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## THE PSYCHOLOGY OF TRANSVESTISM<sup>1</sup>

## **OTTO FENICHEL**

I

All authors who have dealt with the subject of transvestism are agreed that the mysterious behaviour of the victims of this perversion has points of contact with various other perverse practices. It was not until 1910 that this manifestation of psychopathia sexualis was, rightly, described by Hirschfeld as a specific form of perversion.<sup>2</sup> Earlier authors had classified cases of the sort on the basis of their points of contact with other perversions. This affinity leads us to hope that the psycho-analytical elucidation of transvestism may contribute something of importance to the explanation of the psychology of perversions in general. Again, in so far as the allied perversions have already been exhaustively studied by analytical methods, the fact that it is akin to them will enable us to understand the phenomenon of transvestism.

The behaviour of many transvestists gives an entirely masochistic impression: we call to mind, for instance, the figure which is the ideal of many such perverts— Hercules clothed in woman's garments and serving his mistress, Omphale. We know, too, that many who practise this perversion obtain gratification only when they are seen in the clothes of the opposite sex, i.e. strictly speaking, they are exhibitionists. But there are other, far more obvious, points in which transvestism is related to fetichism and homosexuality, and these points have already been the subject of scientific controversy. I refer to the over-estimation of clothing and body-linen, and to many purely fetichistic traits in cases of the sort, e.g. a particular preference for shoes or ear-rings. These characteristics have led writers on the subject to conceive of transvestism as a specific type of fetichism. Hirschfeld<sup>3</sup> and Ellis<sup>4</sup>,

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<sup>&</sup>lt;sup>1</sup> Read at the Eleventh International Psycho-Analytical Congress, Oxford, July 31, 1929.

<sup>&</sup>lt;sup>2</sup> M. Hirschfeld, Die Transvestiten, Berlin, 1910.

<sup>&</sup>lt;sup>3</sup> M. Hirschfeld, Die Transvestiten, Berlin, 1910.

<sup>&</sup>lt;sup>4</sup> 'Eonism.' Studies in the Psychology of Sex, Vol. VII, Philadelphia, 1928.

on the contrary, rightly emphasize the fact that the transvestist has one characteristic which is foreign to fetichism proper. To him the fetich becomes a fetich only when brought into relation with the person of the patient, not (or at any rate only in a very modified degree) as an object in itself. But transvestists want not only to wear women's clothes but to live altogether like women; that is to say, they are effeminate. This fact afforded sufficient reason for their being frequently grouped with passive homosexuals, a view energetically controverted by Hirschfeld, who demonstrated that transvestists in general are erotically attracted exclusively to persons of the opposite sex. Later, he<sup>5</sup> and Näcke<sup>6</sup> classified transvestists according to their sexual aim as the heterosexual, homosexual, narcissistic and asexual types. To psycho-analysts there is no meaning in such a classification, because it is based solely on the manifest expressions of instinct and completely disregards the unconscious instinctual processes. In this connection Stekel<sup>7</sup> is of opinion that transvestism should be construed simply as a mask for homosexuality. But the problem which then confronts us is to find out under what conditions this mask in particular is selected.

To sum up: the point which the transvestist has in common with the fetichist is the over-estimation of feminine clothes and body-linen, while he shares with the passive homosexual (and the feminine masochist) the feminine psychic attitude. The point of difference between him and both these other types of perverts lies in his specific sexual wish to assume the dress of the opposite sex. Psycho-analysts will suspect that where there is this manifest agreement, there will be a corresponding resemblance in the fundamental unconscious mechanisms. And the analysis of transvestists entirely confirms this suspicion.

Fetichism and passive homosexuality in men have been so exhaustively studied analytically that the results of the investigation can be reduced to certain short formulæ. According to Freud<sup>8</sup> castration-anxiety prevents the fetichist from accepting the fact of the lack of the penis in women, and he can love only when he has supplied his female

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<sup>&</sup>lt;sup>5</sup> Jahrbuch für sexuelle Zwischenstufen, 1923.

<sup>&</sup>lt;sup>6</sup> 'Zum Kapitel der Transvestiten, ' Archiv. für Kriminalanthropologie, Bd. XVII.

<sup>7</sup> Cf. 'Der Fetichismus' and 'Onanie und Homosexualität.'

