

It was not until fifteen months after the case was over and this paper composed that I had news of my patient's condition and the effects of my treatment. On a date which is not a matter of complete indifference, on the first of April (times and dates, as we know, were never without significance for her), Dora came to see me again: to finish her story and to ask for help once more. One glance at her face, however, was enough to tell me that she was not in earnest over her request. For four or five weeks after stopping the treatment she had been 'all in a muddle', as she said. A great improvement had then set in; her attacks had become less frequent and her spirits had risen. In the May of that year one of the K.'s two children (it had always been delicate) had died. She took the opportunity of their loss to pay them a visit of condolence, and they received her as though nothing had happened in the last three years. She made it up with them, she took her revenge on them, and she brought her own business to a satisfactory conclusion. To the wife she said: 'I know you have an affair with my father'; and the other did not deny it. From the husband she drew an admission of the scene by the lake which he had disputed, and brought the news of her vindication home to her father. Since then she had not resumed her relations with the family.

After this she had gone on quite well till the middle of October, when she had had another attack of aphonia which had lasted for six weeks. I was surprised at this news, and, on my asking her whether there had been any exciting cause, she told me that the attack had followed upon a violent fright. She had seen some one run over by a carriage. Finally she came out with the fact that the accident had occurred to no less a person than Herr K. himself. She had come across him in the street one day; they had met in a place where there was a great deal of traffic; he had stopped in front of her as though in bewilderment, and in his abstraction he had allowed himself to be knocked down by a carriage. She had been able to convince herself, however, that he escaped without serious injury. She still felt some slight emotion if she heard any one speak of her father's affair with Frau K., but otherwise she had no further concern with the matter. She was absorbed in her work, and had no thoughts of marrying.

She went on to tell me that she had come for help on account of a right-sided facial neuralgia, from which she was now suffering day and night. 'How long has it been going on?' 'Exactly a fortnight.' I could not help smiling; for I was able to show her that exactly a fortnight earlier she had read a piece of news that concerned me in the newspaper. (This was in 1902.)¹ And this she confirmed.

Her alleged facial neuralgia was thus a self-punishment—remorse at having once given Herr K. a box on the ear, and at having transferred

1. [No doubt the news was of Freud's appointment to a Professorship in March of that year.]

her feelings of revenge on to me. I do not know what kind of help she wanted from me, but I promised to forgive her for having deprived me of the satisfaction of affording her a far more radical cure for her troubles.

Years have again gone by since her visit. In the meantime the girl has married, and indeed—unless all the signs mislead me—she has married the young man who came into her associations at the beginning of the analysis of the second dream.² Just as the first dream represented her turning away from the man she loved to her father—that is to say, her flight from life into disease—so the second dream announced that she was about to tear herself free from her father and had been reclaimed once more by the realities of life.

Three Essays on the Theory of Sexuality

If *The Interpretation of Dreams* is the first pillar on which the structure of psychoanalysis rests, the *Three Essays on the Theory of Sexuality* is the second. The brochure of some eighty pages of 1905, quite sparse and without some of its most celebrated sections, was steadily elaborated as edition after edition appeared. The last enlargement of the *Three Essays* came in 1924 (the so-called sixth edition of 1925 is identical with this publication), and it was then some forty pages longer than the little book of the first edition. One can follow the process of elaboration through the footnotes specifying the date that some paragraph or section was added to the original.

As earlier selections have made abundantly clear, Freud's interest in sexuality as the fundamental cause of neurosis and its prominence in mental life in general goes back to the early 1890s. His correspondence with Fliess, and especially the memoranda he enclosed with his letters, demonstrate his concentration on the erotic dimensions of the mind even before he had "invented" psychoanalysis. Fliess was most useful to Freud in this pursuit; the ideas of bisexuality, and of infant sexuality, owe much to Freud's intimate from Berlin. The abandonment of the "seduction theory" of the neuroses, which depended wholly on sexual etiologies, did not weaken Freud's commitment to the central import of sexuality. On the contrary, it allowed him to see its function in fantasy life. As soon as he had completed and published his *Interpretation of Dreams*, Freud accordingly turned to a theory of sexuality, and the *Three Essays* was the result.

2. [In the editions of 1909, 1912 and 1921 the following footnote appeared at this point: 'This, as I afterwards learnt, was a mistaken notion.']

I

THE SEXUAL ABERRATIONS¹

The fact of the existence of sexual needs in human beings and animals is expressed in biology by the assumption of a 'sexual instinct', on the analogy of the instinct of nutrition, that is of hunger. Everyday language possesses no counterpart to the word 'hunger', but science makes use of the word 'libido' for that purpose.

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.

I shall at this point introduce two technical terms. Let us call the person from whom sexual attraction proceeds the *sexual object* and the act towards which the instinct tends the *sexual aim*. Scientifically sifted observation, then, shows that numerous deviations occur in respect of both of these—the sexual object and the sexual aim. The relation between these deviations and what is assumed to be normal requires thorough investigation.

(1) DEVIATIONS IN RESPECT OF THE SEXUAL OBJECT

The popular view of the sexual instinct is beautifully reflected in the poetic fable which tells how the original human beings were cut up into two halves—man and woman—and how these are always striving to unite again in love. It comes as a great surprise therefore to learn that there are men whose sexual object is a man and not a woman, and women whose sexual object is a woman and not a man. People of this kind are described as having 'contrary sexual feelings', or better, as being 'inverts', and the fact is described as 'inversion'. The number of such

1. The information contained in this first essay is derived from the well-known writings of Krafft-Ebing, Moll, Moebius, Havelock Ellis, Schrenck-Notzing, Löwenfeld, Eulenburg, Bloch, and Hirschfeld, and from the *Jahrbuch für sexuelle Zwischenstufen*, published under the direction of the last-named author. * * * {This note, like

some of the footnotes it has been necessary to omit, should serve as a reminder (as should the first chapter of *The Interpretation of Dreams* and the opening page of *Jokes and Their Relation to the Unconscious* [1905]) that Freud was only too ready to acknowledge the work of his precursors.}

people is very considerable, though there are difficulties in establishing it precisely.

(A) INVERSION

BEHAVIOUR OF INVERTS Such people vary greatly in their behaviour in several respects.

(a) They may be *absolute* inverts. In that case their sexual objects are exclusively of their own sex. Persons of the opposite sex are never the object of their sexual desire, but leave them cold, or even arouse sexual aversion in them. * * *

(b) They may be *amphigenic* inverts, that is psychosexual hermaphrodites. In that case their sexual objects may equally well be of their own or of the opposite sex. * * *

(c) They may be *contingent* inverts. In that case, under certain external conditions—of which inaccessibility of any normal sexual object and imitation are the chief—they are capable of taking as their sexual object someone of their own sex and of deriving satisfaction from sexual intercourse with him.

