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# Be Careful What You Wish For! The Surrender of Gender

*Ann D'ercole*

Close examination of Freud's *Three Essays on the Theory of Sexuality* **(1905a)** reveals an ambiguity in Freud's language as he simultaneously tries to escape 19th-century psychiatric paradigms concerning sexuality and perversion while also retaining a normative approach to adult sexuality that created new categories of pathology. The result is an ambivalent legacy that has both hampered and helped contemporary clinicians as they deal with a diverse array of presentations of gender and sexual orientation in today's world.

It has been more than two decades since Mitchell **(1991)** declared that psychoanalysis was in the midst of a crucial transitional phase. He was right. At the time, psychoanalysis was being pulled into its own version of the culture wars. Mitchell, well versed in the neglected issues of power and authority in psychoanalysis, was wrestling with the classical psychoanalytic model's view of wishes and needs and how that could be supplemented by relational and interpersonal concepts. He noted that during a transitional phase, we are forced to struggle with the problem of how to assimilate and utilize our past traditions in order to best serve our current needs.

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Now Editor Jay Greenberg and *The Psychoanalytic Quarterly* have taken this question squarely into an area of contemporary controversy by asking contributors to grapple specifically with the question of whether and to what extent Freud's discussion of “The Sexual Aberrations” in the *Three Essays on the Theory of Sexuality* **(1905a)** should continue to inform contemporary clinical practice. Freud's essay treats the category of *perversion* as a given, although, as this paper will discuss, Freud was principally interested in deconstructing what the category contained—to a point. The challenge, again, is to sort out what is useful from our psychoanalytic legacy, here in the realm of gender and sexuality, and to determine how the past can be used to serve contemporary practice.

The editors' challenge comes at a moment when the “culture wars,” a metaphor for the deeply conflicting cultural values pertaining to sex and gender in society, are rumored to be in decline **(Hunter 1991)**. Truthfully, culture wars are not rare; in an era of mass communication, they are almost the rule. During the 1960s and '70s, heated debates raged about the use and abuse of the American flag, racial integration, and abortion rights. Each topic seemed, and to many still seems, to be holding important implications for the meaning and function of social relationships in general.

By the 1980s, gender and sexuality had moved into prominence as central elements in cultural debates, with social traditionalists occupying one side of the controversy and social progressives the other. In the years since, despite an impassioned rear-guard action by conservatives, we have been moving away from static notions of male and female. Indeed, a majority of Americans have increasingly embraced sexual equality and equal rights for the panoply of varying subjectivities contained within the currently diverse spectrum of sex and gender, finding common ground under the rubrics of fluidity, liberation, and civil rights.

A hallmark of this evolution is the crucial moment when the American Psychiatric Association removed homosexuality from its diagnostic manual **(Drescher 2010)**. Psychoanalysts followed suit with the new approach only slowly, but follow they did. In 2014, we find ourselves in the midst of an exciting—though perhaps alarming and somewhat confusing—cultural moment, when the deconstructed notions of male and female and what is required for each have been cracked open. And,

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importantly, they have been placed beyond the old clinical and pathologizing approaches, to a large extent.

Be careful what you wish for! If I had been asked in the 1970s how things would go, I could not have guessed that gender would take the turn it has. I am both surprised and pleased, but also concerned and hesitant. It is what we were hoping for, yet never really planning on.

## Sexual Aberrations

In “The Sexual Aberrations,” the first chapter in *Three Essays on the Theory of Sexuality* **(1905a)**, Freud provides a tour-de-force demonstration of his theorizing. It is easily the most lucid of the three essays and still a pleasure to read, even though it contains much that was shocking to his contemporaries and remains shocking, in a different way, to modern analysts. It begins with an insightful survey of contemporaneous psychiatric and neurological opinions about “perversion” and then evolves into a discussion of symptom formation in

neurotic patients, with the symptoms reconceptualized as the "negative" of perversions.

This takes place before heading into the root topic of infantile sexuality, where both perversions and neurotic symptoms are said to originate. The latter topic is then sketchily developed further in the second essay, "Infantile Sexuality," which emphasizes behavioral similarities between infantile sexual manifestations and neurotic symptoms. Between the two essays, "libido theory" is born, although important aspects of it remain to be presented, again in essentially sketchy ways, in the third essay, "The Transformations of Puberty."

Throughout the essays, Freud makes important assertions on a variety of topics while using a deconstructive method to debunk prevailing myths, including the degeneracy theory in vogue in his time. One of the most staggering assertions he offers in place of the notions he discards is that bisexuality is "the decisive factor" (**1905a**, p. 220) in human sexual development, yet this contribution, if it is one, remains largely undiscussed. As for the category of "perversion," Freud shifts the theoretical ground decisively but retains the term and a sense of approbation, nevertheless. In the end, there is no "libido theory" without "perversion," though what makes perversion "perverse" in the final telling is its "infantilism" (see what follows).

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In short, this is a monograph in which one can easily get lost, and it does not help the reader along the way to find her hackles being raised from time to time—although what exactly is doing the raising may vary from one reader to the next. My hackles were raised on my last reading by the passage in which Freud notes the "immense number of women who are prostitutes" (**1905a**, p. 191) or who have an "aptitude" for this. It is easy to imagine some readers feeling provoked, especially as it is not always clear what direction he is coming from, and deciding that perhaps it would be better to practice some selective inattention and slide by it entirely. After all, if we just jettison the *Three Essays* in general, and its opening essay in particular, perhaps we can head straight into a brave new psychoanalytic world, fully prepared to address, perhaps even embrace, the diversity of the modern world. Yet be careful what you wish for.

## "Hasty Conclusions"

What is provocative about the *Three Essays* in general and about the "The Sexual Aberrations" in particular? For one thing, it is a radical essay. In the second paragraph, Freud provides the reader with a clear statement of his agenda vis-à-vis the sexual instinct or "libido":

> Popular opinion has quite definite ideas about the nature and characteristics of this sexual instinct. It is generally understood to be absent in childhood, to set in at the time of puberty in connection with the process of coming to maturity and to be revealed in the manifestations of an irresistible attraction exercised by one sex upon the other; while its aim is presumed to be sexual union, or at all events actions leading in that direction. We have every reason to believe, however, that these views give a very false picture of the true situation. If we look into them more closely we shall find that they contain a number of errors, inaccuracies and hasty conclusions. [**1905a**, p. 135]

This is Freud at his most original—challenging conventional "wisdom" and wondering if there is something else at work. He is taking aim at the "popular opinion" of the 19th-century scientific conception of sexuality as a functional unity that is inherently procreative and

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therefore heterosexual, a conception that casts divergent sexualities and gender identities into the netherworld.