<sup>&</sup>lt;sup>8</sup> Freud: 'Fetishism, ' INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS, IX, p. 161.

love-object with an illusory penis. The cause of the feminine homosexual's abnormality is, likewise, castration-anxiety. He is incapable of loving a being who lacks the penis; castration-anxiety (and, of course, also constitutional factors) have led him to solve his Œdipus complex by substituting identification with his mother for his love of her. He is now himself the mother, the woman, and in this rôle he seeks for new objects, whether it be the father or a representative of his own self.<sup>9</sup> The transvestist, who is akin to both these types of pervert, seems to be the one to whom both formulæ simultaneously apply: he has not been able to give up his belief in the phallic nature of women and, in addition, he has identified himself with the woman with the penis. Identification with the woman, as a substitute for, or side by side with, love for her, is so plain in the manifest clinical picture that Ellis, as we shall hear presently, regarded it as the essence of transvestism.<sup>10</sup> But the woman with whom the transvestist identifies himself is conceived of by him as phallic, and this is the essential feature in the situation-a feature which, since it is unconscious, could not have been discovered but for psycho-analysis.

In the act of transvestism both object-love and identification are present, the forms in which each manifests itself being modified by the castration-complex and the patient's obstinate retention of his belief in the woman's possession of the phallus. The act has a two-fold significance: (1) object-erotic (fetichistic), and (2) narcissistic (homosexual). (1) Instead of coitus with the mother or her substitute the patient enters into fetichistic relations with her clothes, which he brings into as close contact as he can with his own person, and particularly with his genital organs. This is the explanation of the 'condition of love, ' frequently met with, that the garments or body-linen in question should have been used and, if possible, should still retain something of the warmth and odour of the woman's body. This intercourse is conceived of in typically sadistic terms. (2) The patient himself represents a woman with a penis. A woman: he shouts that abroad. A woman with a penis: that is revealed by analysis. Here we have a two-fold representation of the penis: (a) in the patient's genital, actually present under the woman's clothes (one transvestist had recurrent phantasies of the amazement of a lover who, approaching

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<sup>&</sup>lt;sup>9</sup> Cf., for instance, 'Drei Abhandlungen zur Sexualtheorie, 'Ges. Sch., Bd. V, S. 18, footnote.

<sup>&</sup>lt;sup>10</sup> Cf., for instance, 'Drei Abhandlungen zur Sexualtheorie, 'Ges. Sch., Bd. V, S. 18, footnote.

him under the impression that he was a woman, discovered the penis when the woman's clothes were removed); (b) in the garment, which is a symbolic substitute for the penis and which the transvestist (even if he indulges his passion only secretly and onanistically) always wants to display-a form of displaced exhibitionism which, like true exhibitionism, is designed to refute the idea of castration. In order to make the clinical picture of transvestism intelligible in terms of psycho-analysis we must expand these formulæ by a description of the way in which the transvestist, like the homosexual, proceeds to fresh objectchoices, having completed his identification with the woman. In these choices we shall again find an element both of narcissism and of object-erotism. With regard to the former we must note that only in a subject of a peculiarly narcissistic disposition is it possible for object-love to be so extensively replaced by identification. It is a fact that the narcissistic regression manifested in this identification goes far beyond that which we are accustomed to observe in homosexuals. Love for the subject's own self-phantasies that the masculine element in his nature can have intercourse with the feminine (i.e. with himself) are not uncommon. Love for the phallic mother is often transformed into love for the ego in which a change has been wrought by identification with her. This is a feature in the psychic picture which has struck even non-analytical writers, who have described a narcissistic type of transvestist besides the heterosexual and homosexual types.

On the other hand, patients are influenced by their feminine identification in their choice even of real objects; they want to be looked upon and loved as women or, alternatively, where the primal sadism has been turned against the ego, to suffer masochistic tortures. (Here again we note in the passive sexual aim, which, in spite of the phallic character of the illusory woman, dominates the picture, the introduction of the narcissistic factor.) Analysis demonstrates that this object-tendency of the transvestist is directed (1) in the deeper mental strata towards the father. In this point the transvestist resembles the passive homosexual, but the former is seldom conscious of the homosexual character of this object-choice. He says in effect to the father: 'Love me, I am just as beautiful (in the phallic sense) as my mother.' Or, more correctly: 'Love me as you love my mother; it is not true that this wish of mine places my penis in jeopardy!' But the tendency of which we are speaking is also directed (2) towards the mother. This is the more superficial and obvious relation, and it was this which justified Hirschfeld, who did not include the unconscious in his purview, in