Again, inverts vary in their views as to the peculiarity of their sexual instinct. Some of them accept their inversion as something in the natural course of things, just as a normal person accepts the direction of his libido, and insist energetically that inversion is as legitimate as the normal attitude; others rebel against their inversion and feel it as a pathological compulsion.

Other variations occur which relate to questions of time. The trait of inversion may either date back to the very beginning, as far back as the subject's memory reaches, or it may not have become noticeable till some particular time before or after puberty. It may either persist throughout life, or it may go into temporary abeyance, or again it may constitute an episode on the way to a normal development. It may even make its first appearance late in life after a long period of normal sexual activity. A periodic oscillation between a normal and an inverted sexual object has also sometimes been observed. Those cases are of particular interest in which the libido changes over to an inverted sexual object after a distressing experience with a normal one.

As a rule these different kinds of variations are found side by side independently of one another. It is, however, safe to assume that the most extreme form of inversion will have been present from a very early age and that the person concerned will feel at one with his peculiarity.

* * *

NATURE OF
INVERSION

The earliest assessments regarded inversion as an innate indication of nervous degeneracy. This corresponded to the fact that medical observers first came across it in per-

sons suffering, or appearing to suffer, from nervous diseases. This characterization of inversion involves two suppositions, which must be considered separately: that it is innate and that it is degenerate.

DEGENERACY The attribution of degeneracy in this connection is open to the objections which can be raised against the indiscriminate use of the word in general. It has become the fashion to regard any symptom which is not obviously due to trauma or infection as a sign of degeneracy. * * * This being so, it may well be asked whether an attribution of 'degeneracy' is of any value or adds anything to our knowledge. It seems wiser only to speak of it where

- (1) several serious deviations from the normal are found together, and
- (2) the capacity for efficient functioning and survival seem to be severely impaired.²

Several facts go to show that in this legitimate sense of the word inverts cannot be regarded as degenerate:

(1) Inversion is found in people who exhibit no other serious deviations from the normal.

(2) It is similarly found in people whose efficiency is unimpaired, and who are indeed distinguished by specially high intellectual development and ethical culture.

(3) If we disregard the patients we come across in our medical practice, and cast our eyes round a wider horizon, we shall come in two directions upon facts which make it impossible to regard inversion as a sign of degeneracy:

(a) Account must be taken of the fact that inversion was a frequent phenomenon—one might almost say an institution charged with important functions—among the peoples of antiquity at the height of their civilization.

(b) It is remarkably widespread among many savage and primitive races, whereas the concept of degeneracy is usually restricted to states of high civilization (cf. Bloch); and, even amongst the civilized peoples of Europe, climate and race exercise the most powerful influence on the prevalence of inversion and upon the attitude adopted towards it.

INNATE CHARACTER As may be supposed, innateness is only attributed to the first, most extreme, class of inverts, and the evidence for it rests upon assurances given by them that at no time in their lives has their sexual instinct shown any sign of taking another course. The very existence of the two other classes, and especially the third [the 'contingent' inverts], is difficult to reconcile with the hypothesis of the innateness of inversion. This explains why those who support this

2. Moebius ("Über Entartung," *Grenzfragen des Nerven- und Seelenlebens*, III) (1900) confirms the view that we should be chary in making a diagnosis of degeneracy and that it has very little practical value: 'If we survey the field of degeneracy upon

which some glimpses of revealing light have been thrown in these pages, it will at once be clear that there is small value in ever making a diagnosis of degeneracy.'

view tend to separate out the group of absolute inverts from all the rest, thus abandoning any attempt at giving an account of inversion which shall have universal application. In the view of these authorities inversion is innate in one group of cases, while in others it may have come about in other ways.

The reverse of this view is represented by the alternative one that inversion is an acquired character of the sexual instinct. This second view is based on the following considerations:

(1) In the case of many inverts, even absolute ones, it is possible to show that very early in their lives a sexual impression occurred which left a permanent after-effect in the shape of a tendency to homosexuality.

(2) In the case of many others, it is possible to point to external influences in their lives, whether of a favourable or inhibiting character, which have led sooner or later to a fixation of their inversion. (Such influences are exclusive relations with persons of their own sex, comradeship in war, detention in prison, the dangers of heterosexual intercourse, celibacy, sexual weakness, etc.)

(3) Inversion can be removed by hypnotic suggestion, which would be astonishing in an innate characteristic.

In view of these considerations it is even possible to doubt the very existence of such a thing as innate inversion. * * *

The apparent certainty of this conclusion is, however, completely countered by the reflection that many people are subjected to the same sexual influences (e.g. to seduction or mutual masturbation, which may occur in early youth) without becoming inverted or without remaining so permanently. We are therefore forced to a suspicion that the choice between 'innate' and 'acquired' is not an exclusive one or that it does not cover all the issues involved in inversion.

* * *

BISEXUALITY A fresh contradiction of popular views is involved in the considerations put forward by Lydston [1889], Kiernan [1888] and Chevalier [1893] in an endeavour to account for the possibility of sexual inversion. It is popularly believed that a human being is either a man or a woman. Science, however, knows of cases in which the sexual characters are obscured, and in which it is consequently difficult to determine the sex. This arises in the first instance in the field of anatomy. The genitals of the individuals concerned combine male and female characteristics. (This condition is known as hermaphroditism.) In rare cases both kinds of sexual apparatus are found side by side fully developed (true hermaphroditism); but far more frequently both sets of organs are found in an atrophied condition.

The importance of these abnormalities lies in the unexpected fact that they facilitate our understanding of normal development. For it appears that a certain degree of anatomical hermaphroditism occurs normally. In every normal male or female individual, traces are found of the

apparatus of the opposite sex. These either persist without function as rudimentary organs or become modified and take on other functions.

These long-familiar facts of anatomy lead us to suppose that an originally bisexual physical disposition has, in the course of evolution, become modified into a unisexual one, leaving behind only a few traces of the sex that has become atrophied.

* * *

The theory of bisexuality has been expressed in its crudest form by a spokesman of the male inverts: 'a feminine brain in a masculine body'. But we are ignorant of what characterizes a feminine brain. There is neither need nor justification for replacing the psychological problem by the anatomical one. Krafft-Ebing's attempted explanation seems to be more exactly framed than that of Ulrichs but does not differ from it in essentials. According to Krafft-Ebing * * * every individual's bisexual disposition endows him with masculine and feminine brain centres as well as with somatic organs of sex; these centres develop only at puberty, for the most part under the influence of the sex-gland, which is independent of them in the original disposition. But what has just been said of masculine and feminine brains applies equally to masculine and feminine 'centres'; and incidentally we have not even any grounds for assuming that certain areas of the brain ('centres') are set aside for the functions of sex, as is the case, for instance, with those of speech.