What he proceeds to do in the early part of the essay is to demolish that unity by treating first homosexuality ("inversion," in the language of his day, p. 136) and then the perversions proper (voyeurism, sadism and masochism, fetishism, etc.) as different kinds of gradations in an inherently variable instinctual force. Particularly in the case of inversion, Freud goes to some lengths to argue that it is impossible to see this as indicative of hereditary degeneration; among other contrary points, the facts are that many outstanding people have been "homosexuals" and the great civilizations of antiquity valued homosexuality highly.

In more general terms, Freud is detaching from the description of the sexual instinct used by late-19th-century theorists both the expectable "object" (a procreative partner) and an expectable "aim" (propagation). Both object and aim, he contends, in fact show every degree of variation, ranging from the normal to what is called "perverse."

However, as to what that latter pole might be, we still seem to have a 19th-century Freud on our hands:

> Perversions are sexual activities which either (*a*) extend, in an anatomical sense, beyond the regions of the body that are designed for sexual union, or (*b*) linger over the intermediate relations to the sexual object which should normally be traversed rapidly on the path toward the final sexual aim. [**1905a**, p. 150]

A few pages later, Freud changes his tune, as the more radical implications of his own argument catch up with him:

> It is natural that medical men, who first studied perversions in outstanding examples and under special conditions, would have been inclined to regard them, like inversion, as indications of degeneracy or disease. Nevertheless, it is even easier to dispose of that view in this case than in that of inversion. Everyday experience has shown that most of these extensions, or at any rate, the less severe of them, are constituents which are rarely absent from the sexual life of healthy people, and are judged by them no differently from other intimate events. If circumstances favour such an occurrence, normal people too can substitute a

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> perversion of this kind for the normal sexual aim for quite a time, or can find place for the one alongside the other. No healthy person, it appears, can fail to make some addition that might be called perverse to the normal sexual aim; and the universality of this finding is in itself enough to show how inappropriate it is to use the word perversion as a term of reproach. In the sphere of sexual life we are brought up against peculiar, and indeed, insoluble difficulties as soon as we try to draw a sharp line to distinguish mere variations within the range of what is physiological from pathological symptoms. [pp. 160-161]

Here phrases like “or at any rate, the less severe of them” and “might be called perverse” provide an important clue to what is going on and will continue to go on for the rest of the text: Freud needs to retain *perverse* and *perversion* simply to have some way of designating the categories he is talking about. He retains the words in common usage even though he rejects the underlying theories of his predecessors.

The strategy is evident in the boldest of his radical pronouncements, which comes along in another ten pages of text. By this time, Freud has introduced neurotics and their symptoms into the discussion and presented his novel claim that sexuality is *the* motive force behind neurotic symptoms:

> By this I do not merely mean that the energy of the sexual instinct makes a contribution to the forces that maintain the pathological manifestations (the symptoms). I mean expressly to assert that that contribution is the most important and only constant source of energy of the neurosis and that in consequence the sexual life of the persons in question is expressed —whether exclusively or principally or only partly—in these symptoms. As I have put it elsewhere, the symptoms constitute the sexual activity of the patient. [p. 163]

This important statement then gets its important clarification:

> There is no doubt that a large part of the opposition to these views of mind is due to the fact that sexuality, to which I trace back psychoneurotic symptoms, is regarded as though it coincided with the normal sexual instinct. But psycho-analytic teaching goes further than this. It shows that it is by no means

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> only at the cost of the so-called *normal* sexual instinct that these symptoms originate—at any rate such is not exclusively or mainly the case; they also give expression (by conversion) to instincts which would be described as *perverse* in the widest sense of the word if they could be expressed directly in phantasy and action without being diverted from consciousness. Thus symptoms are formed in part at the cost of *abnormal* sexuality; *neuroses are, so to say, the negative of perversions.* [p. 165, italics in original]

Again, we see conventional usage lingering on in phrases like “the so-called *normal* instinct” and “would be described as *perverse* in the widest sense of the word.” But a door has been opened and Freud drives the argument right through it:

> By demonstrating the part played by perverse impulses in the formation of symptoms in the psychoneuroses, we have quite remarkably increased the number of people who might be regarded as perverts. It is not only that neurotics in themselves constitute a very numerous class, but it must also be considered that an unbroken chain bridges the gap between the neuroses in all their manifestations and normality. After all, Moebius could say with justice that we are all to some extent hysterics. Thus the extraordinarily wide dissemination of the perversions forces us to suppose that the disposition to perversions is itself of no great rarity but must form a part of what passes as the normal constitution. [p. 171]

Plain as day: perverse is the new normal.

But just here, when Freud has gone as far as he can within the confines of the language available to him, an important new element enters: infantile sexuality as the root both of the germs of perversion and, when repressed, of neurotic symptoms, which he then takes up in the second essay. Suddenly, all bets are off, for now both neurosis and perversion will be said to reflect a sexuality that has remained in an infantile state—and pathology, albeit developmental pathology, is back in the argument.

The summary section is explicit: although “a disposition to perversions is an original and universal disposition of the human sexual instinct” (**1905a**, p. 231), this is no dispensation from judgment. For, almost immediately, Freud goes on to say that we are “led to regard any

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established aberration from normal sexuality as an instance of developmental inhibition and infantilism” (p. 231). Normativity is back in the argument in the guise of “infantilism.” Bear in mind that Freud's infantilism is based on an infant/baby with “bestial” needs—not our modern infant, thought to possess relational needs (Mitchell **1988**, p. 132).

Having reduced everything democratically to a libido that *normally* ranges far and wide in infancy, Freud must somehow account for the differentiation of various different kinds of adult behavior. This is the subject of the third essay, “The Transformations of Puberty.” In this final leg of his journey, Freud must account for why neurotics look different from “perverts,” on the one hand, and “normals,” on the other, and he must have a developmental scheme that can describe how each got this way while not disturbing what he postulates are the

links to infancy.

A tall order, in any case, and an area where Freud shows much fumbling around—much hurtful fumbling around, we should add. For example, Freud also sees fit here to describe women's sexual development as involving a retreat from clitoral sexuality (**D'Ercole 2011**; see also below). Indeed, insofar as the *Three Essays* has a theory of gender development, it is thoroughly entangled in the tortuous steps and missteps of the arguments pertaining to puberty. (For the record, neither "penis envy" nor "castration anxiety" appear in the original text, and "Oedipus" appears only in a footnote.) Decades passed before Stoller **(1968)** declared that what was passing as biological sex was really a complicated process that begins when society classifies a child as male or female.