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denying the homosexuality of the transvestist. Perverts of this type consciously take a special interest in feminine homosexuality; they want to be loved as women by women, to be in the relation of the slave to her mistress. The analytical explanation is to be found in the most important accidental factor in transvestism, namely, that, as a rule, contemporaneously with the identification with the mother, there exists in another, more superficial, psychic stratum, a similar identification with a little girl. This is designed to secure for the subject all the advantages of a regression into early childhood. (For example, a patient of this type who had handled a female infant during the day, dreamt the following night that he put on women's clothes and during the dream he wetted his bed.) This second process of identification may occur when, as seems often to be the case, a sister has at an early period to a great extent become a mother-substitute. Then the transvestist not only addresses the father as we have already described, but at the same time says to the mother: 'Love me, I am just as beautiful (in the phallic sense) as my sister.' Or, more correctly: 'Love me as you love my sister! It is not true that this wish of mine places my penis in jeopardy.'

II

I think it now behaves me to cite some analytical material in proof of these propositions. I will confine myself to putting before you the most important points in a case which was subjected to a thorough analysis, and I hope that they will illustrate the meaning of transvestism as I have tried to present it to you. The patient was a married man forty years old, who, in spite of his neurosis, was successful in his professional life and was the father of several children. He suffered from obsessional neurosis and hypochondria with certain paranoid symptoms. He loved his wife deeply and was very considerate and affectionate to her, but sexual intercourse with her left him unsatisfied. He could obtain gratification only in onanism; this he practised with the accompaniment either of transvestist phantasies, or, more often, of actual transvestist behaviour-dressing himself in his wife's clothes. The content of the accompanying phantasy was simply: 'I am a woman.' Of the details which he communicated in analysis I may mention the following: he indulged in an additional important phantasy, whose content was: 'And I am seen to be a woman, ' and, further, gratification was conditional upon the wearing of women's clothes being a matter of everyday occurrence

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i.e. he experienced the most lively excitation when he imagined that he was putting on women's clothes not for the purpose of stimulation but because it was natural for him to be dressed so. He had, in addition, various masochistic phantasies of the type in which the female slave serves her mistress, and he entertained the desire to be a woman, quite apart from any actual sexual situation. From the history of the patient's childhood I may communicate the following facts. His mother died early and his father soon married again. His father was a man of a petty, fault-finding, anal character, while the step-mother was domineering, guarrelsome and very strict with the children. Evidently there must have existed a very strong sensual (probably passive-anal) bond between the father and the step-mother, but at the same time the former kept up a kind of cult of the memory of his first wife. In everything the step-mother ruled the house (here we have the type of 'the feeble father'), so that the patient had plenty of opportunity to believe in her phallic nature. His attitude to her was ambivalent throughout, but both in his hatred (fear) and his love he remained entirely passive. There emanated from her a strong atmosphere of prohibition; the castrating figures in his dreams proved to be screen-figures standing for her. When the patient was a little boy, she had forced him to wear gloves and had bound his hands to prevent his practising masturbation (or possibly to prevent his scratching himself at a time when he was being treated for worms). (This binding gave rise later to masochistic phantasies.) Moreover, as a little boy he suffered from prolapse of the rectum and, every time he defecated, she pressed back the rectum with her finger. In analysis the patient could still recall the tremendously pleasurable feeling which this gave him.

His principal sexual object in childhood was a sister three years older than himself, with whom he indulged in all manner of sexual games, mutual masturbation, etc. Probably this elder sister originally played the part of seducer, and this seduction caused a similar disturbance in his sexual development as is recorded in that of the Wolf-man.<sup>11</sup> There certainly was a period in which he assumed the active rôle in their mutual relations; for example, he remembered that on one occasion he had purposely wetted her with urine. This relation, like his relation with his step-mother, was highly ambivalent. He not only loved his

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<sup>&</sup>lt;sup>11</sup> Freud, 'The History of an Infantile Neurosis, ' Collected Papers, Vol. III.

sister, but hated her as a rival. This hatred combined with the sensual element to produce a markedly sadistic attitude (possibly to cancel the seduction). One day this attitude vanished, and the patient became purely passive in his relation to his sister. We shall return to the question of this later passive attitude, and discuss when it developed and why. During analysis it was still recognizable in a certain apprehensiveness of an obsessional nature and, further, in an important screenmemory in which the patient professed to have pulled one of his sister's arms from its socket. Otherwise, the passive attitude was repressed, and the underlying tendency, having been diverted towards the subject's ego, had been converted into masochism.

