation that mother loves only father and not the child at all; this frustration might have resulted in partly
changing love to hate, sexual wishes into murderous impulses, and guilt feelings into self-destructive impulses. Here, we meet a mother who was “unwilling to give up her claims of attractiveness” (Freud, 1920a). The good-enough mother provides the sensual foundation for erotic desire to develop in a healthy fashion, for both homosexual and heterosexual individuals (see Özenen, Chapter Seven, this volume). Mother was hated and adored at the same time, and this continued in later life.

The object change towards her father became necessary on different levels. Although he was more interested in the patient than her mother was, she continued frustrated as, in the end, he stayed with the mother. She was brought up by the mother’s mother, with whom she developed a sadomasochistic interaction, where she deposited some of the early sadistic feelings towards her mother. This grandmother, on one side of the medallion the good object, might herself have had guilt feelings because of rivalry with her daughter whom she had not equipped with motherliness and from whom she stole the child. She did not want to lose this, her (homosexual) object, which led her to take the masochistic position and to be at the girl’s disposal.

When the patient’s own (hetero-)sexual interests awoke, she was then abandoned by the grandmother (the good object), banished from an idyllic paradise, and pushed back into her parents’ ambience, into the world of the drives, where she felt unhappy. Here, she met violence in the way of daily clashes and interpreted sexual noises as violent, and boundaries were not safe, according to her unconscious fantasies of mingled sexual and aggressive fantasies.

So, having heterosexual sex and having the good object seemed to be alternatives and impossible to integrate.

According, on the one hand, to cultural needs, and, on the other hand, to individually developed needs, the patient chose a man, C, who was boring and did not evoke her desire, who was (like grandmother) available and secure for her, and at the same time her libido faded to aphanisis. He did not become dangerous by coming closer and he, too, was castrated by her. She was relieved at being able to have him at long distance, but “have” him with the fantasy of then leading her own life, which obviously was not possible for her as she soon entered the symbiotic-like relationship with the woman D (demi-mondaine), the personification of the exciting libidinous temptation, the life drive. (She felt she became alive.) Their interaction was
arousing, but did not go beyond a certain boundary, as this felt shameful. The “certain boundary”—is this the border between pre-oedipal and oedipal genital love? Things have to stay (so-called) pregenital and are not allowed to become genital, as genital sexuality is dangerous, laden with aggressiveness. To realise the distinction between man and woman seems to be forbidden and the questions remain: who has the penis? What does the patient consider to be herself? We do not know much about her sexual identity.

It was possible for A to establish a relationship with D, because D was not dependable but occupied with another woman, a third. Her object choice is a “complex solution”. When D left her, she could not be with C any longer, as the stable arrangement was disrupted, and, here, the analyst—and the reader—had a chance to get in touch with the real self of the patient, being really sad, having real pains, and needing help; the lost and abandoned child of the early times turns up again.

But soon she finds E, the masseuse, whom she sees three times a week, similar to the analysis, establishing a side transference, another “impossible relationship”. The arrangement now is that E really touches her body, whereas the analyst touches her with words.

On the one hand, we dive with the patient into an earlier time when the process of self- and object-differentiation occurs, which has not been properly resolved. Mother and daughter melt into one person. In this land of archaic drives and feelings, the seeds mentioned above are sown. By using the grandmother’s clothes, she slips into her shell/mantle, trying to grasp some aspects of the good objects, not to internalise the object, in a way, but to invade it. Thus, she also soothes her guilt feelings at having left and killed grandmother with her heterosexual desires by living on in aspects of her grandmother’s life.

By imitating the analyst’s friend’s daughter, she wants to replace her as well, thus making the analyst a bridge to them—and vice versa. Her aim is to finally be on the lap of the one whom she idealises as the good mother. But she is enmeshed with her analyst, which is felt in the countertransference differently from a symbiotic relationship, and the analyst feels invaded and exploited. This is the aggressive and destructive side of the medallion. Looking for a mother has connotations of evil closeness, destructive closeness. Her idealisation and flattering impose themselves in a frightening way. As the patient is not able to admire and develop something of her own, she instead not
only imitates, but invades, controls, and replaces with destructive and frightening aggressiveness. In fact, we fear being haunted by the patient. She mingles with the analyst, and every third who appears is somehow enmeshed, too.

Let us look at her dream: a witch is about to cut her into slices. In fact, a horrible fantasy. The analyst can see the mother, grandmother, and herself represented by this witch. Yet, according to what we learnt of the patient, these are also her horrible aspects visible and she is cutting the others into slices, mainly the mother and her representatives, castrating them in the worst sense of this word and taking revenge on the analyst instead of taking revenge on the mother.