In any event, sexual normativity reasserts itself in Freud's discussions of the attainment of the "normal" sexual aim. Heterocentricism is emphasized as Freud struggles with the vagaries of love and attachment—and with masculinity and femininity. "Puberty, which brings about so great an accession of libido in boys, is marked in girls by a fresh wave of *repression*, in which it is precisely clitoridal sexuality that is affected" (**1905a**, p. 220, italics in original). It is in puberty that Freud shapes his theory to fit cultural normativity, as he argues that for a woman to be mature she needs to surrender her susceptibility to stimulation from the clitoris in favor of the vaginal orifice. This becomes a new leading zone for the purposes of her later sexual life.

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A man, on the other hand, retains his leading zone from childhood. Things get very damaging for women as Freud identifies the difficulties that accompany this transfer as accounting for the greater proneness of women to neurosis and hysteria.

When we step back from the text, it seems as though Freud does not notice the snare he is falling into. By positing a normal developmental sequence—even in the abstract—in which all the strands of infantile sexual life, and also of the forces opposing sexuality (principally shame, disgust, and morality), finally get tied together in a mature genital and heterosexual outcome, Freud has ended up precisely where he said at the outset he wasn't going to go. He has put aim and object back together again. He has, in a sense, come to his own hasty conclusion.

## Cross-Purposes

Of interest, Davidson **(1987)** argues that the dynamics of change account for the inconsistencies in the *Three Essays*. Davidson offers an archaeology of discourses concerning what we call *sexual desire* to illuminate how Freud concluded that the sexual instinct had no predetermined object or aim. This attitude should have been firmed up in *Three Essays*, argues Davidson. In fact, he notes, Freud stated as much when he explained that "we have been in the habit of regarding the connection between the sexual instinct and the sexual object as more intimate than it in fact is" (**1905a**, pp. 147-148), and when he straightforwardly stated that "the sexual instinct is in the first instance independent of its object" (p. 148).

But because Freud could not ultimately let go of the concept of perversion, that discovery slips away. Davidson **(1987)** argues that, in effect, Freud was unable to mentalize what he was discovering as he deconstructed sexuality. As a result, he fell back on prevailing conventions and left us a legacy of voices speaking at cross-purposes.

## Seduction and Theory

One might ask: why did Freud take up the argument of "perversion" in the first place? After all, he presents no clinical data about perversion

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in the first essay nor is there any indication that he has any. What he has, although the data are not in this book, derives from the treatment of neurotics, and what he is prepared to argue is that their symptoms show infantile sexual roots. However, infantile sexual roots could have been characterized as infantile sexual roots. So why did he begin with perversion?

The answer to that question requires going back to the seduction theory. One thing that fired Freud's imagination at the time that this theory still held sway in his thinking was that the "memories" of his patients described behaviors in their caregivers that seemed to come right out of the literature on sexual deviation. As he wrote to Fliess on January 3, 1897, "The agreement with the perversions described by Krafft [-Ebing] is a new, valuable confirmation" (Masson **1984**, p. 219). *That* is how "perversion" first got into the argument—to describe the behaviors of the seducers.

Things got more complicated when the seduction theory failed in Freud's mind. If the remembered scenes were actually fantasies, then the adult caregivers did not show perverse trends—the children did! At least, they showed them in their fantasies.

Having obtained these data from his "seduction" cases, Freud would not give them up, even if it meant characterizing the desires of children as perverse. So perversion remained, although its status was transformed. The actual path from the collapse of the seduction theory to the *Three Essays* is full of twists and turns that would be too difficult to follow here, as it was during this period that Freud turned to evolutionary biology as a new foundation for his theorizing. Sulloway's **(1979)** analysis of this conceptual shift is still the most detailed from a history of science viewpoint.

Makari **(2008)** adds the point that, once Freud hit upon the neurosis-is-the-negative-of perversion formula, he found a very large gift in the literature on perversion:

> Once, the copiously documented perversions had been stumbling blocks for Freud and his theory of neurosis. With this analogy, they became his Rosetta stone for knowing that seemingly unknowable region, the unconscious. [p. 99; see also p. 105]

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Freud now realized that what he was looking for in the associations of his neurotic patients were indications of fantasies of engaging in the behaviors Krafft-Ebing and others had already described. The net result is that, amid all the excitements of revised theory building, Freud almost seems not to notice that at the end of the day perversity, still defined pejoratively but on a new basis, is still there. This perhaps adds a new wrinkle to Davidson's **(1987)** argument that Freud held on to the concept of perversion because of a mentation problem. (There was something else distracting Freud as well—bisexuality—which I will get to in what follows.)

## An Uncertain Normativity

The conceptual innovation of discarding *perversion* as a meaningful category is one that was difficult for Freud because it rubbed against his cultural values. In the end, he could not fully take it in and left an uncertain normativity **(Davidson 1987)**, as he abandoned the more radical aspects of his theory in favor of a view of mature genitality. This decision left the field with a basic uncertainty over how to approach the topic of the "perverse" and some diverse opinions, to say the least.

One of the more damaging examples of this played out in the post-World War II era in a popular book by Bergler **(1956)**, who brought moralizing and condemning statements to a public eager to rely on professionals. He promoted a harmful environment for many gay individuals with his rhetoric, which included such blanket judgments as: "Homosexuals display an amount of irrational and violent jealousy unparalleled in heterosexual relationships. Even in the rare cases of long lasting homosexual attachments, constant outbursts of jealousy occur" (p. 25).

Speaking of perversion proper, Bergler opined that "without exception, deep inner guilt arising from the perversion is present in homosexuals. This is shifted guilt, and belongs to the masochistic substructure" (p. 25). Yet in differentiating popular understanding of perversion from psychiatric understanding, Bergler insisted that popular views include a moral connotation while from a psychiatric perspective, perversion denotes infantile sexuality encountered in an adult that leads to orgasm. It is, in short, "a disease" (p. 25).

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In Bergler's prose, "infantilism" has itself become illness! Be careful what you wish for.