It was from his relation to his sister that the patient developed his transvestism. His sister used to play at 'dressing dolls', and she would dress up the living dollher little brother—putting clothes of her own on him. This used to happen when the patient was about four years old, and at first he disliked it, because it degraded him into a doll. After some repetitions, however, he began to enjoy the game, because he derived sexual pleasure from the smell of his sister, which clung to things she wore, especially to her hair-ribbon and pinafore. In his eighth and tenth years the children used to act little plays, in which they changed clothes with one another. They went on doing this in their games, and the patient, when he imagined he was a girl and especially that others regarded him as a girl, experienced pleasure which was unquestionably sexual, and was accompanied by sensations resembling orgasm. Presently his sister became bored with the game, and he had to be more and more artful in persuading her to play it. Finally he took to putting on her clothes in secret, when he was alone, and the pleasure this gave him roused a lively sense of guilt. At the age of about thirteen he forgot this game, but in his seventeenth year he recollected it and began it again with unmistakeable sexual excitation. From that time on, dressing-up in women's clothes became associated with manual masturbation, and the beginning of the perversion dates from this. It is noteworthy that for a long time the patient made use of his sister's clothes and, later, those of sister-substitutes. The idea of putting on garments belonging to his step-mother or to women resembling her did not stimulate his imagination in the least.

What then is the meaning of this perversion? The object-erotic factor is the easier and simpler to understand from the case-history. The pleasure which the patient derived proceeded in the first instance

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from the smell of the clothes: a hair-ribbon and, above all, a pinafore, represented parts of the body of his sister, with whom he was in the habit of masturbating. This practice sometimes took the form of his sister's sitting on his knee and sliding backwards and forwards. When he wore her pinafore he used to move it about in a similar way. The pinafore represented his sister's body, Later, when he made use of her clothes instead of her person, he had the advantage of ceasing to be dependent, for his sexual enjoyment, on the caprices of his sister, who was not always inclined to gratify him. Another circumstance was that, originally, using the same bed or the same bath-water as she had the same significance as wearing her clothes. How came it about that the sister herself gradually lost her sexual significance for him, whilst 'symbols' (her clothes) were substituted for her? Analysis revealed the answer unmistakeably. It was because the brother discovered that she had no penis. We mentioned the remarkable screen-memory of his pulling his sister's arm from its socket. This memory 'screened' their mutual onanism and especially the patient's sadism. Once, when he and his sister were having a bath together in the bath-room, he caught sight of her genitals, and this reactivated a still earlier, repressed recollection of his step-mother's genitals. It happened that at the same period his sister was having electric treatment for enuresis (the patient himself used for a time to wet his bed) and used to scream dreadfully when the treatment was in process. There could then, he reasoned, be only two possibilities: either the electric treatment was the punishment by castration for sexual naughtiness; in that case he was threatened with it, after his sister. Or it was a medical remedy for the lack of the penis, which had fallen a victim to his own sadism. In that case it was but just that the talion punishment of castration should await him. In this anxiety he desisted altogether from his sadistic behaviour and turned the tendency against himself. He wanted to have nothing more to do with his sister, who reminded him of the mischief he had done, and he substituted for her her clothes, which did away with the dreadful nakedness. The bath (and, later, water in general) remained a situation of terror. We shall have to discuss the fact that his anxiety took the form that the water in running out might carry off one of his fingers or his whole body and that the dread became displaced to the water-closet, where the flush might wash away the whole child as well as his motion. So far, the patient's mental processes followed the scheme which Freud has worked out for fetichism.