The analyst points out that the patient’s wish is to have everything at the same time. But she is not able to integrate; instead, she splits. In the (re-)encounter with an incisive “analysing” woman (mother), the patient develops huge anxieties concerning her destructive potency, anxieties resulting from her experiences with the neglecting early mother as well as her own fantasies. She defends against these anxieties with idealising and merging wishes/fantasies (and, so, indirectly destructive), which are, at the same time, the deep, longing wishes of the toddler. As all this is activated within the analysis, we are allowed to hope that the analyst will help her to establish a more developed object relation with her to permit the patient differentiate and grow.

References


CHAPTER THIRTEEN

A woman looking for a woman

F. Göver Kazancıoğlu and Elda Abrevaya

When I started to prepare this paper, a study done by the anthropologist, Walter Ong, immediately came to mind. Ong, in his paper, “World as view and world as event” (1969), wrote as follows on existence and the transitional subjective experience:

When I walk alone through a dark wood at night and hear what I know is the branch of one tree rubbing against another in the breeze, I cannot keep my imagination from persistently suggesting that the noise is the voice of some living being, and indeed of some person who, being otherwise unknown and of uncertain intent, may well wish to harm me. (p. 647)

My fantasy, says Walter Ong, is the existence of others around us. He continues as follows:

Every infant is initiated into an awareness of himself from the beginning in a context of persons who mediate the exterior world to him, and he can never after release himself from that context. Where persons are missing, he projects them. (p. 647)

Just like the people we project into the darkness of the woods.
The adolescent girl whom I will write about also makes me think of a person who walks alone in the forest; she tries to make sense of the sounds around her, assuming that there is someone there, someone uncanny and unpredictable, but there.

First encounter with the family

Deniz, the name I have given her for this chapter, means “sea” in Turkish. Deniz was brought for psychotherapy by her family at the age of sixteen because of her homosexuality. At the time, her mother was in psychotherapy and her psychotherapist had referred them to me. The parents did not bring Deniz to the first interview because they wanted to talk alone with me. Deniz was the only child of this couple, who were somewhat older than the parents of her peers. They sought counselling because Deniz described herself as a lesbian, but they did not believe it. Another reason for their request for psychotherapy was that previously they had received therapeutic assistance, particularly for Deniz’s attention deficit and hyperactivity, but they had not sought any help regarding her homosexuality. When asked about their opinion on what Deniz could be going through, they said that they could not make any sense of it. She was a very lively and affectionate child, and they could not understand why she was involved in such relationships. What was striking about their request for help was that the father and the mother had different reasons for bringing their daughter to psychotherapy. This situation brings to mind the difference that existed between the parents of the young homosexual whom Freud (1920a) had treated. In that case, each parent had a different reason for wishing to treat their daughter’s homosexuality. The father wished that by treating his daughter’s homosexuality, she could get married and have a family. The mother, at the beginning, had perceived her beautiful daughter’s homosexuality as an advantage because, in this way, she would not be a rival for her. Then she had changed her mind when she could no longer tolerate her daughter’s provocations when she publicly exhibited her relation with the society lady.

In Deniz’s case, her father complained that she distanced herself both physically and emotionally from her family and home, not placing too much importance on his daughter’s homosexuality, whereas her mother said that her relationships with girls were unacceptable.
She could not believe in something like that and eventually she thought that Deniz would find “the right way”; otherwise how could she get married and have a child? Thus, by asking me to treat their daughter’s homosexuality, the mother expected to get help for her to form a “right” relationship, get married, and have a child, whereas the father expected me “to connect Deniz to her home”.

The father was in his fifties but looked older; he was a calm-looking person who talked very slowly and in a detailed manner. He was an engineer and worked as a senior manager at a company. The mother, a retired teacher, was the same age as her husband. At first sight, her heavy make-up struck me as if it were a mask hiding her depression. The word, “big” could be an apt description for her: big earrings, big necklace, big eyes, a big body. As can be imagined by my description, I had the sense that she was a woman who occupied “too much” space and probably too little space was reserved for her daughter. In the first interview that I had with Deniz, I noticed that she did not look like her mother. The mother complained about her husband always making compromises and not being able to establish boundaries for Deniz. In the following sessions with the parents, I felt that the father was soft and tender, more like a mother, whereas the mother was dominant and rigid. The parents’ own family histories revealed that the father had an intense physical and psychological attachment to his mother until an advanced age. It seemed that his daughter came to substitute for his own mother. On the other hand, Deniz’s mother had a conflictual relationship with her own mother that might have prevented her establishing a deep bond with her daughter. It was significant to note that neither of them talked about their own fathers.