McDougall **(1980)** also attempted to keep ties to the classical position. She argues that in women who become homosexual, there is a "fictitious sexual identity" (p. 87). Later, she retracted what she had said **(McDougall 2001)**, explaining that at the time she probably did believe what she wrote—that being homosexual must involve some denial of sexual differences, and thus both confusion about one's gender identity and illusions about one's sexual partner. She redefined her early essay as an immature piece of work, explaining that at the time she wrote the paper she was inexperienced and inundated with bad theory.

Loewald, too, seemed to retract an earlier position of his own on the subject, though not as directly as McDougall. In 1951, he stated:

> In the analysis of male homosexuals it can frequently be shown that their homosexuality is fed from two sources: the fear of women and the lack of opportunity for masculine identification. The fear of the woman is, if not predominately a fear of being engulfed by her, a mixture of this and the fear of her as the woman with a penis …. It is my impression that this masculine identification can become impossible also if the father is not weak, but so overwhelming that there seems to be no hope of being like him, a constellation that easily becomes fused with and overlaid by the later castration threat. [p. 16]

Later, Loewald **(1979)** wrote that psychoanalytic views on what was considered *perversion* were changing as lines were redrawn between what was considered immature and mature mental functioning. He cited homosexuality as a good example of this change.

## Consulting with Magdalena

Is it possible to live—and more important, to work clinically—without the potentially hurtful ambiguities of "infantilism"? If so, how would that look?

Consider the case of Magdalena Ventura, depicted in a 17th-century painting by Jusepe de Ribera. As a person, Magdalena is situated inside cultural anthropologist Gayle Rubin's (**1984**, p. 13) "charmed circle" of

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sexual valuation: her sexuality is hetero, marital, monogamous, reproductive, and noncommercial. Yet her gender poses a problem: she began to grow a beard at age thirty-seven, one that was broad and thick like a man's. It was said that she bore a completely masculine face with more than "a palm's length of beautiful black beard," and that her breast was covered with hair (Robb **2011**, p. 79). The viceroy of Naples was so fascinated by the tale of Magdalena that he invited her to sit for a painting by de Ribera, who depicted the lady with her swollen breast bare, feeding her baby while her husband appears faintly in the background.

Magdalena may have suffered from hirsutism, a hormonal condition, but let us put that aside in this discussion. We should note that the viceroy wanted the picture, that de Ribera was willing to paint her and to make his subject anything but an object of derision, and that Magdalena was willing to sit for the portrait, as was her husband. Although Magdalena *could* have shaved off her beard, apparently she did not want to and no one seemed to mind.

It should be noted that Magdalena and the other Magdalenas of the world are not unusual. Throughout history, there have been many bearded women, and they were and are still a consistent if very small part of the fabric of life. What is inconsistent is the way in which they are treated and understood by themselves and others.

Magdalena was an egg lady who pushed a baby carriage full of eggs she sold to support her family. While people were "fascinated" by her looks, they did not think her ill. The intersection of gender, sex, and sexuality in de Ribera's painting plays with some of the same conceptual rules discussed in Freud's "The Sexual Aberrations." However, by the time of the *Three Essays* **(1905a)**, questions of what is normal and perverse have begun to be codified by the medical-psychiatric-sexological discourse of the late nineteenth century. Freud has to work his way out of this thicket before he can see her as nonpathologically as de Ribera does. Nevertheless, Freud constructs a pathologizing thicket of his own, and it is not clear that Magdalena would have escaped being diagnosed had she ventured into the office at 19 Bergasse.

If she had found her way to Freud's consulting room, would Freud have seen her as neurotic, perverse, an invert or hermaphrodite—or simply as a woman with too much hair? Would she fit into Freud's

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notions of perverse or sexually aberrant because of her physical appearance? How would we see her? What kind of issues would a bearded woman like Magdalena bring to the consulting room of today's clinician? Would her therapist think of her as bizarre or perverse? Or would the therapist see Magdalena's situation as one of the complexities that occur in brief or extended developmental periods that challenge and transform usual and expectable views of gender and sexuality **(Harris 2005)**?

Up until the 1980s, she might have been referred to as possibly intersexual or transsexual. Now she might be called a *transgender* person. If viewed as transsexual, would Magdalena be seen by a contemporary clinician along a continuum, moving toward a male identity (FtM)? Or would she be seen as *cisgender*—a woman with too much hair in the wrong places—and be sent off for threading or waxing to close the gap between her natural appearance and what we think is ideal **(Harris 2011)**?

There are growing gendered categories of experience to understand. For example, *transgender* signifies an incongruence between one's subjective gender identity and one's assigned sex; the opposite experience, *cis*, applies when one's gender identity and assigned sex internally match one's experience. Of course, even these new categories assume a consistency that is not necessarily present. The notion of consistency reflects a pull toward a sexual essentialism that still dominates theories of sexuality **(Dean 2000)**.

"The Sexual Aberrations" produced a new way of thinking about development that clinicians have relied on for more than a century. Clinicians in Freud's era did indeed make observations about the developmental histories of their patients, but they did so principally to document the early presence of hereditary taint (Kerr **1993**, pp. 92-93). When Freud announces that perversion is normal in infancy, he is redrawing the lines; early behaviors become relevant not as biological markers, but as a feature of biography.

It is this developmental framework that was revolutionary, though in the present time it has become an unremarkable, ingrained habit of thought. However, when applied to categories like gender identity, taking a developmental history generates exactly the kind of bias toward consistency and essentialism that many of today's clinicians are trying to transcend. Yet is it possible to do clinical work without some kind

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of developmental-biographical framework? Breaking up with our traditional Freudian developmental paradigm is hard to do.

Let us stay with Magdalena for a moment longer. How might she formulate her experience? And what might she want from therapy if she sought it? Is she in distress? How might the therapist distinguish psychic suffering from the cultural suffering that comes from stigma, fear, and hatred?

There are no guidelines in how to parse psychic pain from social pain. Further, this could be a false dualism, in fact—one that conceals a nest of interactions.

To determine whether there is suffering, a therapist would ask how Magdalena feels about her body, especially the hair that covers her face. Does she feel vulnerable when people stare at her? Is she afraid she will be attacked for looking different? Or, conversely, has she become attached to her new appearance and acquired a sense of relief or self-integrity? She might feel emboldened by her changes and experience a new sense of vitality. She may be one of a growing number of people who are content to inhabit a more ambiguous gender zone (Thurer **2005**, p. 91).