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The patient, however, became a transvestist because his retention of the idea of the female penis was reinforced by his identification with the woman. In later years it became transparently clear that he himself was enacting the rôle of the sister, whom he desired to be. In imagination he lived her life, and in the same way, after his marriage, he would feel unwell during his wife's period of menstruation. This has a significance in connection with the question of punishment. It meant: I harboured the wish to do my sister an injury, so now I am forced to become like her, so as to submit to suffering. From the point of view of his instinctual life he had sufficient reason to envy his sister. She was the elder, and both parents evidently made a favourite of her. He was especially jealous of her relation to their step-mother, who talked 'feminine secrets' with her. Later he developed a neurosis, when his parents were about to arrange a marriage for his sister. Analysis revealed the jealous thought: 'Why do they arrange for her to marry and not for me?' The patient had also a recollection, important in connection with the deeper mental strata, of a fit of envy which overtook him one Christmas, when his mother with much ceremony presented his sister with a particularly beautiful doll. Such ambivalent dealings indicated that, in obedience to the inner prohibition by which his castration-anxiety prevented his entering into an object-relation with his sister, he had regressed to identification.

Now this identification with the girl was bound to come into direct opposition to the most intense castration-anxiety. The influence of this made itself felt in the aim which the patient set before him: 'I want to be my sister and yet to retain my penis.' When indulging in his perverse practices, it was his custom, as soon as ejaculation had taken place, to tear the borrowed clothes off as quickly as possible. In connection with this he had the association that he had been warned that, if one made faces and the clock struck, one's face would stay so. Thus he was afraid that he might actually 'remain stuck' in his feminine rôle, and this would involve his forfeiting his penis. His transvestist behaviour was designed to counter his castration-anxiety. We have evidence of this in a recollection that, when on one occasion he caught sight of a crippled boy, he felt an impulse to change clothes with him. The implication was a denial that the boy really was a cripple. The patient combined his femininity with a naïve, narcissistic love for his own penis, upon which he bestowed a number of pet-names, as though it were a child. Moreover, the girl's name, which he chose to be known by when enacting the rôle of a girl, had a striking

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resemblance to one pet-name for the penis. The first time he had sexual intercourse with a woman, he did not know where to find the vagina and looked for it on the upper part of her thigh. Even at the time when I knew him, he always had a feeling during coitus that he must look for something which he could not find. At one of the dramatic performances, in which he acted the part of a girl, he represented an Easter Hare. He recollected being troubled because he thought the hare's ears and tail were not stiff enough. Here we have a proof of the phallic nature of the woman whose rôle he assumed-a matter which becomes more intelligible to us when we picture the over- whelming castration-anxiety under which the patient laboured. We have mentioned that his step-mother represented to his mind the person who castrates. From the innumerable screen-memories connected with the idea of castration I will quote a single example. An obsessive action of the patient's was that of clutching at his penis (analytically interpreted: to see if it was still there) and of counting his toes (to see that none was missing). Analysis revealed that he had dreaded that his mother, in pressing back the prolapsed rectum, might rob him of the intestine, and at that time he was haunted by the fear that it might fall into the lavatory-pan. The uncanny thing about the water-closet and the bath was that the faces and the water simply disappearedwere no longer there—just so, he feared, had his sister's penis vanished. Further, this idea of being 'gone' was his conception of death. And in his mind the whole terrifying mystery of castration was intertwined with the terrifying mystery of his mother's death. The content of his unconscious anxiety was not simply: 'My sister's penis vanished because of some sexual act, ' but also, 'My own mother died because of some sexual act.' Accordingly, particularly during the period of his subsequent hypochondria, the patient suffered from the most intense dread of death (and especially the dread of infection, as I will show later). Detailed analysis of this anxiety led us first of all to ideas about the colour 'black' and of 'hair'. (As a child he himself had long hair and dreaded its being cut. He treasured up the locks which were cut off. His step-mother wore false hair, i.e. hair which could be taken off. The hair of the head stood for pubic hair.) These ideas led back to dreams of the primal scene and to occasions, long before his experiences with his sister, when, with anxiety and a feeling of protest, he became aware of the nature of his mother's genitals.<sup>12</sup>

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<sup>&</sup>lt;sup>12</sup> The female genital, when thus caught sight of, becomes an object of fear not simply because of the lack of the penis but because it is regarded as a menacing weapon. (The waste-pipes of the water-closet and the bath are thought of as devouring mouths.) Cf. my article: 'Zur Angst vor dem Gefressenwerden', Internationale Zeitschrift für Psychoanalyse, Bd. XIV, 1928, S. 404

Thus, the patient's transvestism was evidently an attempt to allay these various anxieties. The content of the perversion was: 'Phallic girls do exist; I myself am one'. Let us now examine his search for fresh love-objects, when once the identification had been completed, and let us consider the relation to the mother which underlay that to the sister.

