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THE SIGNIFICANCE OF MASOCHISM IN THE MENTAL LIFE OF WOMEN

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PART 1

‘FEMININE MASOCHISM AND ITS RELATION TO FRIGIDITY.’¹

In the analysis of women we became familiar with the masculinity-complex before we learnt much about the 'femininity' which emerges from the conflicts accompanying development. The reasons for this later recognition were various. First of all, analysis comes to know the human mind in its discords rather than in its harmonies, and, when we turn the microscope of observation upon the woman, we see with special distinctness that the main source of her conflicts is the masculinity which she is destined to subdue. It followed that we were able to recognize the 'masculine' element in women earlier and more clearly than what we may term the nucleus of their 'femininity'. Paradoxical as it may sound, we approached the feminine element with greater interest when it formed part of a pathological structure and, as a foreign body, attracted a closer attention. When we encountered in men that instinctual disposition which we designate feminine and passive-masochistic, we recognized its origin and the weighty consequences it entailed. In the case of women we discovered that, even in the most feminine manifestations of their life—menstruation, conception, pregnancy and parturition—they had a constant struggle with the never wholly effaced evidences of the bisexuality of their nature. Hence, in my earlier writings² I shewed with what elemental force the masculinity-complex flares up in the female reproductive functions, to be once more subdued.

My aim in this paper is different. I want to examine the genesis of 'femininity', by which I mean the feminine, passive-masochistic disposition in the mental life of women. In particular I shall try to elucidate the relation of the function of feminine instinct to the function of reproduction, in order that we may first of all clarify our ideas

¹ Read at the Eleventh International Psycho-Analytical Congress, Oxford, July 27, 1929.

² Helene Deutsch: *Psychoanalyse der weiblichen Sexualfunktionen*. Neue Arbeiten zur ärztlichen Psychoanalyse, Nr. V.

about sexual inhibition in women, that is to say, about frigidity. The discussion will concern itself with theoretical premises rather than with the clinical significance of frigidity.

But first let us return to the masculinity-complex.

No one who has experience of analysis can doubt that female children pass through a phase in their libidinal evolution, in which they, just like boys, having abandoned the passive oral and anal cathexes, develop an erotogenicity which is actively directed to the clitoris as in boys to the penis. The determining factor in the situation is that, in a certain phase, sensations in the organs, which impel the subject to masturbate, tend strongly towards the genital and effect cathexis of that zone which in both sexes we have called the 'phallic'.

Penis-envy would never acquire its great significance were it not that sensations in the organs, with all their elemental power, direct the child's interest to these regions of the body. It is this which first produces the narcissistic reactions of envy in little girls. It seems that they arrive only very gradually and slowly at the final conclusion of their investigations: the recognition of the anatomical difference between themselves and boys. So long as onanism affords female children an equivalent pleasure they deny that they lack the penis, or console themselves with hopes that in the future the deficiency will be made good. A little girl, whom I had the opportunity of observing, reacted to the exhibitionistic aggression of an elder brother with the obstinate and often repeated assertion: 'Susie *has* got one', pointing gaily to her clitoris and labia, at which she tugged with intense enjoyment. The gradual acceptance of the anatomical difference between the sexes is accompanied by conflicts waged round the constellation which we term penis-envy and masculinity-complex.

We know that, when the little girl ceases to deny her lack of the penis and abandons the hope of possessing one in the future, she employs a considerable amount of her mental energy in trying to account for the disadvantage under which she labours. We learn from our analyses what a large part the sense of guilt connected with masturbation commonly plays in these attempts at explanation. The origin of these feelings of guilt is not quite clear, for they already exist in the phase in which the Oedipus complex of the little girl does not seem as yet to have laid the burden of guilt upon her.³

³ Freud: 'Some Psychological Consequences of the Anatomical Difference between the Sexes' (This JOURNAL, Vol. VIII, 1927). The argument in this paper of Freud's is that the Oedipus complex does not develop in girls until after the phase of phallic onanism. Cf. also Deutsch: *Psychoanalyse der weiblichen Sexualfunktionen*. Neue Arbeiten zur ärztlichen Psychoanalyse, Nr. V.