## The Ghost of Bisexuality

There are scattered references to the topic of bisexuality in the *Three Essays* in various contexts. Freud implies that bisexuality—the simultaneous presence of masculine and feminine energies in both sexes—is universal; that in order for development to reach maturity, each gender must repress one-half of its original bisexual disposition; that in both genders, active libido is masculine in character; and that one consequence of this repression is that inversion becomes a universal feature in the unconscious. Sound far-fetched? According to Kerr

**(1993)**, building on the research of historian Peter Swales, this theory was actually the brainchild of Freud's friend, Wilhelm Fliess.

In addition to bisexuality, Fliess believed that he could document the existence not only of 28-day feminine cycles, but also of 23-day masculine cycles in everyone. Given that Freud's own cultural context included evolutionary biology, positivism, and Newtonian physics **(Makari 2008)**, this theory solved an essential problem for Freud: namely, why

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should sexual impulses be uniquely liable to be repressed? If there was such a thing as universal bisexuality, then it followed that at puberty each gender would face the task of repressing one-half of its original bisexual constitution. That this process could be hit or miss, or hit *and* miss, was in keeping with Freud's general deconstructive project, and not an objection on principle. Freud adopted the theory.

While he waited for Fliess to publish, Freud integrated the theory of bisexuality into his clinical work (which is why it is likewise a sometimes topic in the Dora case; see **Freud 1905b**). Especially, Freud felt the theory shed light on the energics of repression at the time of puberty—and on the unconscious fixations of neurotics on same-sexed objects. But Fliess continued to hold back from publishing. Freud's discomfort with the situation was charted in one of his dreams, duly reported in *The Interpretation of Dreams* **(1900)**, and in a failure of memory, duly reported in *The Psychopathology of Everyday Life* **(1901)**.

Finally, Freud devised a devious publishing strategy: he shared Fliess's ideas with two different Viennese authors. This allowed him to get everything into print, but the situation blew up, and his action ultimately ruined his relationship with Fliess.

Thus, at the time he prepared the *Three Essays* for publication, Freud was already locked into a battle with Fliess over ownership of the theory of bisexuality. Under the circumstances, it was too risky to use the theory as he would have wished. One can almost see Freud's unconscious at work, betraying him in all this. He made conceptual leaps, but his complex subjectivities or unconscious also played a part in his thinking and writing. This is part of the reason why the *Three Essays* is an incompletely deconstructive work. Freud wanted to rely on the theory of bisexuality and went to great lengths to see that it got into print; unfortunately, he also created problems for himself, his relationships, and the deconstructive project he had begun.

The upshot is that in "The Sexual Aberrations," we have only the ghost of bisexuality. But what if we had the whole thing? Suppose that Freud had bequeathed to subsequent generations a theory postulating that both masculine and feminine elements, presumably biologically based but also with important psychic manifestations, were present in both genders—where would we be then? Would we be closer to

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conceiving of gender less categorically? Arguably, in some instances at least, we are already there—and it is not necessarily a comfortable position.

## A Slippery Slope

As clinicians, we enter uncharted waters where the body and subjectivity become negotiable in the therapeutic discussion, as Suchet **(2011)** has shown. In one of the few psychoanalytic case reports in which the patient begins therapy as a woman and ends as a man, Suchet's poignant description of the treatment reveals her own fears as she tries to keep her footing on what feels like the edge of a very slippery slope. She finds no guidance from the familiar psychoanalytic model of working through intrapsychic conflict. Suchet dreams that her patient persuades her to take her on vacation. In waking life, the patient has a fantasy of being seduced by the therapist; Suchet understands this as a way for the patient to surrender her body and give voice to her silence.

In the interplay between dream and fantasy, one can feel both the fear and the courage of this therapist. Yet the case raises questions. We are left asking ourselves what it means when one can choose the kind of body one wants. Is gender in a free-market society driven by advances in science and technology—just another consumer choice that can be purchased?

We know that, like associations, choices are laden with external and internal pressures, some conscious and some not. And within that matrix of influences, Hoffman **(2006)** rightly insists that we recognize a person's agency, that we engage the person who can exercise judgment and be responsible for constructing his or her world.

Gherovici **(2010)**, from a Lacanian viewpoint, argues that gender needs to be embodied—and sex symbolized. Her observations about the democratizing of gender and sex signal the hazards of wishing to neutralize gender and sex differences. As she puts it, democratizing minimizes difference. As one eliminates difference, one simultaneously invites uniformity, which in turn can become truly undemocratic or forced. For a 1970s feminist, this is a difficult realization. Maintaining the freedom to choose while we reduce the social constraints of gender and sex may be a worthy goal, but it is much more complicated than earlier liberationists first thought. Be careful what you wish for.

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Transsexual desires, once considered within the realm of the psychotic and perverse, have raised awareness among clinicians of a growing variety in subjectivities associated with gender nonconformity and gender dysphoria (**Drescher 2010**; **Leli and Drescher 2004**). The autobiographical account of Hansbury **(2004)**, who was born female, captures part of this complexity. Hansbury's description of his

transition challenges feminist accounts of masculine and feminine experience. Hansbury is of the school that values difference; but for him, the body and its substances are what make him *male.* Although he had initially hoped merely to pass as male, his reaction to testosterone treatment gave him an additional something he had not expected. Technology drove his experience:

> On the first day, I dressed in a new pair of khakis and a blue oxford shirt …. I am sure everyone saw me as a lesbian. My hair was short, I walked like a man, sat like a man. I was, for all observers, butch. No one could see the new chemical I had racing through my body. I was filled with far more testosterone than any man in that office, and nobody knew it. [**2004**, p. 11]

Gender crossings come with individual confusions, losses, and gains. Those who cross gendered boundaries find themselves in a world of controversies in which they “swing back and forth and in between” (Hansbury **2011**, p. **219**). However, the ethics and questions behind individual dilemmas have less chance of being heard and evaluated when big money or repressive governments are involved. Reflecting again on Magdalena, we can say that, in 2014, she might be considering the administration of hormones and/or surgeries. Certainly, the medical industry benefits from these choices, but ultimately, does the individual benefit? Be careful what you wish for.

In the 1970s, feminist liberationists wanted to soften or diminish the impact of sex and gender on social arrangements. As the deconstruction of gender progressed, queer theorists destabilized all our binaries, allowing us to examine the compulsory elements that held them in place. Each binary was buttressed by others. Goldner **(2011)** points out that “male/female was constituted and stabilized by the hetero-/homosexual binary, such that normative gender and compulsory, naturalized heterosexuality required and implied each other” (p. **160**).