At the end of the first interview, the parents told me that they wanted to share important information with me. Deniz was adopted and they had told her the truth when she was about four and a half years old, with the help of specialist counsellors. There had been no difficulty for Deniz in regard to this issue. Until the time of the consultation, Deniz had not asked any questions about her adoption and, therefore, they did not think that talking about it was necessary. The question of adoption could not be talked about by them and, significantly, it had been via the “problem” of her homosexuality that the issue of adoption could be brought up.

It had been the father who had “found” Deniz at the orphanage and then they had decided to adopt her. “Among all the babies, she
was the one who had looked and smiled at me,” said the father. It seemed as if “baby Deniz” first came into existence not in the mother’s eyes, but in the father’s. The parents had to wait for nine months to adopt her because of procedural difficulties. This time interval could be considered a kind of pregnancy, as if both parents had become pregnant with Deniz and then had waited for the delivery. Of course, this period was full of intense anxieties, rather than pleasure. The father described that period almost tearfully, describing how painful it must have been for baby Deniz. It was evident that he had identified himself with her. Finally, Deniz was with them at home. The mother used to embrace Deniz frequently on her bare skin, emphasising the “skin-to-skin contact”. She had raised Deniz on her breast because she thought that Deniz was yearning for the mother’s smell and body. The parents seemed to talk about their own needs as if they were Deniz’s needs. The mother’s need to create a symbiotic bond with her daughter through the “skin-to-skin contact” seemed to disclose a deep need for union with her own mother. Deniz had lost the mother who had given birth to her and the link she experienced with her adoptive mother was through an “eroticised relationship”, in the absence of a psychical bond.

When Deniz was around three years old, the parents moved to another neighbourhood so that she would not learn from the people around that she was adopted. The mother talked about these issues in such a way as to emphasise all the things they had sacrificed for her: “We have done so many things for her, gave her everything we had; we even changed our lives, but see what she is doing to us!” Deniz was very active as a baby and also as a child. She did not have any developmental problems. After she started school, she was diagnosed as having attention deficit disorder and had problems at school. The separation from her mother and family led to the manifestation of her difficulties. At this point, we can say that difficult encounters had started for Deniz. She had been abandoned by her biological mother on the day she was born and had stayed in the orphanage for a long time before being adopted by parents who suffered from intense anxieties. If we consider that the reception class represents an important separation from the family, we can then conceive of the difficulties Deniz had during this period as an intense anxiety situation rather than a problem of attention deficit disorder. Deniz used to run away from school in the first year, and she would be found in a park, sitting
or walking around. This was interesting to hear, because it is not usual for a seven-year-old girl to run away from school and it evoked an image of a little girl walking around the trees in the wood as if searching for something.

First encounter with Deniz

In her first interview, Deniz looked very willing to communicate with me even though she had come upon the request of her parents. Most of the time, she acted like an active, mischievous child. However, physically she looked like an adolescent girl who was tall and chubby with green eyes and long reddish hair. She gestured a lot with her hands, laughing frequently, and could not sit still. She even took a small bit of Playdoh from the table near her and suddenly threw it at me. When I caught it, she laughed, saying, “You caught it!” with pleasure, but also as if she were testing me. She seemed excited. Her use of Playdoh moved me. In general at her age, adolescents do not tend to use toys and other objects that are on the play table; actually, they seem to hate them. But I thought that Deniz wanted to establish a relationship with me by playing like a child. However, what was significant in her history was the absence of childhood memories where she had played with her mother.

Then she began to talk about her relationship with her girlfriend and her sexual choice and how she felt compelled to be with women. She could do nothing about it; she did not like boys. She remembered how, in her childhood, she used to play with boys’ toys and that her role model was her father, and she felt that she loved him more than her mother. She particularly liked to wear her father’s clothes and carry his briefcases. It was striking for me to observe that Deniz carried bags that were neither girlish nor boyish. All through her psychotherapy she continued to use similar bags.

She referred to her relationship with her mother as being conflictual. They frequently fought with each other. She angrily told me that they could not communicate with each other and she did not feel close to her, implying that they were very different. Then, she started to tell me, with intense sadness, that she had a girlfriend and that she suffered very much in this relationship. She felt the same frustration that she experienced with her mother. While she was talking about her
relationship with her mother and then with her girlfriend, she seemed to describe a relationship in which the two persons involved could not come together psychically. The relationship with the girlfriend was the repetition of her relationship with the mother. What was she looking for that she was not able to find in these relationships? Her relationships with her girlfriends came to repeat the dissatisfaction of her relationship with the mother. What was at stake was the impossibility of identifying with her. But what stood behind this impossibility was her being cut off forever from the ties that linked her to the woman who had given birth to her, her biological mother. It was like a double wound. She felt that she was not loved, her sadness was provoked by being the person who always made demands on her partner, but she then felt cheated when the object abandoned her.