Nevertheless, two things emerge from these discussions. In the first place, a bisexual disposition is somehow concerned in inversion, though we do not know in what that disposition consists, beyond anatomical structure. And secondly, we have to deal with disturbances that affect the sexual instinct in the course of its development.

SEXUAL OBJECT OF INVERTS The theory of psychical hermaphroditism presupposes that the sexual object of an invert is the opposite of that of a normal person. An inverted man, it holds, is like a woman in being subject to the charm that proceeds from masculine attributes both physical and mental: he feels he is a woman in search of a man.

But however well this applies to quite a number of inverts, it is, nevertheless, far from revealing a universal characteristic of inversion. There can be no doubt that a large proportion of male inverts retain the mental quality of masculinity, that they possess relatively few of the secondary characters of the opposite sex and that what they look for in their sexual object are in fact feminine mental traits. If this were not so, how would it be possible to explain the fact that male prostitutes who offer themselves to inverts—to-day just as they did in ancient times—imitate women in all the externals of their clothing and behaviour? Such imitation would otherwise inevitably clash with the ideal of the inverts. It is clear that in Greece, where the most masculine men

were numbered among the inverts, what excited a man's love was not the *masculine* character of a boy, but his physical resemblance to a woman as well as his feminine mental qualities—his shyness, his modesty and his need for instruction and assistance. As soon as the boy became a man he ceased to be a sexual object for men and himself, perhaps, became a lover of boys. In this instance, therefore, as in many others, the sexual object is not someone of the same sex but someone who combines the characters of both sexes; there is, as it were, a compromise between an impulse that seeks for a man and one that seeks for a woman, while it remains a paramount condition that the object's body (i.e. genitals) shall be masculine. Thus the sexual object is a kind of reflection of the subject's own bisexual nature.³

The position in the case of women is less ambiguous; for among them the active inverts exhibit masculine characteristics, both physical and mental, with peculiar frequency and look for femininity in their sexual objects—though here again a closer knowledge of the facts might reveal greater variety.

SEXUAL AIM OF INVERTS The important fact to bear in mind is that no one single aim can be laid down as applying in cases of inversion.

Among men, intercourse *per anum* by no means coincides with inversion; masturbation is quite as frequently their exclusive aim, and it is even true that restrictions of sexual aim—to the point of its being limited to simple outpourings of emotion—are commoner among them than among heterosexual lovers. Among women, too, the sexual aims of inverts are various: there seems to be a special preference for contact with the mucous membrane of the mouth.

CONCLUSION It will be seen that we are not in a position to base a satisfactory explanation of the origin of inversion upon

3. [This last sentence was added in 1915.—Footnote added 1910:] It is true that psycho-analysis has not yet produced a complete explanation of the origin of inversion; nevertheless, it has discovered the psychical mechanism of its development, and has made essential contributions to the statement of the problems involved. In all the cases we have examined we have established the fact that future inverts, in the earliest years of their childhood, pass through a phase of very intense but short-lived fixation to a woman (usually their mother), and that, after leaving this behind, they identify themselves with a woman and take *themselves* as their sexual object. * * * [Added 1915:] Psycho-analytic research is most decidedly opposed to any attempt at separating off homosexuals from the rest of mankind as a group of a special character. By studying sexual excitations other than those that are manifestly displayed, it has found that all human beings are capable of making a homosexual object-choice and have in fact made one in their unconscious. Indeed, libidinal attachments to persons of the same sex play no less a part as factors in normal

mental life, and a greater part as a motive force for illness, than do similar attachments to the opposite sex. On the contrary, psycho-analysis considers that a choice of an object independently of its sex—freedom to range equally over male and female objects—as it is found in childhood, in primitive states of society and early periods of history, is the original basis from which, as a result of restriction in one direction or the other, both the normal and the inverted types develop. Thus from the point of view of psycho-analysis the exclusive sexual interest felt by men for women is also a problem that needs elucidating and is not a self-evident fact based upon an attraction that is ultimately of a chemical nature. * * * [Added 1920:] Ferenczi (1914) has brought forward a number of interesting points on the subject of inversion. He rightly protests that, because they have in common the symptom of inversion, a large number of conditions, which are very different from one another and which are of unequal importance both in organic and psychical respects, have been thrown together under the name of 'homosexuality.' * * *

the material at present before us. Nevertheless our investigation has put us in possession of a piece of knowledge which may turn out to be of greater importance to us than the solution of that problem. It has been brought to our notice 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. Experience of the cases that are considered abnormal has shown us that in them the sexual instinct and the sexual object are merely soldered together—a fact which we have been in danger of overlooking in consequence of the uniformity of the normal picture, where the object appears to form part and parcel of the instinct. We are thus warned to loosen the bond that exists in our thoughts between instinct and object. It seems probable that the sexual instinct is in the first instance independent of its object; nor is its origin likely to be due to its object's attractions.

(B) SEXUALLY IMMATURE PERSONS AND ANIMALS AS SEXUAL OBJECTS

People whose sexual objects belong to the normally inappropriate sex—that is, inverts—strike the observer as a collection of individuals who may be quite sound in other respects. On the other hand, cases in which sexually immature persons (children) are chosen as sexual objects are instantly judged as sporadic aberrations. It is only exceptionally that children are the exclusive sexual objects in such a case. They usually come to play that part when someone who is cowardly or has become impotent adopts them as a substitute, or when an urgent instinct (one which will not allow of postponement) cannot at the moment get possession of any more appropriate object. Nevertheless, a light is thrown on the nature of the sexual instinct by the fact that it permits of so much variation in its objects and such a cheapening of them—which hunger, with its far more energetic retention of its objects, would only permit in the most extreme instances. A similar consideration applies to sexual intercourse with animals, which is by no means rare, especially among country people, and in which sexual attraction seems to override the barriers of species.

One would be glad on aesthetic grounds to be able to ascribe these and other severe aberrations of the sexual instinct to insanity; but that cannot be done. Experience shows that disturbances of the sexual instinct among the insane do not differ from those that occur among the healthy and in whole races or occupations. Thus the sexual abuse of children is found with uncanny frequency among school teachers and child attendants, simply because they have the best opportunity for it. The insane merely exhibit any such aberration to an intensified degree; or, what is particularly significant, it may become exclusive and replace normal sexual satisfaction entirely.

The very remarkable relation which thus holds between sexual variations and the descending scale from health to insanity gives us plenty

of material for thought. I am inclined to believe that it may be explained by the fact that the impulses of sexual life are among those which, even normally, are the least controlled by the higher activities of the mind. In my experience anyone who is in any way, whether socially or ethically, abnormal mentally is invariably abnormal also in his sexual life. But many people are abnormal in their sexual life who in every other respect approximate to the average, and have, along with the rest, passed through the process of human cultural development, in which sexuality remains the weak spot.