Direct observation of children shows beyond question that these first onanistic activities are informed with impulses of a primary sadistic nature against the outside world.⁴ Possibly a sense of guilt is associated with these obscure aggressive impulses. It is probable that the little girl's illusion that she once had a penis and has lost it is connected with these first, sadistic, active tendencies to clitoral masturbation. Owing to the memory-traces of this active function of the clitoris, it is subsequently deemed to have had in the past the actual value of an organ equivalent to the penis. The erroneous conclusion is then drawn: 'I once did possess a penis'.

Another way in which the girl regularly tries to account for the loss is by ascribing the blame for it to her mother. It is interesting to note that, when the father is blamed for the little girl's lack of a penis, castration by him has already acquired the libidinal significance attaching to this idea in the form of the rape-phantasy. Rejection of the wish that the father should have been the aggressor generally betokens, even at this early stage, that rejection of the infantile feminine attitude to which I shall recur.

In his paper 'Some Consequences of the Anatomical Difference between the Sexes', Freud sees in the turning of the little girl to her father as a sexual object a direct consequence of this anatomical difference. In Freud's view, development from the castration to the Oedipus complex consists in the passing from the narcissistic wound of

⁴ In his paper on 'The Economic Problem in Masochism' (*Collected Papers*, Vol. II), Freud points out that the important task of the libido is to conduct into the outside world the instinct of destruction primarily inherent in living beings, transforming it into the 'instinct of mastery'. This is effected by means of the organ of motility, the muscular system. It appears to me that part of these destructive tendencies remains attached to the subject's own person in the earliest form of masturbation, which has as yet no libidinal object, and that it is thus intercalated between organic pleasure and motor discharge into the outside world. At any rate I have been able with some degree of certainty to establish the fact that children who are specially aggressive and active have a particularly strong urge to masturbation. (I am speaking here of the earliest masturbation, which is as yet autoerotic). We see too that in little children frustration may provoke an outburst of rage and at the same time attempts at masturbation.

organ-inferiority to the compensation offered: that is to say, there arises the desire for a child. This is the source of the Oedipus complex in girls.

In this paper I shall follow up the line of thought thus mapped out by Freud. After the phallic phase, where the boy renounces the Oedipus complex and phallic masturbation, there is intercalated in the girl's development a phase which we may call 'post-phallic'; in this the seal is set upon her destiny of womanhood. Vaginal cathexis, however, is as yet lacking.

In spite of my utmost endeavours, I am unable to confirm the communications that have been made with reference to vaginal pleasure-sensations in childhood. I do not doubt the accuracy of these observations, but isolated exceptions in this case prove little. In my own observations I have had striking evidence in two instances of the existence of vaginal excitations and vaginal masturbation before puberty. In both, seduction with defloration had occurred very early in life.⁵ If there were in childhood a vaginal phase, with all its biological significance, it surely could not fail to appear as regularly in our analytical material as do all the other infantile phases of development. I think that the most difficult factor in the 'anatomical destiny' of the woman is the fact that at a time when the libido is still unstable, immature and incapable of sublimation, it seems condemned to abandon a pleasure-zone (the clitoris as a phallic organ) without discovering the possibility of a new cathexis. The narcissistic estimation of the non-existent organ passes smoothly (to use a phrase of Freud's) 'along the symbolic equation: penis—child, which is mapped out for it'. But what becomes of the dynamic energy of the libido which is directed towards the object and yearns for possibilities of gratification and for erotogenic cathexes?

We must also reflect that the wish-phantasy of receiving a child from the father—a phantasy of the greatest significance for the future of a woman—is, nevertheless, in comparison with the reality of the

⁵ Even if further observations should prove the occurrence of vaginal sensations in childhood, the subsequent cathexis of the vagina as a sex organ would still seem to be scarcely affected by the question of whether it had transitorily been a zone of excitation, very soon repressed so as to leave scarcely a trace, or whether it were only in later years of development that it assumed for the first time the rôle of the genital apparatus. The same difficulties arise in either case.

penis, for which it is supposed to be exchanged, a very unreal and uncertain substitute. I heard of the little daughter of an analyst mother who, at the time when she was experiencing penis-envy, was consoled with the prospect of having a child. Every morning she woke up to ask in a fury: 'Hasn't the child come *yet*'? and no more accepted the consolation of the future than we are consoled by the promise of Paradise.