Immediately after she had talked about her mother and her girlfriend, she told me that her parents were not her real parents and that they had adopted her. She mentioned this in a mechanical way as if it were a minor detail. There was no sign of the emotionality that she demonstrated when she talked about her other relationships. It seemed as if her feelings were frozen. I felt a chill while listening to her. She felt nothing because there could be no representation of such an early and traumatic separation from the biological mother. On the other hand, the parents did not have any clue about what it meant to be separated at birth from the mother, and neither did they establish any link between Deniz’s problems and the traumatic loss experienced by her. In fact, Deniz wanted to love and be loved like a baby, particularly in her close relationship with her girlfriend. By trying to create or recreate a mother–infant relationship with her partner, she seemed in search of the traces of the infantile. On the other hand, she tried through her female partners to establish the identical. In her close relationship with her partners, she sometimes turned into a stalker, leaving no space to the other. She wanted to meet her friend every day and called her several times when they could not meet. If she could not reach her, she felt suspicious, thinking that she was with somebody else, and went to her house to wait for her on the doorstep. Her behaviour reminded me of the young homosexual patient of Freud’s, who would wait for hours for the beloved on her doorstep. No prohibitions and no supervision hindered the girl from seizing every one of her rare opportunities of being together with her beloved, of ascertaining all her habits, of waiting her for hours outside her door or at
a tram stop, of sending her gifts of flowers and so on (Freud, 1920a, p. 147).

In the beginning of our work, during the family meetings in which Deniz also participated, the father frequently used to say that she was a “special child”: in spite of being abandoned by her biological family in very adverse circumstances, she had been capable of survival and she was very talented, whereas her mother considered that she was different from other children. Her father described her as a miracle, while her mother talked about a difference that was negative. She kept saying “Deniz will find the right way.” Deniz reacted to her mother’s words, expressing that “There is a child in their mind but I am not special or different, I am not the child of their dreams.” But her reaction did not lead to any change in their attitude. It seemed as if the mother was looking for one thing in Deniz and the father was looking for something else! They were unable to hear an opinion that was different from their own. Deniz could not have a real communication with them. She seemed as if she were constantly searching for something; this something was a maternal body to belong to. She was repeatedly looking for the missing one, that is to say, the lost body of her mother.

One day the father said, “Deniz is very angry towards us. She acts as if she does not love us, but she was not like that in her childhood. She wrote poems for us. She was full of love. I brought two of them.” He gave me two poems written by Deniz at the age of eight years, one intended for the father and the other for the mother.

The wish to belong to a family and her difficulty in establishing a bond with her mother can be noted in the poem written for the mother. We can note that there are many grammatical mistakes, especially with verbs. The mistakes in the poem have been left in parenthesis.

My Mummy

I love you so much
That, your hair spins—(spuns).
That, my eyes now have been crying my dear mummy—(crying).
I’ve never done such a thing again—(do).
Please forgive me, forgive me—(forgiv).
If I make you sorry, I am so sorry—(sorr).
Please I beg you please forgive me, please forgive me mummy.  
Maybe now who knows how much I miss.  
You’ve never loved me—(’ve never loved me)  
You and my father are very very very very good mother and father  
We are family  
We all want to be a family—(I all want to be family)

In the case of the poem written for the father, we can note that she had made fewer grammatical mistakes.

*My Daddy*

My dear daddy I love you so much.  
That, your beautiful eyes are beautiful.  
I love you like I love the flowers.  
You are the best father in the world.  
My dear daddy.  
That, your hair spins—(spuns).  
You are my pencil’s writing.  
I love you more than flowers  
That, your eyes are shining  
You remember me on your glasses.  
I love you more than flowers and fruits.  
My dear daddy, I feel so sorry when you shout.  
I do not make you sorry daddy.  
I’ve never made you sorry daddy.  
I am sorry when you are late.  
I kiss you on your cheeks  
I thank you for kissing me in the mornings.