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(2) DEVIATIONS IN RESPECT OF THE SEXUAL AIM

The normal sexual aim is regarded as being the union of the genitals in the act known as copulation, which leads to a release of the sexual tension and a temporary extinction of the sexual instinct—a satisfaction analogous to the sating of hunger. But even in the most normal sexual process we may detect rudiments which, if they had developed, would have led to the deviations described as 'perversions'. For there are certain intermediate relations to the sexual object, such as touching and looking at it, which lie on the road towards copulation and are recognized as being preliminary sexual aims. On the one hand these activities are themselves accompanied by pleasure, and on the other hand they intensify the excitation, which should persist until the final sexual aim is attained. Moreover, the kiss, one particular contact of this kind, between the mucous membrane of the lips of the two people concerned, is held in high sexual esteem among many nations (including the most highly civilized ones), in spite of the fact that the parts of the body involved do not form part of the sexual apparatus but constitute the entrance to the digestive tract. Here, then, are factors which provide a point of contact between the perversions and normal sexual life and which can also serve as a basis for their classification. 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 towards the final sexual aim.

(A) ANATOMICAL EXTENSIONS

OVERVALUATION OF THE SEXUAL OBJECT	It is only in the rarest instances that the psychological valuation that is set on the sexual object, as being the goal of the sexual instinct, stops short at its genitals. The appreciation extends to the whole body of the sexual object and tends to involve every sensation derived from it.
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The same overvaluation spreads over into the psychological sphere: the subject becomes, as it were, intellectually infatuated (that is, his powers of judgement are weakened) by the mental achievements and perfections of the sexual object and he submits to the latter's judgements with credulity. Thus the credulity of love becomes an important, if not the most fundamental, source of *authority*.

This sexual overvaluation is something that cannot be easily reconciled with a restriction of the sexual aim to union of the actual genitals and it helps to turn activities connected with other parts of the body into sexual aims.

The significance of the factor of sexual overvaluation can be best studied in men, for their erotic life alone has become accessible to research. That of women—partly owing to the stunting effect of civilized conditions and partly owing to their conventional secretiveness and insincerity—is still veiled in an impenetrable obscurity.

SEXUAL USE OF THE MUCOUS MEMBRANE OF THE LIPS AND MOUTH

The use of the mouth as a sexual organ is regarded as a perversion if the lips (or tongue) of one person are brought into contact with the genitals of another, but not if the mucous membranes of the lips of both of them come together. This exception is the point of contact with what is normal. Those who condemn the other practices (which have no doubt been common among mankind from *primaeval* times) as being perversions, are giving way to an unmistakable feeling of *disgust*, which protects them from accepting sexual aims of the kind. The limits of such disgust are, however, often purely conventional: a man who will kiss a pretty girl's lips passionately, may perhaps be disgusted at the idea of using her tooth-brush, though there are no grounds for supposing that his own oral cavity, for which he feels no disgust, is any cleaner than the girl's. Here, then, our attention is drawn to the factor of disgust, which interferes with the libidinal overvaluation of the sexual object but can in turn be overridden by libido. Disgust seems to be one of the forces which have led to a restriction of the sexual aim. These forces do not as a rule extend to the genitals themselves. But there is no doubt that the genitals of the opposite sex can in themselves be an object of disgust and that such an attitude is one of the characteristics of all hysterics, and especially of hysterical women. The sexual instinct in its strength enjoys overriding this disgust.

SEXUAL USE OF THE ANAL ORIFICE

Where the anus is concerned it becomes still clearer that it is disgust which stamps that sexual aim as a perversion. I hope, however, I shall not be accused of partisanship when I assert that people who try to account for this disgust by saying that the organ in question serves the function of excretion and comes in contact with excrement—a thing which is disgusting in itself—are not much more to the point than hysterical girls

who account for their disgust at the male genital by saying that it serves to void urine.

The playing of a sexual part by the mucous membrane of the anus is by no means limited to intercourse between men: preference for it is in no way characteristic of inverted feeling. On the contrary, it seems that *paedication* with a male owes its origin to an analogy with a similar act performed with a woman; while mutual masturbation is the sexual aim most often found in intercourse between inverts.

SIGNIFICANCE OF OTHER REGIONS OF THE BODY

The extension of sexual interest to other regions of the body, with all its variations, offers us nothing that is new in principle; it adds nothing to our knowledge of the sexual instinct, which merely proclaims its intention in this way of getting possession of the sexual object in every possible direction. But these anatomical extensions inform us that, besides sexual overvaluation, there is a second factor at work which is strange to popular knowledge. Certain regions of the body, such as the mucous membrane of the mouth and anus, which are constantly appearing in these practices, seem, as it were, to be claiming that they should themselves be regarded and treated as genitals. We shall learn later that this claim is justified by the history of the development of the sexual instinct and that it is fulfilled in the symptomatology of certain pathological states.

UNSUITABLE SUB- STITUTES FOR THE SEXUAL OBJECT— FETISHISM

There are some cases which are quite specially remarkable—those in which the normal sexual object is replaced by another which bears some relation to it, but is entirely unsuited to serve the normal sexual aim. From the point of view of classification, we should no doubt have done better to have mentioned this highly interesting group of aberrations of the sexual instinct among the deviations in respect of the sexual *object*. But we have postponed their mention till we could become acquainted with the factor of sexual overvaluation, on which these phenomena, being connected with an abandonment of the sexual aim, are dependent.

What is substituted for the sexual object is some part of the body (such as the foot or hair) which is in general very inappropriate for sexual purposes, or some inanimate object which bears an assignable relation to the person whom it replaces and preferably to that person's sexuality (e.g. a piece of clothing or underlinen). Such substitutes are with some justice likened to the fetishes in which savages believe that their gods are embodied.

A transition to those cases of fetishism in which the sexual aim, whether normal or perverse, is entirely abandoned is afforded by other cases in which the sexual object is required to fulfil a fetishistic condition—such as the possession of some particular hair-colouring or cloth-

ing, or even some bodily defect—if the sexual aim is to be attained. No other variation of the sexual instinct that borders on the pathological can lay so much claim to our interest as this one, such is the peculiarity of the phenomena to which it gives rise. Some degree of diminution in the urge towards the normal sexual aim (an executive weakness of the sexual apparatus) seems to be a necessary pre-condition in every case. The point of contact with the normal is provided by the psychologically essential overvaluation of the sexual object, which inevitably extends to everything that is associated with it. A certain degree of fetishism is thus habitually present in normal love, especially in those stages of it in which the normal sexual aim seems unattainable or its fulfilment prevented.

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The situation only becomes pathological when the longing for the fetish passes beyond the point of being merely a necessary condition attached to the sexual object and actually *takes the place* of the normal aim, and, further, when the fetish becomes detached from a particular individual and becomes the *sole* sexual object. These are, indeed, the general conditions under which mere variations of the sexual instinct pass over into pathological aberrations.