The factor of narcissism was transparently clear. Not only did he love himself in the rôle of a girl (acting a woman in plays, posturings before the looking-glass, a preference for a girl's long hair), but this love took an active form, such as he longed for from his sister. Thus he dreamt that he was embracing a little boy, saying to him tenderly: 'My little brother!' In passing on to consider his actual choice of new love-objects, we will again begin with a dream. This was as follows: 'My wife had a disease of the lungs. A stout woman stabbed her in the back from behind. Thereupon I found myself in a theatre, with the upper part of my body naked.' The exhibition-situation at the end prepares us for the fact that the dream relates to transvestism. Actually the patient, who was a hypochondriac, suffered from a dread of lung affections. In the dream, he is the woman whom another woman stabs from the rear. His associations to this stab were as follows: the uvula, phantasies of poisoning by way of the anus and, finally, enemas which his stepmother had given him as a child. Before going to sleep on the night of this dream, the patient had indulged in his perverse practices. Hence we arrive at the interpretation: 'When I am in women's clothes I should like my step-mother to stick something into my "behind", but at the same time I dread it'. The passiveanal desires implied in the patient's femininity had become abundantly clear: the recollections of enemas and the prolapsed rectum showed that these wishes had reference to the mother whom he conceived of as phallic. This is where the phantasies of the female slaves come in, the meaning being: 'I want my stepmother to treat me like a little girl, but there is no need for me to fear castration'. In correspondence with this wish the patient cherished in his mind two types of female imagos between which he strictly differentiated: the 'little

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girl' and the 'Amazon', i.e. the sister and the step-mother. The women whose clothes he desired to put on belonged to the first type only; on the other hand, he wished to enter into masochistic relations only with women of the second, masculine type.

Having discovered this anal dependence on women it seemed obvious to reason as follows: The patient's Œdipus complex was normal in so far as he, like other males, wished to take his father's place with his mother. Only, the real father's attitude to his second wife was of a passive-anal nature; similarly, the patient wished to enter into a passive-anal relation to the phallic mother. In actual fact the step-mother tended the father in connection with his anal functions and this did really rouse in the patient the wish that his father would die. But the child had not always seen his father in such a helpless and passive guise. Once he too had been strong and active, and it was to him that in the deepest mental strata the patient's feminine attitude had reference.

Analysis of his social inhibitions revealed that his passivity and anxiety related, fundamentally, not to women but to men. Again, his exhibitionist tendency-the craving to be admired as a woman by people in general-had reference to men. When we were investigating this subject of the father of his infantile days, the first thing that emerged in his memory was a long-forgotten figure which was a 'screen-figure' for his father: a carpenter, who had done some work in the patient's home and whose admiration he had solicited. Next, he felt an urgent impulse to change into women's clothes in front of his father's portrait. Finally, there came recollections of excitation, obviously sexual and accompanied by anxiety, which he experienced when lying in bed with his father. But the most striking thing about this part of the analysis was the way in which the patient suddenly grasped the meaning of many inhibitions from which he suffered in his real relations with men! The picture was then blurred once more by a recollection of his later childhood: 'I wanted to thrust something into my father's "behind".' We found that this implied: 'I want to love you, father, in just the same way as my step-mother does.' But we were obliged to conjecture that, before he felt the desire to stick something into his father, he must have wished his father to stick something into him. Quite in accordance with this interpretation was the fact that he had not identified himself with his step-mother; on the contrary, behind the identification with his sister lay the first identification of all-that with his own mother. His heart cried out to his father: 'Do not put

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away the memory of your first wife. Remember her; she lives still, in me. Love me, your first wife, more than my step-mother!' And the content of the fearful anxiety which came into conflict with these wishes was this: 'Did not death overtake my mother because she let my father love her? Then I, too, shall have to die'. It now becomes clear that the overwhelming castration-anxiety, which the transvestism was designed to eliminate, was at bottom a dread of impregnation by the father. This was the meaning of the dread of infection, poison and water and also of a number of screen- memories in which the patient envied the act of parturition. As a child he must have phantasied that his mother perished through pregnancy and must have evolved the theory that having children meant losing the penis. In his transvestism he was trying to repudiate this dread also, saying to himself: 'I may wish to be a woman and capable of bearing children—and yet keep my penis!'<sup>13</sup>