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These conceptual advances, however, are not as yet uniformly absorbed. Culturally speaking, there is a lack of shared language and of a shared set of beliefs and values about the meaning of gender, sex, and sexuality. Yet this gap in a sense of congruity may also be a kind of confirmation of the true situation, for it may be that when it comes to sexuality, both essentialism and constructionism are false choices and can only mislead both theory and practice **(Dean 2000)**.

Can the liberationist project continue the surrender of gender, or will a culture war emerge to tame it? Feminism, of course, has contributed many voices to trouble the basic premises of society. In the mid-1800s, London feminist Barbara Leigh Smith asked, “Do we fully understand that we aim at nothing less than an entire subversion of the present order of society, dissolution of the whole existing social compact?” (Fonda **2009**, p. **190**).

Not so many years after Smith posed her question, psychoanalysis, too, began to trouble the social contract with its references to sexuality and unconscious motivations. As Freud is said to have remarked to Jung as they arrived in New York Harbor: “They don't realize we're bringing them the plague” (Lacan **1977**, p. 116).

Changes in the social order constantly occur, and with them come theories of social change—and actual individual change. Yet understanding the links is not easy. The multidetermined process of change on the individual psychological level is still not well understood. Person **(2004)** offers a compelling account of how social and individual changes occur. She provides us with a picture of a constantly changing, co-created self and other that incorporate and mutate over time. She suggests that humans have historically borrowed from culture to create the kind of people they want to be.

Of course, humans create culture, so this is an ongoing, reciprocal process. Moreover, contemporary cultural values collided with psychoanalytic theory long before now, shaping and reforming it as societal values have changed and continue to change. For example, the social construction of gender reflected in de Beauvoir's **(1952)** statement that “one is not born, but becomes a woman” (p. 249) affirmed an existential premise that fueled a revolt against stereotypes and gender limitations, including psychoanalytic ones.

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## Baby X

“The Story of Baby X,” by Lois Gould, ran in a 1972 issue of *Ms.* magazine and was later made into a book. It is a fictional account of a child named Baby X whose parents agree not to impose gender stereotypes as they raise the baby. This experiment reflected the momentum of arguments made by 1970s feminist scholars and theorists who believed that gender prescriptions were hazardous, and that eradicating them would erase the pernicious gap between the sexes. The question of sexual equality thus ultimately rested on the nature of the presumed differences between women and men, and these were thought to be the result of acculturation alone.

In the essay, Baby X's parents receive a manual to guide them in their gender-free child-rearing experiment. Most of what the manual advises would be acceptable parenting behavior today—except for the critical detail of keeping the child's designated sex a secret.

The story describes various situations that Baby X encounters. Some are painful, as when X says, “Other children hate me,” while others are funny and heartwarming. Developmental markers, such as beginning school, are fraught with social problems that Gould solves with gender-free solutions. For example, X uses the principal's bathroom because it isn't marked anything except “Bathroom.”

A gender-neutral society was the wish of many a 1970s feminist, and in different versions the idea appeared in academia, in fiction, and in song. I can recall—and my children would confirm—that I repeatedly played a recording of *Free to Be You and Me* to them, naively hoping to convey the notion that they were not bound by society's gender rules. Yet the wish to minimize the impact of gender has taken us to a place we did not anticipate.

The story of Baby X signified a social movement toward gender-fluid child rearing and gender equality. As a radical fantasy, however, the story could neither avoid nor surmount puberty. As Gould has it, "By the time X's sex matters, it won't be a secret any more!" **(Gould 1972)**. Yet we are now living through a new phase of societal change that has brought with it new controversies. The biomedical culture has introduced a hormonal therapy for puberty suppression, offering medical relief to "trans-kids"

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who have been anxious about their gender since childhood, and who as puberty approaches become more anxious, panicky, depressed, and possibly suicidal. The hope is that, through the use of puberty suppression drugs to postpone the onset of puberty, the young person's panic can be minimized, and there is additional time to adjust to feelings of bodily discord and to contemplate the future **(Drescher and Byne 2013)**. Such medication also buys a way out of becoming stigmatized by peers prior to adult surgeries.

How does a baby like X turn out? The current research in this area has found some associations between gender nonconformity in children and adult homosexuality or bisexuality **(Drescher and Byne 2013)**. There is a smaller correlation between childhood gender nonconformity and adult transsexualism. The relationships are not consistent across all gender-nonconforming children, nor are they all that clear. This is, however, another space in which the culture war is fought. Traditional parents and traditional professionals argue for the necessity for children to be gender conforming, which includes having gender-conforming toys and clothes, as opposed to those who accept without hand-wringing the various gender expressions of children as more or less an entitlement of childhood.

It is worth noting that the medical community's update of its diagnostic manuals leans toward a consideration of human rights issues related to gender identity diagnoses. According to Drescher **(2013)**, DSM-5 work groups retained an adolescent and adult gender disorder diagnosis on the grounds that this ensures access to care despite concerns about stigma. And, despite the uncertainty of the outcome over the course of development, a diagnosis of gender dysphoria and gender incongruence in childhood has been retained, again in an effort to ensure access to care.

To be sure, prepubescent children remain a controversial group, since as Drescher **(2013)** notes, "some underlying assumptions of the treating clinicians are a matter of opinion, not empirical data" (p. 1). Overall there is movement away from a psychopathological model based on 1940s conceptualizations of sexual deviance, and toward a model that considers scientific evidence and best practices along with the needs, experiences, and basic human rights of everyone **(Drescher 2013)**.

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Yet life is still problematic, particularly for children. Consider De-Shawn, a nine-year-old black boy living in a psychiatric inpatient unit where his cross-gender identifications are noted in his chart as "sissy-like behaviors." DeShawn sought out a new therapist more at ease with his interest in dolls and makeup (Saketopoulou **2011**, p. **205**).

Consider another young "trans" man, Lucas, who explains to his "trans" therapist: "It was okay being a butch woman. That's allowed and people were okay with it. My mother, my father, they accepted it. But a man? How dare I?" (Hansbury **2011**, p. **215**).

Or consider the patient described by Suchet **(2011)**, mentioned earlier, who begins treatment as Rebecca, and after ten years ends as Raphael. And there is Zoe, who has been repeatedly questioned and ridiculed in public bathrooms since early adolescence for being in the wrong place. Over and over, people have not seen Zoe as "woman" enough or "man" enough to pass in either space. The shame and humiliation Zoe carries is enormous, as is her anger at being unseen and misunderstood.