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In other cases the replacement of the object by a fetish is determined by a symbolic connection of thought, of which the person concerned is usually not conscious. It is not always possible to trace the course of these connections with certainty. (The foot, for instance, is an age-old sexual symbol which occurs even in mythology; no doubt the part played by fur as a fetish owes its origin to an association with the hair of the *mons Veneris*.) None the less even symbolism such as this is not always unrelated to sexual experiences in childhood.⁴

(B) FIXATIONS OF PRELIMINARY SEXUAL AIMS

APPEARANCE OF NEW AIMS Every external or internal factor that hinders or postpones the attainment of the normal sexual aim (such as impotence, the high price of the sexual object or the danger of the sexual act) will evidently lend support to the tendency to linger over the preparatory activities and to turn them into new sexual aims that can take the place of the normal one. Attentive examination always shows that even what seem to be the strangest of these new aims are already hinted at in the normal sexual process.

4. [Footnote added 1910:] Psycho-analysis has cleared up one of the remaining gaps in our understanding of fetishism. It has shown the impor-

tance, as regards the choice of a fetish, of a coprophilic pleasure in smelling which has appeared owing to repression. * * *

TOUCHING AND LOOKING A certain amount of touching is indispensable (at all events among human beings) before the normal sexual aim can be attained. And everyone knows what a source of pleasure on the one hand and what an influx of fresh excitation on the other is afforded by tactile sensations of the skin of the sexual object. So that lingering over the stage of touching can scarcely be counted a perversion, provided that in the long run the sexual act is carried further.

The same holds true of seeing—an activity that is ultimately derived from touching. Visual impressions remain the most frequent pathway along which libidinal excitation is aroused; indeed, natural selection counts upon the accessibility of this pathway—if such a teleological form of statement is permissible⁵—when it encourages the development of beauty in the sexual object. The progressive concealment of the body which goes along with civilization keeps sexual curiosity awake. This curiosity seeks to complete the sexual object by revealing its hidden parts. It can, however, be diverted ('sublimated') in the direction of art, if its interest can be shifted away from the genitals on to the shape of the body as a whole.⁶ It is usual for most normal people to linger to some extent over the intermediate sexual aim of a looking that has a sexual tinge to it; indeed, this offers them a possibility of directing some proportion of their libido on to higher artistic aims. On the other hand, this pleasure in looking [scopophilia] becomes a perversion (a) if it is restricted exclusively to the genitals, or (b) if it is connected with the overriding of disgust (as in the case of *voyeurs* or people who look on at excretory functions), or (c) if, instead of being *preparatory* to the normal sexual aim, it supplants it. This last is markedly true of exhibitionists, who, if I may trust the findings of several analyses,⁷ exhibit their own genitals in order to obtain a reciprocal view of the genitals of the other person.

* * *

The force which opposes scopophilia, but which may be overridden by it (in a manner parallel to what we have previously seen in the case of disgust), is *shame*.

SADISM AND MASOCHISM The most common and the most significant of all the perversions—the desire to inflict pain upon the sexual object, and its reverse—received from Krafft-Ebing the

5. [The words in this parenthesis were added in 1915.]

6. There is to my mind no doubt that the concept of 'beautiful' has its roots in sexual excitation and that its original meaning was 'sexually stimulating.' This is related to the fact that we never regard the genitals themselves, which produce the strongest sexual excitation, as really 'beautiful.'

7. [Footnote added 1920:] Under analysis these

perversions—and indeed most others—reveal a surprising variety of motives and determinants. The compulsion to exhibit, for instance, is also closely dependent on the castration complex: it is a means of constantly insisting upon the integrity of the subject's own (male) genitals and it reiterates his infantile satisfaction at the absence of a penis in those of women.

names of 'sadism' and 'masochism' for its active and passive forms respectively. Other writers [e.g. Schrenck-Notzing (1899)] have preferred the narrower term 'algolagnia'. This emphasizes the pleasure in *pain*, the cruelty; whereas the names chosen by Krafft-Ebing bring into prominence the pleasure in any form of humiliation or subjection.

As regards active algolagnia, sadism, the roots are easy to detect in the normal. The sexuality of most male human beings contains an element of *aggressiveness*—a desire to subjugate; the biological significance of it seems to lie in the need for overcoming the resistance of the sexual object by means other than the process of wooing. Thus sadism would correspond to an aggressive component of the sexual instinct which has become independent and exaggerated and, by displacement, has usurped the leading position.

* * *

Similarly, the term masochism comprises any passive attitude towards sexual life and the sexual object, the extreme instance of which appears to be that in which satisfaction is conditional upon suffering physical or mental pain at the hands of the sexual object. Masochism, in the form of a perversion, seems to be further removed from the normal sexual aim than its counterpart; it may be doubted at first whether it can ever occur as a primary phenomenon or whether, on the contrary, it may not invariably arise from a transformation of sadism.⁸ It can often be shown that masochism is nothing more than an extension of sadism turned round upon the subject's own self, which thus, to begin with, takes the place of the sexual object. Clinical analysis of extreme cases of masochistic perversion show that a great number of factors (such as the castration complex and the sense of guilt) have combined to exaggerate and fixate the original passive sexual attitude.

Pain, which is overridden in such cases, thus falls into line with disgust and shame as a force that stands in opposition and resistance to the libido.

* * *

The history of human civilization shows beyond any doubt that there is an intimate connection between cruelty and the sexual instinct; but nothing has been done towards explaining the connection, apart from laying emphasis on the aggressive factor in the libido. * * *

But the most remarkable feature of this perversion is that its active and passive forms are habitually found to occur together in the same individual. A person who feels pleasure in producing pain in someone else in a sexual relationship is also capable of enjoying as pleasure any

8. [Footnote added 1924:] My opinion of masochism has been to a large extent altered by later reflection, based upon certain hypotheses as to the structure of the apparatus of the mind and the classes of instincts operating in it. (Freud is here referring to the "structural theory" of mind that he

developed in the early 1920s. See below, pp. 628–58.) I have been led to distinguish a primary or *erotogenic* masochism, out of which two later forms, *feminine* and *moral* masochism, have developed. * * *

pain which he may himself derive from sexual relations. A sadist is always at the same time a masochist, although the active or the passive aspect of the perversion may be the more strongly developed in him and may represent his predominant sexual activity.

We find, then, that certain among the impulses to perversion occur regularly as pairs of opposites; and this, taken in conjunction with material which will be brought forward later, has a high theoretical significance. It is, moreover, a suggestive fact that the existence of the pair of opposites formed by sadism and masochism cannot be attributed merely to the element of aggressiveness. We should rather be inclined to connect the simultaneous presence of these opposites with the opposing masculinity and femininity which are combined in bisexuality—a contrast which often has to be replaced in psycho-analysis by that between activity and passivity.