The phrase in the poem written for the father, “your eyes are shining”, was significant. Deniz felt that she existed thanks to the gaze of the father and that was what made her alive and connected. But she could not see herself in her mother’s face or eyes. Winnicott (1971) discusses the importance of the mirroring role of the mother:

What does the baby see when he or she looks at the mother’s face? I am suggesting that, ordinarily, what the baby sees is himself or herself. In other words the mother is looking at the baby and what she looks like is related to what she sees there. All this is too easily taken for granted. . . . I can make my point by going straight over to the case
of the baby whose mother reflects her own mood or, worse still the rigidity of her own defences. In such a case what does the baby see?
(p. 151)

The symbolisation of disappearance and absence

In the first period of her therapy, Deniz continued working on the difficulties she had with her partner. This relationship had continued throughout her high school years, and she never really felt that it was significant for her. In her own words, through this relationship, she tried to understand why she had made this sexual choice. Meanwhile, she had entered university and started to study design, a project that she always dreamed of. After having separated from her girlfriend, she started new relationships with several girls, one after the other. These girls were younger than her, usually in high school, so she was their “first” lover. It was very important for her to be “the first”. She chose girls who had had relationships with boys and whose first homosexual relation would be with her. She noticed that, in her relationships with them, she wished to take care of them and be on their mind all the time.

Gradually, she started to feel curious about her biological mother and her family. After the sessions in which she manifested such curiosity, she would frequently and suddenly disappear from the sessions and then come back after having found a new girlfriend, sometimes even two. Her absence from these sessions were sometimes accompanied by her disappearance from her family. She suddenly decided to leave the city and spend two weeks in another city where a close friend or a lover lived. In these sessions, whenever I felt that we were working psychically in tune with each other, the feeling that I would lose her would creep into my mind. One moment she was present, the next she was absent. Whenever she felt herself “present” with me and that she had found a mother and a woman in the transference, she had to “disappear”.

Sometimes, there were periods in which she would not come to sessions for a few weeks, especially after summer breaks. However, in spite of all the difficulties she was gradually able to follow the traces of her internal world. At the end of the sessions I would note that she would leave physical traces on her seat, such as very small pieces of
tissue, Playdoh, but more frequently pieces of tissue. On the other hand, these small pieces of tissue, which she manipulated during the session, symbolised the tears that she could not shed. The increase of her curiosity towards her internal world manifested through the questions she used to ask me: “Why did my biological mother leave me? I wonder if she’s forgotten me.” This curiosity opened the way to think about the possible motives that lay behind her biological mother’s act. Then came a dream. It was the first dream that she brought to the sessions:

“In my dream, I shouted ‘Mum’ but my voice was not audible; I felt paralysed, I could not move. Then, suddenly I said ‘Mum, can I sleep with you?’ and my mother replied ‘OK’ and I felt that my mother totally disappeared.”

Just as in the sessions, in the dream, the moment she found her mother, the object disappeared. In sessions, she would symbolise the sudden disappearance of the object by disappearing herself. After this dream, she saw a black hole on the carpet of the office. “Maybe, I had been alone on the carpet like that in the orphanage.” Through this dream, Deniz established a link for the first time with her feelings that belonged to the period when she stayed in the orphanage. She could work through the traumatic experience of her mother’s disappearance and her sense of loss as a baby in a session a year later. However, it was only possible to put into words the deep deprivation that she felt through the sense of loneliness that she must have felt in the orphanage. Evidently, this black hole was related to the sudden disappearance and loss of her mother. She started one session by saying, “It seems as if children of love are prone to be abandoned. They come in such an unexpected moment that it is hard to deal with.” In this way, she seemed to build a story in which she was, as a child, the fruit of love and desire of a couple.

She kept asking me questions for a few sessions. She would look at the Playdoh on the table, and then would say, “Its colour has changed”, and then add, “There is something different about you.” She repeated this sentence: “There is something about you.” Then a new period began in which she kept asking me questions, and one day she asked me, “Do you have a child? I do not know anything about you. I supposed you are married but your husband does not
even have a name”, and continued, smiling, “Everything is in your mind.” She took some family figures from the toy box nearby. “A woman and a man make a baby without thinking. I made a baby with Playdoh but it looks half-human and half-animal. Is there anything different about you?” Then I told her that she sensed a change in me, and that I was pregnant. She was surprised and said, “Congratulations.” This was the first and last talk we had about my pregnancy. She did not come to the next sessions. When she came back she kept on saying that she did not need therapy. She did not want to hear my interpretations, which tried to establish the connection between her discovering my pregnancy and her absence. During our work until then, she had disappeared several times; she had once attempted to drop out of therapy following a summer break, and she had made herself unavailable or inaccessible for many sessions, but this time the situation was different. She began to create severe problems regarding the frame. She would not pay the fee. She said that she would not pay for the sessions in which she was absent. It was evident that there was an attack on the links (Bion, 1984) we had established.