In short, while Freud may have hypothesized a kind of fundamental human bisexuality, these young people are in many ways living it, at least in the realm of gender. And while Freud once imagined he could use bisexuality as a key part of his deconstructive project, the contemporary world has an entirely different deconstructive project in mind. Individuals like Zoe, Lucas, and DeShawn live in a world that reflects different aspects of that deconstructive project—what I call in this paper the surrender of gender.

The culture war continues to grapple with these inconsistencies. Can a woman still be a woman if she looks like a man? What proportion of stereotypical gender conformity tips the scale into acceptance?

Attachment and love confuse our theories. Take the case of Debbie and Christina, who had been partners for ten years when Christina underwent a sex change and became Chris. Debbie grieved the loss of her female partner and of her own identity as a lesbian, but the couple remained committed and loving through all the permutations of their genders and body parts **(Thurer 2005)**.

If 1970s feminism both affirmed and challenged the idea that gender is part of the essential self, 1980s gay and lesbian studies broadened the discussion to recognize the value of individuals with different

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forms of erotic and affectional expression. This was a step toward the democratization of gender and sex. Gay and lesbian studies exposed the neglected and marginalized aspects of certain forms of sexual conduct and the entrenched legal restrictions that fueled marginalization. In the 1990s, queer theory expanded the path of liberation to include the identity politics of various groups of individuals, ultimately encompassing diverse types of sexual activities or identities and then rejecting all categories. Queer theory has provided a relief from the pathologizing of nonheterosexual behavior by incorporating Foucaultian arguments emphasizing that the discourse of perversion has functioned throughout modern history as a means of policing and pathologizing non-normative sexual behaviors and relationships.

Yet in another way, "queer" ultimately represents a nonidentity, "an identity for people who don't believe in identities," as Thurer puts it (**2005**, p. 99). That is to say, these cultural narratives have made their way into a new cultural space and draw on the meaningful participation of a new, primarily younger generation.

Now we are no longer theorizing about these issues from a comfortable distance. We are experiencing the concurrent pain and suffering involved with living them in ways we had not expected. Our streets, like our consulting rooms, are filled with the hard edges of not fitting in and of hiding one's sense of self, and with individuals with new identities and personas who demand to be recognized and acknowledged. The shame and discomfort that accompany these changes are heard in our clinical offices.

For example, a 10-year-old boy with two moms wonders why other people think he needs a dad. *Does* he need one, he asks? Everyone seems to have one but him. But he really likes his family; one of his moms is great at sports, better than most of the dads. Still, there is a question detectable in his young mind: does he want a dad only because many of his friends have one? And as clinicians, we are left wondering: is this a socially induced desire or a psychic need? Does he need treatment to help him accept his different family form?

A conventional therapist told the boy's family that he needed a male therapist to serve as his father figure. His suggestion left his two moms feeling undermined and shamed. They wondered if he were telling them

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that they had done something harmful to their son by not providing a father. The guilt and self-hatred each woman had struggled to overcome was instantly reinstated.

What a different outcome they might have had if they had met a contemporary gender clinician who told them that their son could benefit from more friends with two moms or two dads. Or a therapist who could understand the kind of stigma and ensuing shame that this young boy might be experiencing from feeling different than his peers. Or if there had been appreciation of the young boy's attempts to separate himself from his adoring parents—something every child must do in some way. Reducing things to the level of, say, a male role model erases the nuance.

Similarly, the way we craft our intimate lives with partners, children, friends, and others no longer conforms to the dualities and organizing frames of the past. These should not be read as perversions or as unnatural, but as differences.

## Perversion and Libido

Such was the foundational status of *Three Essays on the Theory of Sexuality* **(Freud 1905a)** that to discuss sex and gender in psychoanalysis without reference to what is normative was for many years simply impossible. (This may account in part for the delay before analysts joined their psychiatric colleagues in depathologizing homosexuality.) One may wonder how we have gotten as far as we have given this theoretical conundrum. And in fact, it took about 100 years before the first courses on gender and sex—as separate areas of study, that is—were deemed important enough to be included in psychoanalytic training programs.

But where are we today? Do we still need a theory of perversion, and if we do, do we still need to tie it to some structure of normativity? One place to get started here is Lachmann's **(2008)** genial observation that "both creativity and perversion have long presented psychoanalysts with an array of challenges, wonder, and probably even some envy" (p. 134). The link between these two areas of human endeavor, for Lachmann, is that both involve "ways of violating expectations." Interestingly, as he notes, many new artistic breakthroughs, such as Stravinsky's *The Rite of Spring*, were initially condemned as perverse. Yet as Lachmann

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additionally notes: "A moralistic tone hovers over psychoanalytic discussion of these topics. Creativity is idealized; perversion is condemned" (**2008**, p. 134).

Perhaps we do not need the category of *perverse* at all, then, especially in an age when queer theory has removed a good deal of what the concept once applied to, as discussed earlier. Yet some modern clinicians retain the concept of *perverse* while excluding same-sex sexualities from its purview. Stein (**1998**, **2005**) is an example of someone who sees the concept as necessary; in fact, she finds it perverse *not* to accept perversion. Her argument incorporates the view of Fogel and Myers **(1991)**, who see perversion as "the latest frontier in psychoanalysis, replacing the borderline and narcissistic as the area in which the most exciting new work and thought are being accomplished with the greatest impact on the advance of clinical and theoretical knowledge" (Fogel and Myers, p. 2).

Stein is convinced that "perversion is on a continuum with 'normal' sexuality …. Perversion does not limit itself to the sexual perversions, but is rather a special case of perverse modes of object-relatedness and responses to the demands of reality which are perverse" (**2005**, p. **776**). She argues that perversion marks the beginning of our understanding of sexuality:

> By breaking free of ideas about biological heat cycles, pro-creative imperatives and the myths of compulsory regular discharge, as well as from religious commandments and prohibitions, humans have created a richer, more human, more individual, more intersubjectively intentional sexuality. By partially debiologizing sexuality, we have made it into an expression of love and hate, an anti-anxiety potion and a seductive tactic, an art and a courtly religion. Rather than merely a biological need, sexuality is a practice, an experience and a relation, which, at the same time as it is a configuration of bodily arousals, is deeply fulfilling or sadly sordid, highly sacred or abjectly filthy, and in any case heavily signifying. Thus, a bodily appetite is turned into something else; and the less preprogrammed, the less rigid, the more human and deviant from norms it is, the more signifying it becomes. Perversion leads the way into an understanding of a fully human

sexuality. [2005, p. 777]

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Stein goes on to juxtapose Stoller's definition of perversion as the eroticized, "loving" form of hatred with her notion of perversion as "false love." She rightly asks:

> Who is to tell where the dividing line is between (a) the symbolizing and artifact-creating individual or culture that desires the colorful and sensuous cross-dressing and gender-crossing to enliven and enrich life and identity and to protest against oppressive pressures, and (b) the alienated individual (or social group), driven to travesty by the need to degrade human compassion, to fake intimacy and to betray those it seduces? After all, the ritual, the substitution, the as-if, the camp, the masquerade, the impersonation, literal or symbolic, appear not only in sado-masochistic relations, or in those loathing their gender or the other gender; they also permeate fashion, sexy clothes, fragrances, jewelry and plastic surgery. [2005, p. 777]

Stein sides with Freud as she argues that perversion is at the heart of civilization.