What, then, does happen to the actively directed cathexis of the clitoris in the phase when that organ ceases to be valued as the penis? In order to answer this question we may fall back on a familiar and typical process. We already know that, when a given activity is denied by the outside world or inhibited from within, it regularly suffers a certain fate—it turns back or is deflected. This seems to be so in the instance before us: the hitherto active-sadistic libido attached to the clitoris rebounds from the barricade of the subject's inner recognition of her lack of the penis and, on the one hand, regressively cathects points in the pregenital development which it had already abandoned, while, on the other hand, and most frequently of all, it is deflected in a regressive direction towards masochism. In place of the active urge of the phallic tendencies, there arises the masochistic phantasy: 'I want to be castrated', and this forms the erotogenic masochistic basis of the feminine libido. Analytic experience leaves no room for doubt that the little girl's first libidinal relation to her father is masochistic, and the masochistic wish in its earliest distinctively feminine phase is: 'I want to be castrated by my *father*'.⁶

In my view this turning in the direction of masochism is part of the woman's 'anatomical destiny', marked out for her by biological and constitutional factors, and lays the first foundation of the ultimate development of femininity, independent as yet of masochistic reactions to the sense of guilt. The original significance of the clitoris as an organ of activity, the masculine-narcissistic protest: 'I won't be castrated' are converted into the desire: 'I want to be castrated'. This desire assumes the form of a libidinal, instinctual trend whose object is the father. The woman's whole passive-feminine disposition, the entire genital desire familiar to us as the rape-phantasy, is finally explained if we accept the proposition that it originates in the castration-complex. My

6 That 'feminine' masochism has its origin in this regressive deflection of the libido is clear evidence of the identity of 'erotogenic' and 'feminine' masochism.

view is that the Oedipus complex in girls is inaugurated by the castration-complex. The factor of pleasure resides in the idea of a sadistic assault by the love-object and the narcissistic loss is compensated by the desire for a child, which is to be fulfilled through this assault. When we designate this masochistic experience by the name of the wish for castration, we are not thinking merely of the biological meaning—the surrender of an organ of pleasure (the clitoris)—but we are also taking into account the fact that the whole of this deflection of the libido still centres on that organ. The onanism belonging to this phase and the masochistic phantasy of being castrated (raped) employ the same organ as the former active tendencies. The astonishing persistency of the feminine castration-complex (including all the organic vicissitudes with which is associated a flow of blood) as we encounter it in the analyses of our female patients is thus explained by the fact that this complex contains in itself not only the masculinity-complex, but also the whole infantile set towards femininity.

At that period there is a close connection between the masochistic phantasies and the wish for a child, so that the whole subsequent attitude of the woman towards her child (or towards the reproductive function) is permeated by pleasure-tendencies of a masochistic nature.

We have an illustration of this in the dream of a patient whose subsequent analysis unequivocally confirmed what had been hinted in the manifest content of her dream; this occurred in the first phase of her analysis before much insight had been gained.

Professor X. and you (the analyst) were sitting together. I wanted him to notice me. He went past my chair and I looked up at him and he smiled at me. He began to ask me about my health, as a doctor asks his patient; I answered with reluctance. All of a sudden he had on a doctor's white coat and a pair of obstetrical forceps in his hand. He said to me: "Now we'll just have a look at the little angel". I clearly saw that they were obstetrical forceps, but I had the feeling that the instrument was to be used to force my legs apart and display the clitoris. I was very much frightened and struggled. A number of people, amongst them you and a trained nurse, were standing by and were indignant at my struggling. They thought that Professor X. had specially chosen me for a kind of experiment, and that I ought to submit to it. As everyone was against me, I cried out in impotent fury: "No, I will not be operated on, you shall not operate on me".

Without examining the dream more closely here, we can see in its manifest content that castration is identified with rape and parturition, and the dream-wish which excites anxiety is as follows: 'I want to be castrated (raped) by my father and to have a child'—a three-fold wish of a plainly *masochistic character*.