Until that point, she had been open to interpretations even in the most difficult moments, but this time she was not willing to open up any space for them. Her resistance to continue to work coincided with the time of her birthday. Until then, she was the one who went and came back, who destroyed and repaired again, and I was the one who was somehow stable. As she had told me in one session, it was the only permanent, stable place and relationship in her life. However, this time, by leaving therapy, she reproduced the traumatic abandonment by her mother whom she could not remember and represent. It was a repetition of a very early trauma that was like a black hole that could not be symbolised. Through her provocations in regard to the frame, she aimed to get herself thrown out of therapy. On the other hand, I was going through a difficult pregnancy that also prevented me from managing her attacks on the frame. She seemed to identify with the mother who had abandoned her, and, thus, turned the aggression towards herself. Because of this rupture, we missed the opportunity to elaborate the trauma. When she returned much later to psychotherapy, she expressed that it would have been so valuable if she could have stayed with me and worked through this tumultuous period that had revived the trauma of her birth and abandonment by her biological mother.
Two years later, she called me during the month of her birthday, and said that she wished to continue her therapy and asked if I had time to see her. I scheduled an appointment and she came ten minutes late, as she usually did. She jokingly said, “I did not want to break the tradition” and asked me, “How are you? I feel better. I have not graduated from university, but I have one year left. I wanted to come again but this time it is my own will to do so, not my parents’. As my friends work and earn money, they are freer, but I am not. I do not have any other choice. I need to grow up. Life is knocking on my door. I run away from difficult things; I also ran away from here. It would have been better if I could have stayed, but it was impossible for me.” Then she asked, “How old is your child? Is she walking?” In spite of her need to destroy our therapeutic work that was going on, it seemed that, in my absence, she could identify with a good mother who could take care of her child. So, in this sense, she could identify with the good mother, as well as with the child who was taken care of. She looked out of the window. She was tearful: “Nothing remains the same, isn’t it true?” She was silent for a while. “Why can’t I move on? Why do I always want to remain still?” After a silence, she continued, “It is like pretending to be dead. It is as if you are alive but you have to remain like you are dead.”

Deniz restarted psychotherapy, first once a week and then twice a week. She either came late to her sessions or did not come at all, sometimes without informing me. I usually found myself in a position of waiting: “a woman waiting for a woman” or “a woman looking for a woman”. Perhaps I was like a child who was sitting and waiting alone in the park, just as she had been at the age of seven. Sometimes I felt angry and sometimes anxious, because I did not know when or if she would come back. But sometimes she surprised me.

A lost story that was found

During a period in which she was deeply engaged in her therapy and came twice a week, she arrived much earlier than usual for her session. It was a stormy and cold day and I thought that maybe she would not arrive and use the weather as an excuse. Her arrival was a surprise for me but I should not have forgotten that Deniz was, as her father described her, a “person of difficult conditions” and she would
survive in the hardest conditions. She looked out of the window and said, “It’s very cold outside. I feel uneasy. I also had a conflict with Leyla [her girlfriend]. When something goes well it disturbs me and I want to destroy it. I feel that I do not deserve something good.” She had come early to the session in a needy way, looking for warmth, as if she wanted to return to the womb. She felt free to express her need, but this needy position created anxiety. She was silent for a long time. Then she continued, “It’s interesting, I sit here with you; seasons change outside. I had come in summer and my clothes and your clothes change. You are the same, I change slightly.” Jokingly, she said, “Until now, I haven’t seen any exaggeration on your part.” And then she looked at her hands: “The human body is very interesting, it adjusts to every condition, for example, when it moves from cold to warm or warm to cold” and then she slowed down and paused. Deniz seemed to be describing a doctor’s hands that help a baby come out into the world from the warmth of the womb. She paused for a moment, then went on with her story.

“As I was walking down the road, I found a lonely pinecone; I took it with me and brought it home. It was a closed cone. I put it on my bookshelf. It started to open up gradually. I was very scared, really very scared. Some parts were open, some parts were still closed. Then, I decided to make different designs of it. What was dead transformed into a very aesthetic form. I modelled its last form in the studio. I will put it in my room. Then, I found another pinecone on the way and I took it as well. They open up in summer, don’t they? They open in warm weather? However, this one has not opened like the previous one; it is a pinecone that is difficult to open up. [She smiled.] I talked so much about the pinecone.”

At this point, I offered her the following interpretation: “Today, when you arrived here, you began to talk about the cold outside. Maybe a pinecone that closes in the cold and opens in the warm describes you.” Deniz replied, smiling, “I might be a pinecone.” The session was over. While she was walking out of the door, she said: “I came with my wind and I am leaving with my wind”, in a witty and theatrical manner.

As could be expected, after such an intense session, Deniz was not able to come to the following one. She had found an object that could represent her, her being. Like the pinecone that opened, she could also open psychically, letting her feelings go, without feeling threatened.
Then she found another object in the street, but this one was not like a pinecone. It aroused a feeling of dread.