(3) THE PERVERSIONS IN GENERAL

VARIATION AND DISEASE

It is natural that medical men, who first studied perversions in outstanding examples and under special conditions, should 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 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.

* * *

In the majority of instances the pathological character in a perversion is found to lie not in the *content* of the new sexual aim but in its relation to the normal. If a perversion, instead of appearing merely *alongside* the normal sexual aim and object, and only when circumstances are unfavourable to *them* and favourable to *it*—if, instead of this, it ousts them completely and takes their place in *all* circumstances—if, in short, a perversion has the characteristics of exclusiveness and fixation—then we shall usually be justified in regarding it as a pathological symptom.

THE MENTAL FACTOR IN THE PERVERSIONS It is perhaps in connection precisely with the most repulsive perversions that the mental factor must be regarded as playing its largest part in the transformation of the sexual instinct. It is impossible to deny that in their case, a piece of mental work has been performed which, in spite of its horrifying result, is the equivalent of an idealization of the instinct. The omnipotence of love is perhaps never more strongly proved than in such of its aberrations as these. The highest and the lowest are always closest to each other in the sphere of sexuality: 'vom Himmel durch die Welt zur Hölle' ['From Heaven, through the world, to Hell.']

TWO CONCLUSIONS Our study of the perversions has shown us that the sexual instinct has to struggle against certain mental forces which act as resistances, and of which shame and disgust are the most prominent. It is permissible to suppose that these forces play a part in restraining that instinct within the limits that are regarded as normal; and if they develop in the individual before the sexual instinct has reached its full strength, it is no doubt that they will determine the course of its development.

In the second place we have found that some of the perversions which we have examined are only made intelligible if we assume the convergence of several motive forces. If such perversions admit of analysis, that is, if they can be taken to pieces, then they must be of a composite nature. This gives us a hint that perhaps the sexual instinct itself may be no simple thing, but put together from components which have come apart again in the perversions. If this is so, the clinical observation of these abnormalities will have drawn our attention to amalgamations which have been lost to view in the uniform behaviour of normal people.

(4) THE SEXUAL INSTINCT IN NEUROTICS

PSYCHO-ANALYSIS An important addition to our knowledge of the sexual instinct in certain people who at least approximate to the normal can be obtained from a source which can only be reached in one particular way. There is only one means of obtaining exhaustive information that will not be misleading about the sexual life of the persons known as 'psychoneurotics'—sufferers from hysteria, from obsessional neurosis, from what is wrongly described as neurasthenia, and, undoubtedly, from dementia praecox and paranoia as well. They must be subjected to psycho-analytic investigation, which is employed in the therapeutic procedure introduced by Josef Breuer and myself in 1893 and known at that time as 'catharsis'.

I must first explain—as I have already done in other writings—that all my experience shows that these psychoneuroses are based on sexual instinctual forces. 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. * * * The symptoms constitute the sexual activity of the patient. * * *

The removal of the symptoms of hysterical patients by psycho-analysis proceeds on the supposition that those symptoms are substitutes—transcriptions as it were—for a number of emotionally cathected mental processes, wishes and desires, which, by the operation of a special psychological procedure (repression), have been prevented from obtaining discharge in psychical activity that is admissible to consciousness. These mental processes, therefore, being held back in a state of unconsciousness, strive to obtain an expression that shall be appropriate to their emotional importance—to obtain discharge; and in the case of hysteria they find such an expression (by means of the process of 'conversion') in somatic phenomena, that is, in hysterical symptoms. By systematically turning these symptoms back (with the help of a special technique) into emotionally cathected ideas—ideas that will now have become conscious—it is possible to obtain the most accurate knowledge of the nature and origin of these formerly unconscious psychical structures.

FINDINGS OF PSYCHO-ANALYSIS In this manner the fact has emerged that symptoms represent a substitute for impulses the source of whose strength is derived from the sexual instinct. What we know about the nature of hysterics before they fall ill—and they may be regarded as typical of all psychoneurotics—and about the occasions which precipitate their falling ill, is in complete harmony with this view. The character of hysterics shows a degree of sexual repression in excess of normal quantity, an intensification of resistance against the sexual instinct (which we have already met with in the form of shame, disgust and morality), and what seems like an instinctive aversion on their part to any intellectual consideration of sexual problems. As a result of this, in especially marked cases, the patients remain in complete ignorance of sexual matters right into the period of sexual maturity.

On a cursory view, this trait, which is so characteristic of hysteria, is not uncommonly screened by the existence of a second constitutional character present in hysteria, namely the predominant development of the sexual instinct. Psycho-analysis, however, can invariably bring the first of these factors to light and clear up the enigmatic contradiction which hysteria presents, by revealing the pair of opposites by which it is characterized—exaggerated sexual craving and excessive aversion to sexuality.

* * *

NEUROSIS AND PERVERSION There is no doubt that a large part of the opposition to these views of mine 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 teachings goes further than this. It shows that it is by no means 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.*

* * *

(5) COMPONENT INSTINCTS AND EROTGENIC ZONES

If we put together what we have learned from our investigation of positive and negative perversions, it seems plausible to trace them back to a number of 'component instincts', which, however, are not of a primary nature, but are susceptible to further analysis.⁹ By an 'instinct' is provisionally to be understood the psychical representative of an endosomatic, continuously flowing source of stimulation, as contrasted with a 'stimulus', which is set up by *single* excitations coming from *without*. The concept of instinct is thus one of those lying on the frontier between the mental and the physical. The simplest and likeliest assumption as to the nature of instincts would seem to be that in itself an instinct is without quality, and, so far as mental life is concerned, is only to be regarded as a measure of the demand made upon the mind for work. What distinguishes the instincts from one another and endows them with specific qualities is their relation to their somatic sources and to their aims. The source of an instinct is a process of excitation occurring in an organ and the immediate aim of the instinct lies in the removal of this organic stimulus.¹

There is a further provisional assumption that we cannot escape in the theory of the instincts. It is to the effect that excitations of two kinds arise from the somatic organs, based upon differences of a chemical nature. One of these kinds of excitation we describe as being specifically sexual, and we speak of the organ concerned as the 'erotogenic zone' of the sexual component instinct arising from it.

The part played by the erotogenic zones is immediately obvious in

9. [The passage from this point till the end of the paragraph dates from 1915.]

1. [Footnote added 1924:] The theory of the instincts is the most important but at the same time the least complete portion of psycho-analytic the-

ory. I have made further contributions to it in my later works *Beyond the Pleasure Principle* (1920) and *The Ego and the Id* (1923). [For both texts, see below, pp. 594–626, 628–58.]

the case of those perversions which assign a sexual significance to the oral and anal orifices. These behave in every respect like a portion of the sexual apparatus. In hysteria these parts of the body and the neighbouring tracts of mucous membrane become the seat of new sensations and of changes in innervation—indeed, of processes that can be compared to erection²—in just the same way as do the actual genitalia under the excitations of the normal sexual processes.