The first, infantile identification with the mother is always, independently of the complicated processes and reactions belonging to the sense of guilt, *masochistic*, and all the active birth-phantasies, whose roots lie in this identification, are of a bloody, painful character, which they retain throughout the subject's life.⁷

In order to make my views on frigidity intelligible I had to preface them with these theoretical considerations.

I will now pass on to discuss those forms of frigidity which bear the stamp of the masculinity-complex or penis-envy. In these cases the woman persists in the original demand for possession of a penis and refuses to abandon the phallic organization. Conversion to the feminine-passive attitude, the necessary condition of vaginal sensation, does not take place.

Let me mention briefly the danger of the strong attachment of all sexual phantasies to clitoris-masturbation. I think I have made it clear that the clitoris has come to be the executive organ, not only of active but of passive masochistic phantasies. By virtue of its past phase of masculine activity, a kind of organ-memory constitutes it the great enemy of any transference of pleasure-excitation to the vagina. Moreover, the fact that the whole body receives an increased cathexis of libido (since it has failed to find its focus) brings it about that, in spite of an often very vehement manifestation of the sexual instinct, the libido never attains to its centralized form of gratification.

In far the largest number of cases, feminine sexual inhibition arises out of the vicissitudes of that infantile-masochistic libidinal development which I have postulated. These vicissitudes are manifold, and every form they assume may lead to frigidity. For instance, as a result of the repression of the masochistic tendencies a strong narcissistic cathexis of the feminine ego may be observed. The ego feels that it is threatened by these tendencies, and takes up a narcissistic

⁷ In the second section of this paper I will revert to the part that the sense of guilt plays in feminine masochistic phantasies. In the present argument I am indicating the purely libidinal origin of feminine masochism, as determined by the course of evolution.

position of defence. I believe that, together with penis-envy, this is an important source of so-called feminine narcissism.

Akin to this reaction of repression is another reaction-formation which Karen Horney calls 'the flight from femininity, ' and of which she has given a very illuminating description. This flight from the incest-wish is, in my view, a shunning not only of the incestuous object (Horney), but most of all of the masochistic dangers threatening the ego which are associated with the relation to this object. Escape into identification with the father is at the same time a flight from the masochistically determined identification with the mother. Thus there arises the masculinity-complex, which I think will be strong and disturbing in proportion as penis-envy has been intense and the primary phallic active tendencies vigorous.

Repression of the masochistic instinctual tendencies may have another result in determining a particular type of object-choice later in life. The object stands in antithesis to the masochistic instinctual demands and corresponds to the requirements of the ego. In accordance with these the woman chooses a partner whose social standing is high or whose intellectual gifts are above the average, often a man whose disposition is rather of an affectionate and passive type. The marriage then appears to be peaceful and happy, but the woman remains frigid, suffering from an unsatisfied longing—the type of the 'misunderstood wife'. Her sexual sensibility is bound up with conditions whose fulfilment is highly offensive to her ego. How often do such women become the wretched victims of a passion for men who ill-treat them, thus fulfilling the women's unconscious desires for castration or rape.

I have also observed how frequently—indeed, almost invariably—women whose whole life is modelled on the lines of masculine sublimation-tendencies are markedly masochistic in their sexual experiences. They belong to that reactive masculine type which yet has failed to repress its original masochistic instinctual attitude. My experience is that the prospect of cure in these cases of relative frigidity, in which sexual sensation depends on the fulfilment of masochistic conditions, is very uncertain. It is peculiarly difficult to detach these patients from the said conditions and, when analysis has given them the necessary insight, they have consciously to choose between finding bliss in suffering or peace in renunciation.

The analyst's most important task is, of course, the abolition of the sexual inhibition in his patients, and the attainment of instinctual

gratification. But sometimes, when the patient's instincts are so unfortunately fixed and yet there are good capacities for sublimation, the analyst must have the courage to smooth the path in the so-called 'masculine' direction and thus make it easier for the patient to renounce sexual gratification.