III

We have adduced analytical material in proof of all the hypotheses we put forward in Section I. If, now, we are in search of a pathognomonic ætiology of the patient's transvestism, we are obliged to admit that we have not discovered one. We must in any case assume that he had a special bisexual disposition, for otherwise the desire to bear children, for example, could never have acquired such importance. But we do not know whether, if life had brought him different experiences, his strong sadism might not have enabled his masculine side to develop satisfactorily. But this mental make-up is common to homosexual and transvestist alike. Again, the series of experiences: the primal scene—castrationanxiety—flight into femininity, based on narcissism, occurs in other clinical pictures, and we do not know what circumstances cause the belief in the phallic woman to be retained with the specific perversion of transvestism, since the above series is present in other forms of nervous disease as well. It is true that we frequently

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<sup>&</sup>lt;sup>13</sup> Deeper analysis of the narcissistic mental strata finally revealed that the identification with his dead mother (her 'spirit') was performed by means of introjection (inhaling) and that in the unconscious the introjected mother was equated with his own penis. Thus we arrived at the following symbolic equation: patient in women's clothes = the mother with a penis = the penis in general. We recollect the similarity between the girl's name by which he so much wished to be called and his pet-name for the penis.

find transvestism combined with precisely these diseases: narcissistic neuroses, hypochondria (cf. the case quoted by Alexander<sup>14</sup>) and other perversions. Over and above all this, the case we are examining seems to have been determined by specific environmental factors: the characters of his father, mother and sister, and their interplay, seem to have thrust the patient's rôle upon him. But, again, similar specific environmental conditions appear by no means rare, for all writers on the subject tell us of transvestists whose mothers had a very great desire for a daughter! Ellis goes so far as to cite this circumstance as a proof of the purely hereditary ætiology of transvestism, but in this he is in error.

Such communications about this perversion as are to be found in analytical literature bear a remarkable resemblance to our own conclusions. It is only thanks to the writings of Freud which have appeared since Sadger<sup>15</sup> and Boehm<sup>16</sup> discussed the question that it has been possible for me to give a greater coherence to my account. Sadger evolved the following formula as summing up the transvestist's train of thought: 'As a female I should be loved more by my mother and, indeed, by everyone. When I put on my mother's dress I feel as if I were she herself and so could arouse sexual feeling in my father and possibly supplant her with him. And, finally, a third person derives as much pleasure from a woman's clothes as from herself and looks on the putting-on of her frock as a sexual act.' This formula is correct, but in my opinion it leaves out the phallic factor, which is so important and which Sadger does mention accidentally elsewhere, though there are yet other passages in which he contradicts this by asserting that it is the vulva which is the fetish. Boehm, again, lays stress in isolated instances on precisely this phallic character of the transvestist's perversion ('In the clothes which they put on they represent the mother with the penis')<sup>17</sup>, and on the sadistic nature of the wishes which originally related to the mother. Stekel contents himself with the incomplete

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<sup>&</sup>lt;sup>14</sup> Alexander, Psycho-analyse der Gesamtpersönlichkeit, VII Vorlesung.

<sup>&</sup>lt;sup>15</sup> Sadger, Die Lehre von Geschlechtsverirrungen, Vienna, 1921.

<sup>&</sup>lt;sup>16</sup> Boehm, 'Bemerkungen zum Transvestitismus, ' Internationale Zeitschrift für Psychoanalyse, Bd. IX, S. 497.

<sup>&</sup>lt;sup>17</sup> Dr. Boehm has been kind enough to tell me that further analyses of transvestists have confirmed this view. He had one patient who used to turn a bottle upside down on his penis and then to put on women's clothes and dance in front of a looking-glass and so, finally, to masturbate.