The significance of the erotogenic zones as apparatuses subordinate to the genitals and as substitutes for them is, among all the psychoneuroses, most clearly to be seen in hysteria; but this does not imply that that significance is any the less in the other forms of illness. It is only that in them it is less recognizable, because in their case (obsessional neurosis and paranoia) the formation of the symptoms takes place in regions of the mental apparatus which are more remote from the particular centres concerned with somatic control. In obsessional neurosis what is more striking is the significance of those impulses which create new sexual aims and seem independent of erotogenic zones. Nevertheless, in scopophilia and exhibitionism the eye corresponds to an erotogenic zone; while in the case of those components of the sexual instinct which involve pain and cruelty the same role is assumed by the skin—the skin, which in particular parts of the body has become differentiated into sense organs or modified into mucous membrane, and is thus the erotogenic zone *par excellence*.

(6) REASONS FOR THE APPARENT PREPONDERANCE OF PERVERSE SEXUALITY IN THE PSYCHONEUROSES

The preceding discussion may perhaps have placed the sexuality of psychoneurotics in a false light. It may have given the impression that, owing to their disposition, psychoneurotics approximate closely to pervers in their sexual behaviour and are proportionately remote from normal people. It may indeed very well be that the constitutional disposition of these patients (apart from their exaggerated degree of sexual repression and the excessive intensity of their sexual instinct) includes an unusual tendency to perversion, using that word in its widest sense. Nevertheless, investigation of comparatively slight cases shows that this last assumption is not absolutely necessary, or at least that in forming a judgement on these pathological developments there is a factor to be considered which weighs in the other direction. Most psychoneurotics only fall ill after the age of puberty as a result of the demands made upon them by normal sexual life. (It is most particularly against the

2. [The phrase in parenthesis was added in 1920.]

latter that repression is directed.) Or else illnesses of this kind set in later, when the libido fails to obtain satisfaction along normal lines. In both these cases the libido behaves like a stream whose main bed has become blocked. It proceeds to fill up collateral channels which may hitherto have been empty. Thus, in the same way, what appears to be the strong tendency (though, it is true, a negative one) of psychoneurotics to perversion may be collaterally determined, and must, in any case, be collaterally intensified. The fact is that we must put sexual repression as an internal factor alongside such external factors as limitation of freedom, inaccessibility of a normal sexual object, the dangers of the normal sexual act, etc., which bring about perversions in persons who might perhaps otherwise have remained normal.

* * *

(7) INTIMATION OF THE INFANTILE CHARACTER OF SEXUALITY

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.

* * *

We have, however, a further reflection to make. This postulated constitution, containing the germs of all the perversions, will only be demonstrable in *children*, even though in them it is only with modest degrees of intensity that any of the instincts can emerge. A formula begins to take shape which lays it down that the sexuality of neurotics has remained in, or been brought back to, an infantile state. Thus our interest turns to the sexual life of children, and we will now proceed to trace the play of influences which govern the evolution of infantile sexuality till its outcome in perversion, neurosis or normal sexual life.

II

INFANTILE SEXUALITY

NEGLECT OF THE INFANTILE FACTOR One feature of the popular view of the sexual instinct is that it is absent in childhood and only awakens in the period of life described as puberty. This, however, is not merely a simple error but one that has had grave consequences, for it is mainly to this idea that we owe our present ignorance of the fundamental conditions of sexual life. A thorough study of the sexual manifestations of childhood would probably reveal the essential characters of the sexual instinct and would show us the course of its development and the way in which it is put together from various sources.

It is noticeable that writers who concern themselves with explaining the characteristics and reactions of the adult have devoted much more attention to the primaeval period which is comprised in the life of the individual's ancestors—have, that is, ascribed much more influence to heredity—than to the other primaeval period, which falls within the lifetime of the individual himself—that is, to childhood. One would surely have supposed that the influence of this latter period would be easier to understand and could claim to be considered before that of heredity.³ It is true that in the literature of the subject one occasionally comes across remarks upon precocious sexual activity in small children—upon erections, masturbation and even activities resembling coitus. But these are always quoted only as exceptional events, as oddities or as horrifying instances of precocious depravity. So far as I know, not a single author has clearly recognized the regular existence of a sexual instinct in childhood; and in the writings that have become so numerous on the development of children, the chapter on 'Sexual Development' is as a rule omitted.⁴

INFANTILE AMNESIA The reason for this strange neglect is to be sought, I think, partly in considerations of propriety, which the authors obey as a result of their own upbringing, and partly in a psychological phenomenon which has itself hitherto eluded explanation. What I have in mind is the peculiar amnesia which, in the case of most people, though by no means all, hides the earliest beginnings of their childhood up to their sixth or eighth year. Hitherto it has not occurred to us to feel any astonishment at the fact of this amnesia,

3. [Footnote added 1915:] Nor is it possible to estimate correctly the part played by heredity until the part played by childhood has been assessed.

4. The assertion made in the text has since struck me myself as being so bold that I have undertaken the task of testing its validity by looking through the literature once more. The outcome of this is

that I have allowed my statement to stand unaltered. The scientific examination of both the physical and mental phenomena of sexuality in childhood is still in its earliest beginnings. * * * In none of the accounts which I have read of the psychology of this period of life is a chapter to be found on the erotic life of children. * * *

though we might have had good grounds for doing so. For we learn from other people that during these years, of which at a later date we retain nothing in our memory but a few unintelligible and fragmentary recollections, we reacted in a lively manner to impressions, that we were capable of expressing pain and joy in a human fashion, that we gave evidence of love, jealousy and other passionate feelings by which we were strongly moved at the time, and even that we gave utterance to remarks which were regarded by adults as good evidence of our possessing insight and the beginnings of a capacity for judgement. And of all this we, when we are grown up, have no knowledge of our own! Why should our memory lag so far behind the other activities of our minds? We have, on the contrary, good reason to believe that there is no period at which the capacity for receiving and reproducing impressions is greater than precisely during the years of childhood.

On the other hand we must assume, or we can convince ourselves by a psychological examination of other people, that the very same impressions that we have forgotten have none the less left the deepest traces on our minds and have had a determining effect upon the whole of our later development. There can, therefore, be no question of any real abolition of the impressions of childhood, but rather of an amnesia similar to that which neurotics exhibit for later events, and of which the essence consists in a simple withholding of these impressions from consciousness, viz., in their repression. But what are the forces which bring about this repression of the impressions of childhood? Whoever could solve this riddle would, I think, have explained *hysterical* amnesia as well.