Penney (2006) offers quite a different understanding of perversity, using power, knowledge, and sex as the basic framework for a cultural critique of sexology. He suggests that vagueness about the relationship between sex and sexuality is a necessary outcome of the psychoanalytic theory of sex. The essence of his position is that sexuality and sex fail as reliable indicators of knowledge of the subject. Sexuality, he suggests, may be a "pseudoconcept" (p. 218) that we are better off without. Citing Lacan and Freud, Penney states that, when all is said and done, the attractions of the object are independent from the aim of the drive.

So the question remains: is *perverse* useful as a category? In terms of theory, *perverse* may be useful both in theorizing and in deconstructing the wide-ranging nature of the human mind, and as a guide for charting the social demands of civilization. But can we analysts arrive at a theory of what is perverse that is in keeping with psychoanalytic values? Perhaps we can if we simply see what is labeled as perverse as a placeholder for the staging of behavior and ideas that test the limits of social acceptability, rather than as depraved or non-normative.

We might imagine a use of *perverse* that would be consistent with the way in which *queer theory* engages a common and consistent experience

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by attaching a denigrating term ("queer") to a lofty one ("theory"). The work of this "*perverse theory*" might then be similar to one of the roles of art; that is, it would serve as a social challenge, a form of what Carole Iannone calls "the insistent and progressive artistic exploration of the forbidden frontiers of human experience" (quoted in Hunter 1991, p. 237).

One could also argue that *perverse* is a fact of life, insofar as people respond to certain behaviors with fear, loathing, disgust, antipathy, or the like. And if *perverse* is a fact of life, then our patients are dealing with the reactions that they engender (they may also have some of these reactions themselves—to themselves—as may we), and we should be attuned to this in the clinical arena. This may not be easy for contemporary analysts since we are heirs to what Freud tried to do—namely, to detoxify "perversion" as "infantile."

Sullivan (1953) brings some relief to this predicament with his useful system of personifications, including *good-me, bad-me*, and, importantly, *not-me.* Not-me includes bodily experiences of intense anxiety, loathing, and dread. In any case, it seems that *perverse* is likely to endure as a problem for analysts, as something we find ourselves wrestling with, even if we remain at a loss to come up with a usage we can all agree on.

Personally, although I would argue that anything that misuses the other or that concretizes the psychological is objectionable, I still would not reach for the concept of *perverse.* It is inextricably linked to ideas that analysts have in the main already dismissed, such as libido and drive. Oddly, as a topic, *perverse* might end up outlasting libido, which was supposed to be central to its explanation—a curious outcome. As Schacter (2002) pointed out, *libido* is no longer found in the titles of articles in major analytic journals.

While Freud's achievements remain remarkable, it is not news that the drive model informing his psychoanalytic ideas was grounded in a 19th-century science that has been left behind. The change in scientific climate has swept away Freudian "drive"; Mitchell (1991) argued more than two decades ago that we have simply parted company with a drive model. Instead, we have moved to a model of two-person engagement that embraces interpersonal and relational factors, with more of a focus both on preoedipal object relational and attachment concerns and on

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current experience and their implications—as witnessed by the work of numerous theorists, including Mitchell (1988), Ehrenberg (1992), Levenson (1991), Greenberg and Mitchell (1983), Hirsch (2008), and Hoffman (1998), to name only some.

Yet it was to arrive at libido theory that Freud undertook the journey that is the *Three Essays* (1905a). And this is what "The Sexual Aberrations" in particular is all about—in Freud's mind. The hop, skip, and a jump from perversion, to hysterical symptoms, to infantile sexuality was his way of finding his footing as he crossed the river of 19th-century sexology to get to the promised land of libido theory.

Today we no longer maintain Freud's natural scientific agenda. We no longer see the analytic office as the place to prove a specific

theory of development, libidinal or otherwise. Indeed, contemporary psychoanalysis holds a friendlier attitude toward not knowing generally, and toward exploring without agendas what Ehrenberg **(1992)** calls the *intimate edge* of what can be shared. In these ways, the contemporary analyst attempts to remain open to the experiences of the Magdalenas and the Raphaels of this world.

## Breaking up is Hard to Do

Our contemporary views of human behavior deviate from Freud's in seismic ways. In particular, we have abandoned the bridge to the physiological once afforded by libido theory in favor of adopting multiple templates as a way of embracing the pluralism of experience. Yet the value of psychoanalysis still lies in stepping outside the frame of conventional society by asking questions that allow protest.

Halpern **(2003)** noted that if queer theory is to have a future worth having, we must find ways of renewing its radical potential, and the same is true for psychoanalysis. The field must move both with and beyond the *Three Essays* in reinventing a capacity to startle, to surprise, and to help. Finding new ways to think what has not yet been thought in a careful, nondefensive, yet passionate way is crucial.

Psychoanalytic knowledge is born from developing and drawing the patient into a collaborative inquiry in which both the patient's desires and the analyst's genuine participation can find a home (**Hoffman 2010**;

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**Mitchell 1991**). Because our knowledge remains constrained by cultural discourse, as we work to gain access to thoughts unknown or unthought **(Stern 1987)** by asking questions such as “What's going on around here?” (Levenson **1989**, p. **538**), we also assume that the patient's vision of life, like ours, is full of inattentions, repressions, disavowals, and distortions that constrict vision, even as they may once have promoted survival **(Levenson 1990)**.

That is to say, we still assume that what is perplexing *about* the patient and *to* the patient will reflect in some way or other the patient's prior experience or development. Does this make us heirs to Freud? Yes and no. Our sense of development has been transformed, along with our sense of “infantilism.” Unlike Freud's, our infant has relational needs, and it is those wishes and needs that come into play for us as Freud's heirs.

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