statement that transvestism is based on homosexuality and mother-fixation. Preanalytic literature gives but a meagre account of the matter to analysts, nevertheless, even the manifest material of such cases as are described in it contains all sorts of data which go to prove our hypothesis. We note, side by side with the transvestism, fetichistic, masochistic and exhibitionistic tendencies, narcissism, phantasies of the mistress and the female slave, identification with the mother, histories of seduction by elder sisters, aversion from physical sexuality and especially from nakedness, the naked female body and from homosexuality, the 'retour a l'enfance' (Ellis), but also a passion for women of a masculine type (Hirschfeld). One of Hirschfeld's cases gave rein to his transvestist tendencies by joining in a display of trick-shooting in the guise of a woman, thus publicly courting admiration as an 'armed woman'.<sup>18</sup> Ellis quotes one case which seems to contradict our view, because the patient's sexual aim was quite obviously castration, but this same man used to put on women's shoes and ear-rings, which indicates that, although he wished for castration, he was always impelled to cancel it again.<sup>19</sup> Cases of actual self-castration by transvestists or of disgust felt by them for the male genital and longing for that of the female would have to be examined analytically before we could make any pronouncement about them. Ellis's theory is as follows:-All normal love contains an element of identification; in the perversion of transvestism this element is hypertrophied: 'He has put too much of "me" into the "you" that attracts him'.<sup>20</sup> This theory is, in our view, correct but incomplete. We think that we have been able to predicate something about the nature and causes of this identification. Just as correct and just as incomplete is Ellis's formula about the relation of transvestism to homosexuality; they are, he says, "two allotropic modifications of bisexuality." But it is possible to differentiate the characteristics of these modifications.

## IV

We have recognized that the specific factor in the perversion of transvestism is its relation to the castration-complex. It remains for us to ask whether this conclusion contributes anything to our understanding

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<sup>&</sup>lt;sup>18</sup> Die Transvestiten, Case V.

<sup>&</sup>lt;sup>19</sup> Die Transvestiten, Case V. Ss. 63 et seq.

<sup>&</sup>lt;sup>20</sup> Die Transvestiten, Case V. S. 108.

of the psychology of the perversions in general. Sachs, in an article in which he examines the latter question, demonstrates that what characterizes the pervert is his capacity to transfer part of his infantile sexuality over to the ego, to permit himself to indulge it and by this very means to hold in repression those infantile sexual impulses which still remain (i.e. the Œdipus complex).<sup>21</sup> The riddle we have to solve is how this process is possible, under what conditions can perverse component instincts retain or acquire the capacity to produce orgasm. As we now know that all perversions, including transvestism, are so intimately connected with the castration-complex, we can at least reply with the following hypothesis: Normally, what conditions the disappearance of infantile sexuality (the passing of the Œdipus complex) is the dread of castration.<sup>22</sup> Now the homosexual has no regard for any human being who lacks the penis, the fetichist denies that such beings exist, while the exhibitionist, the scoptophiliac and the transvestist try incessantly to refute the fact. Thus we see that these perverts are endeavouring to master their anxiety by denying its cause. In so far as they succeed in maintaining the illusion that there is no such thing as a lack of the penis, they save themselves anxiety and can indulge in infantile sexual practices because, just in proportion as they can effectively deny the grounds for it, their castration-anxiety, which otherwise would act as a check on such sexual behaviour, is diminished. We must, however, qualify this statement by saying that this process succeeds only up to a certain point. That is to say, such infantile activities are bound up with a simultaneous, incessantly renewed denial of the reason for anxiety, and it is this denial which is represented in the perverse practice. The behaviour of the pervert implies: 'You have no need to be afraid' and, so long as he believes himself, his infantile sexual activities can produce orgasm, which signifies the gratification of his Œdipus wishes.

It is true that this hypothesis makes the feminine perversions and the whole subject of the castration-complex in women all the more problematic. Indeed, one does receive the impression that they are to some extent different in character from, though akin to, perversions in men. This strikes us, for instance, when we think of female exhibitionists and recall Hárnik's work on the differences between masculine and feminine narcissism.<sup>23</sup> Female fetichists are extremely rare, and female transvestists seem to be simply women who covet the penis and, out of desire to possess it, have identified themselves with men.

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<sup>&</sup>lt;sup>21</sup> 'Zur Genese der Perversionen,' Internationale Zeitschrift für Psycho-analyse, Bd. IX, S. 172.

<sup>&</sup>lt;sup>22</sup> Freud, 'The Passing of the Œdipus Complex,' Collected Papers, Vol. II.

<sup>&</sup>lt;sup>23</sup> Hárnik, 'The Various Developments undergone by Narcissism in Men and in Women,' INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS, V, p. 66