“The other day I found a deer head with its horns broken. I had seen it on a junk dealer’s cart. I walked in the streets with that huge deer head. People stared at it. I took it to my studio to make a self-portrait out of it.” She had opened the session with the image of the deer’s head and I was frozen. She narrated this story as if it were the most common, ordinary thing. It was with exactly the same neutral tone that she had told me the first time we met how she had been abandoned when she was born.

And she continued: “A deer head with horns cut off . . . but a deer is a formidable creature. It is an imposing animal of the forest. It stands on the top of a hill, formidable and alone, a male. But I think those without horns are females.” When I said, “Yours had his horns broken”, she smiled and continued: “Just like me, neither male nor female.”

When the session ended, I made the following notes. A short while ago, Deniz was wandering in the streets when she ran into a pinecone and took it home. She is roaming in the streets once more and with a deer head this time. Just like the pinecone, she had taken the deer head to her workshop, where she turned it into an artistic creation, in search of self-representation. Her search for herself continues. It had begun in the streets, just like her story. She wanted to make an artistic creation with the deer head, and convert it into a “happening”; she was looking for the reactions, stares, and voices of people, as she was wandering in the streets with it. Just as with the image of the anthropologist, Ong, of a man wandering in the forest, she was like a deer wandering in the forest: formidable but alone. And, as alone as she was, she was still looking for people who would react and give out a sound.

Following the series of objects, like the pinecone and the deer head that represented her, came a third one. But this time it was not a concrete object but the internal image of herself. In a session before our long summer break, she brought the image of a “porcelain girl” who was inside her. She felt as fragile and sensitive as a “porcelain girl” who could fall apart because of my forthcoming absence. What the “porcelain girl” had in common with the deer head was its vulnerability. She feared that she would break into pieces during my absence. But, on our return at the end of the summer holiday, I discovered that this porcelain girl had been transformed. The fragile,
sensitive girl had not fallen into pieces and the lifeless porcelain girl had been converted into a real girl: “Last night when I was looking at the mirror, I felt that there was a small girl in pink pyjamas.”

Winnicott (1971) stated that there are babies who look at their mother’s face and cannot see themselves. Their creative capacity is blocked and what they see is a face that cannot serve as a mirror. “If the mother’s face is unresponsive, then a mirror is a thing to be looked at but not to be looked into” (p. 152).

Deniz could now see herself in the analyst’s mirror. Moreover, her creative capacity had come to life. Deniz, at the age of twenty-three, had accomplished her dream of having a design studio where she could think by herself and work. Usually, she would attend the first session of the week and would not come to the second. I realised that during the sessions she attended, she worked with herself, searching for her inner world in the presence of the analyst. In her absence, she created an artistic piece through an object that she found in the street. She missed sessions to create a distance between us and symbolise the absence of the object. At the beginning of the therapeutic process, during the missed sessions she used to get involved with her girlfriends, introducing the other between us. But now I realise that even though Deniz did not come regularly to sessions, she continued with her inner work through the objects she created artistically. I can grasp this change by looking at the changes in myself. At first I was like an anxious or sometimes guilty mother waiting for her. Then I turned into an angry mother, and sometimes into the mother who forgets her. Now I am more like a mother who says, “She must have forgotten, but she should be OK”, and continues with her life. “Against all odds”, Deniz is undergoing transformations, like the clay that changes in her hands while she shapes her inner world like a sculptor. Obviously this path into her inner darkness, just like the dark path in the forest, requires courage to navigate.

**Conclusion**

If we examine Deniz’s homosexuality, we can note that it is closely related to the conflicts in regard to her identity. She tried to create and recreate the mother and child relationship through her relationships with girls who were younger than her. In other words, her search for
a mother was inevitably connected to her adoption and, ultimately, with her desire to find the biological mother. The girl's primary identification with the mother makes the construction of a female identity possible. Deniz could not identify with the feminine and maternal qualities of the adopted mother. In this sense, there were gaps on the level of primary and secondary identifications. In her relations with girls, she searched for a female figure who could serve her as a mirror. Tesone in his discussion of Cournut’s chapter, refers to Ternynck (2001), who underlines the mirror dimension of the homosexual couple and to what extent the relationship contributes to repair the narcissistic wounds and, particularly, to stabilise a fragile identity.