There are women who have strong sexual inhibition and intense feelings of inferiority, the origin of which lies in penis-envy. In such cases it is evidently the task of analysis to free these patients from the difficulties of the masculinity-complex and to convert penis-envy into the desire for a child, i.e. to induce them to adopt their feminine rôle. We can observe that during this process the 'masculine aims' become depreciated and are given up. Nevertheless we often find that, if we can succeed in making it easier for such women to sublimate their instincts in the direction of 'masculine tendencies' and so to counter the sense of inferiority, the capacity for feminine sexual sensibility develops automatically in a striking manner. The theoretical explanation of this empirically determined fact is self-evident.

It is but rarely in analytic practice that we meet with such cases of conditioned frigidity as I have described or indeed with any cases of frigidity unaccompanied by pathological symptoms, i.e. of sexual inhibition without symptoms of suffering. When such a patient comes to us, it is generally at the desire of the husband, whose narcissism is wounded, and who feels uncertain of his masculinity. The woman, actuated by her masochistic tendencies, has renounced the experience of gratification for herself, and, as a rule, her desire to be cured is so feeble that the treatment is quite unsuccessful.

As we know, hysteria which expresses itself in symptom-formation is extraordinarily capricious and varied as regards the nature of the sexual inhibition displayed. One type of hysterical patient is driven by an everlasting hunger for love-objects, which she changes without inhibition: her erotic life appears free, but she is incapable of genital gratification. Another type is monogamous and remains tenderly attached to the love-object, but without sexual sensibility; she exhibits other neurotic reactions which testify to her morbid state. Such women often dissipate the sexual excitation in the fore-pleasure, either owing to the strong original cathexis of the pregenital zones or because by a secondary and regressive reaction they are endeavouring to withhold the libido from the genital organ which prohibitions and their own anxiety have barricaded off. Here one often receives the impression that all the sense-organs, and indeed the whole female

body, are more accessible to sexual excitation than is the vagina, the organ apparently destined for it. But conversion-symptoms turn out to be the seat of false sexual cathexes. Behind the hysterical, pleasure-inhibiting, genital anxiety we discover the masochistic triad: castration, rape and parturition. The fixation of these wish-phantasies to the infantile object here becomes, as we know, the motive factor in the neuroses. If this attachment is resolved by analysis, sexual sensibility as a rule develops.

In touching briefly on the question of frigidity accompanying phobias and obsessions, mention must be made of the remarkable fact that in these cases the sexual disturbance is emphatically not in direct ratio to the severity of the neurosis. There are patients who remain frigid long after they have overcome their anxiety, and even after they have got rid of the most severe obsessional symptoms, and the converse is also true. The uncertainty of obsessional neurosis—in so far as the genital capacity of female patients is concerned—is most plainly manifested in certain cases (several of which have come under my observation) in which the most violent orgasm may result from hostile masculine identifications. The vagina behaves like an active organ, and the particularly brisk secretion is designed to imitate ejaculation.

At the beginning of this paper I endeavoured to show that the masochistic triad constantly encountered in the analyses of women corresponds to a definite phase of feminine libidinal development and represents, so to speak, the last act in the drama of the vicissitudes of the 'feminine castration-complex'. In neurotic diseases, however, we meet above all with the reactions of the sense of guilt, and hence we find this primary- libidinal feminine masochism already so closely interwoven and interlocked with the moral masochism, originating under pressure of the sense of guilt, that we miss the significance of that which is in origin libidinal. Thus many obscure points in connection with the feminine castration-complex become clearer if we recognize that, behind the castration-anxiety, there is further the repressed masochistic wish characteristic of a definite infantile phase of development in the normal feminine libido.

The task of psycho-analysis is to resolve the conflicts of the individual existence. The instinctual life of the individual, which is the object of analytical scrutiny, strives towards the ultimate goal, amidst conflicts and strange vicissitudes, of *attainment of pleasure*. The preservation of the race lies outside these aims, and, if there be a deeper significance in the fact that the same means are employed to achieve

the racial aim as to subserve the pleasure-tendency of man's instincts, that significance is outside the scope of our individualistic task.

Here I think we have a fundamental and essential difference between 'feminine' and 'masculine'. In the woman's mental life there is *something* which has nothing at all to do with the mere fact of whether she has or has not actually given birth to a child. I refer to the psychic representatives of motherhood which are here long before the necessary physiological and anatomical conditions have developed in the girl. For the tendency of which I am speaking the attaining of the child is the main goal of existence, and in woman the exchange of the racial aim for the individual one of gratification may take place largely at the expense of the latter. No analytical observer can deny that in the relation of mother to child—begun in pregnancy and continued in parturition and lactation—libidinal forces come into play which are very closely allied to those in the relation between man and woman.

In the deepest experience of the relation of mother to child it is masochism in its strongest form which finds gratification in the bliss of motherhood.

Long before she is a mother, long after the possibility of becoming one has ended, the woman has ready within her the maternal principle, which bids her take to herself and guard the real child or some substitute for it.

In coitus and parturition the masochistic pleasure of the sexual instinct is very closely bound up with the mental experience of conception and giving birth; just so does the little girl see in the father, and the loving woman in her beloved—a child. For years I have traced out in analyses this most intimate blending of the sexual instinct with that of the reproductive function in women, and always the question has hovered before my mind: When does the female child begin to be a woman and when a mother? Analytic experience has yielded the answer: *Simultaneously*, in that phase when she turns towards masochism, as I described at the beginning of this paper. Then, at the same time as she conceives the desire to be castrated and raped, she conceives also the phantasy of receiving a child from her father. From that time on, the phantasy of parturition becomes a member of the masochistic triad and the gulf between instinctual and the reproductive tendencies is bridged by masochism. The interruption of the little girl's infantile sexual development by the frustration of her desire for the child gives to the sublimation-tendencies of the woman a very definite stamp of masochistic maternity. If

it is true that men derive the principal forces which make for sublimation from their sadistic tendencies, then it is equally true that women draw on the masochistic tendencies with their imprint of maternity. In spite of this symbiosis, the two opposite poles, the sexual instinct and the reproductive function, may enter into conflict with one another. When this occurs, the danger is the greater in proportion as the two groups of tendencies are in close proximity.

Thus, a woman may commandeer the whole of her masochistic instinctual energy for the purpose of direct gratification and abandon sublimation in the function of reproduction. In the relation of the prostitute to the *souteneur* we have such an unadulterated product of the feminine masochistic instinctual attitude.

At the opposite end of the pole, yet drawing upon the same source, we have the *mater dolorosa*, the whole of whose masochism has come to reside in the relation of mother to child.

From this point I return to my original theme. There is a group of women who constitute the main body figuring in the statistics which give the large percentage of frigidity. The women in question are psychically healthy, and their relation to the world and to their libidinal object is positive and friendly. If questioned about the nature of their experience in coitus, they give answers which show that the conception of orgasm as something to be experienced by themselves is really and truly foreign to them. During intercourse what they feel is a happy and tender sense that they are giving keen pleasure and, if they do not come of a social environment where they have acquired full sexual enlightenment, they are convinced that coitus as a sexual act is of importance only for the man. In it, as in other relations, the woman finds happiness in tender, maternal giving.

This type of woman is dying out and the modern woman seems to be neurotic if she is frigid. Her sublimations are further removed from instinct and therefore, while on the one hand they constitute a lesser menace to its direct aims, they are, on the other, less well adapted for the indirect gratification of its demands. I think that this psychological change is in accordance with social developments and that it is accompanied by an increasing tendency of women towards masculinity. Perhaps the women of the next generation will no longer submit to defloration in the normal way and will give birth to children only on condition of freedom from pain.

And then in after-generations they may resort to infibulation and to refinements in the way of pain—ceremonials in connection with

parturition. It is this masochism—the most elementary force in feminine mental life—that I have been endeavouring to analyse.

Possibly I have succeeded in throwing light on its origin and, above all, on its importance and its application in the function of reproduction. This employing of masochistic instinctual forces for the purpose of race-preservation I regard as representing in the mental economy an act of sublimation on the part of the woman. In certain circumstances it results in the withdrawal from the direct gratification of instinct of the energy involved and in the woman's sexual life becoming characterized by frigidity without entailing any such consequences as would upset her mental balance and give rise to neurosis.

Let me now at the close of my paper give its main purport:

Women would never have suffered themselves throughout the epochs of history to have been withheld by social ordinances on the one hand from possibilities of sublimation, and on the other from sexual gratifications, were it not that in the function of reproduction they have found magnificent satisfaction for both urges.