The questions Deniz raised during the therapeutic process were related to her being and the meaning of her existence. “Why am I wanted?” Through her relationships with her girlfriends, she seemed to pose the following question: “Do I exist to make others feel good?” This interrogation came down to a fundamental question: “Does my mother really love me?” However, the most important one was: “Does my mother love me because I am who I am?” She was looking for a woman, a mother that would love her just because she was “Deniz”. She wished to be loved in this world not as a lesbian, but as “Deniz”. She wanted to be loved unconditionally by her mother.

Note

1. The case material is FGK’s, and EA contributed jointly to the discussion.

References

SUMMARY

The clinical chapters: some concluding thoughts

Elda Abrevaya

In contrast to times when existing cultural representations of gender and sexuality led analysts to consider that homosexuality should be treated as a pathology, the theoretical and clinical work presented in this book clearly demonstrates that there is no special technique to be adapted to homosexual patients. The same psychoanalytic principles apply to all types of patients. However, for the heterosexual analyst, the analytic work with a homosexual patient can create some countertransferential difficulties, contributed to in part by his or her cultural representations about gender differences and requires their working through. As Ralph Roughton underlines, the analyst has to work with his assumptions and beliefs about what is sexually normative and be aware of his prejudices against homosexuality.

As we summarised in the Introduction, when the cases presented in this book were reviewed, we noted that there is no typical development of homosexuality. In each of them, the object choice can only be grasped by examining its psychogenesis, that is, the psychic history of the subject and its vicissitudes. When we examine Raquel Cavaleiro’s male analysand, or Ayşe Kurtul’s and Ester Palerm’s female analysands, we note that they had consulted the analyst not for
conflicts in the sphere of their sexual choice, but for their suffering from narcissistic wounds and depression. In the case of Cavaleiro’s and Kurtul’s patients where the relation with the object was undifferentiated, it does not, therefore, seem possible to speak of homosexuality as a sexual choice, as Martina Burdet would suggest. Here, confusion with the object is accompanied by other defences, such as infantile megalomania, or perversion. The object is significant to the extent that it provides narcissistic satisfaction.

Ester Palerm’s female analysand suffered from depression so that confusion with the object was not the main trait of her psychic world. More precisely, it was the impossibility of separating psychically from the mother that maintained her depression. Since her childhood, she had felt compelled to satisfy her mother’s needs at the expense of denying her own. In the case of a woman, separation and differentiation from the mother are necessary to experience the object with pleasure and, of course, the erotic object, be it heterosexual or homosexual. The homosexuality of Palerm’s patient seemed to be a means of not entering into competition with the mother. She could not risk losing the object, which could lead to melancholic grief. Even if homosexual object choice can be a means of avoiding oedipal rivalry with the parent of the same sex both in men and women, there is, however, a significant difference with the latter. For the girl, going towards the father is accompanied by the threat of losing the primary object. Freud, in 1926, viewed the threat of losing the mother for the girl as equivalent to the anxiety of castration in the boy.

Göver Kazancıoğlu’s female patient was an adolescent when she was brought to psychotherapy by her parents. In her case, the search for a woman was intimately related to her abandonment by the biological mother and to that of her adoption. Her adopted mother had not been able to provide the primary and secondary identifications that would make the experience of femininity possible. The female partners served as a narcissistic mirror, a function that is essential during adolescence.

On the other hand, we note that the narcissistic dimension constituted by “sameness” (homos) is not only a characteristic of adolescence, but also an essential trait of the homosexual couple in adulthood. According to Jacques André, the “sameness” of the homosexual couple is the cement that binds it and confers stability to it, whereas heterosexual love is very fragile and capricious. In this sense,
sexual difference represents a threat for each sex and reminds us, as Freud put it, of the impossibility of fully satisfying the sexual drive. Infantile sexuality and the prohibition of incest contribute to this impossibility.
AFTERWORD

Frances Thomson-Salo

This book offers many perspectives on current conceptualisations of the homosexualities, with a vibrancy that comes across in the work presented here. Otto Kernberg, who, as President of the International Psychoanalytical Association fifteen years ago, founded the Committee on Women and Psychoanalysis, felt that in the year of publication of this book there was still more to explore about early gender differences. Our hope is to have added in some small way to increasing knowledge, not only for those working in the field, but above all for those individuals and families whose lives and imagination are touched if we develop new ways of understanding those who present to us in the hope of further understanding themselves in order to reach a deeper fulfilment in the lives they lead.

The sadness of many who feel that they are not seen or accepted for who they are emerges often poignantly and at times painfully in the chapters in this book. In offering this array of clinical expertise and conceptualisations, therefore, we hope that it will speak to all those exploring and expressing their sexuality in order to find and inhabit themselves.

We thank again those who have allowed us to share some aspects of their journey in exploring and struggling toward a resolution of gender conflict and identity, ultimately to offer understanding and support to others.
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