Meanwhile we must not fail to observe that the existence of infantile amnesia provides a new point of comparison between the mental states of children and psychoneurotics. We have already come across another such point in the formula to which we were led, to the effect that the sexuality of psychoneurotics has remained at, or been carried back to, an infantile stage. Can it be, after all, that infantile amnesia, too, is to be brought into relation with the sexual impulses of childhood?

Moreover, the connection between infantile and hysterical amnesia is more than a mere play upon words. Hysterical amnesia, which occurs at the bidding of repression, is only explicable by the fact that the subject is already in possession of a store of memory-traces which have been withdrawn from conscious disposal, and which are now, by an associative link, attracting to themselves the material which the forces of repression are engaged in repelling from consciousness. It may be said that without infantile amnesia there would be no hysterical amnesia.

I believe, then, that infantile amnesia, which turns everyone's childhood into something like a prehistoric epoch and conceals from him the beginnings of his own sexual life, is responsible for the fact that in general no importance is attached to childhood in the development of sexual life. The gaps in our knowledge which have arisen in this way cannot be bridged by a single observer. As long ago as in the year 1896

I insisted on the significance of the years of childhood in the origin of certain important phenomena connected with sexual life, and since then I have never ceased to emphasize the part played in sexuality by the infantile factor.

[1] THE PERIOD OF SEXUAL LATENCY IN CHILDHOOD AND ITS INTERRUPTIONS

The remarkably frequent reports of what are described as irregular and exceptional sexual impulses in childhood, as well as the uncovering in neurotics of what have hitherto been unconscious memories of childhood, allow us to sketch out the sexual occurrences of that period in some such way as this.

There seems no doubt that germs of sexual impulses are already present in the new-born child and that these continue to develop for a time, but are then overtaken by a progressive process of suppression; this in turn is itself interrupted by periodical advances in sexual development or may be held up by individual peculiarities. Nothing is known for certain concerning the regularity and periodicity of this oscillating course of development. It seems, however, that the sexual life of children usually emerges in a form accessible to observation round about the third or fourth year of life.

SEXUAL INHIBITIONS It is during this period of total or only partial latency that are built up the mental forces which are later to impede the course of the sexual instinct and, like dams, restrict its flow—disgust, feelings of shame and the claims of aesthetic and moral ideals. One gets an impression from civilized children that the construction of these dams is a product of education, and no doubt education has much to do with it. But in reality this development is organically determined and fixed by heredity, and it can occasionally occur without any help at all from education. Education will not be trespassing beyond its appropriate domain if it limits itself to following the lines which have already been laid down organically and to impressing them somewhat more clearly and deeply.

REACTION-FORMATION AND SUBLIMATION What is it that goes to the making of these constructions which are so important for the growth of a civilized and normal individual? They probably emerge at the cost of the infantile sexual impulses themselves. Thus the activity of those impulses does not cease even during this period of latency, though their energy is diverted, wholly or in great part, from their sexual use and directed to other ends. Historians of civilization appear to be at one in assuming that powerful components are acquired for every kind of cultural achievement by this diversion of sexual instinctual forces from sexual aims and their direction to new

ones—a process which deserves the name of 'sublimation'. To this we would add, accordingly, that the same process plays a part in the development of the individual and we would place its beginning in the period of sexual latency of childhood.⁵

It is possible further to form some idea of the mechanism of this process of sublimation. On the one hand, it would seem, the sexual impulses cannot be utilized during these years of childhood, since the reproductive functions have been deferred—a fact which constitutes the main feature of the period of latency. On the other hand, these impulses would seem in themselves to be perverse—that is, to arise from erotogenic zones and to derive their activity from instincts which, in view of the direction of the subject's development, can only arouse unpleasurable feelings. They consequently evoke opposing mental forces (reacting impulses) which, in order to suppress this unpleasure effectively, build up the mental dams that I have already mentioned—disgust, shame and morality.

INTERRUPTIONS OF THE LATENCY PERIOD

We must not deceive ourselves as to the hypothetical nature and insufficient clarity of our knowledge concerning the processes of the infantile period of latency or deferment; but we shall be on firmer ground in pointing out that such an application of infantile sexuality represents an educational ideal from which individual development usually diverges at some point and often to a considerable degree. From time to time a fragmentary manifestation of sexuality which has evaded sublimation may break through; or some sexual activity may persist through the whole duration of the latency period until the sexual instinct emerges with greater intensity at puberty. In so far as educators pay any attention at all to infantile sexuality, they behave exactly as though they shared our views as to the construction of the moral defensive forces at the cost of sexuality, and as though they knew that sexual activity makes a child ineducable: for they stigmatize every sexual manifestation by children as a 'vice', without being able to do much against it. We, on the other hand, have every reason for turning our attention to these phenomena which are so much dreaded by education, for we may expect them to help us to discover the original configuration of the sexual instincts.

[2] THE MANIFESTATIONS OF INFANTILE SEXUALITY

THUMB-SUCKING

For reasons which will appear later, I shall take thumb-sucking (or sensual sucking) as a sample of the sexual manifestations of childhood. * * *

5. Once again, it is from Fliess that I have borrowed the term 'period of sexual latency'.

Thumb-sucking appears already in early infancy and may continue into maturity, or even persist all through life. It consists in the rhythmic repetition of a sucking contact by the mouth (or lips). There is no question of the purpose of this procedure being the taking of nourishment. A portion of the lip itself, the tongue, or any other part of the skin within reach—even the big toe—may be taken as the object upon which this sucking is carried out. * * *

* * * In the nursery, sucking is often classed along with the other kinds of sexual 'naughtiness' of children. This view has been most energetically repudiated by numbers of paediatricians and nerve-specialists, though this is no doubt partly due to a confusion between 'sexual' and 'genital'. Their objection raises a difficult question and one which cannot be evaded: what is the general characteristic which enables us to recognize the sexual manifestations of children? The concatenation of phenomena into which we have been given an insight by psycho-analytic investigation justifies us, in my opinion, in regarding thumb-sucking as a sexual manifestation and in choosing it for our study of the essential features of infantile sexual activity.

AUTO-EROTISM

We are in duty bound to make a thorough examination of this example. It must be insisted that the most striking feature of this sexual activity is that the instinct is not directed towards other people, but obtains satisfaction from the subject's own body. It is 'auto-erotic', to call it by a happily chosen term introduced by Havelock Ellis (1910).

Furthermore, it is clear that the behaviour of a child who indulges in thumb-sucking is determined by a search for some pleasure which has already been experienced and is now remembered. In the simplest case he proceeds to find this satisfaction by sucking rhythmically at some part of the skin or mucous membrane. It is also easy to guess the occasions on which the child had his first experiences of the pleasure which he is now striving to renew. It was the child's first and most vital activity, his sucking at his mother's breast, or at substitutes for it, that must have familiarized him with this pleasure. The child's lips, in our view, behave like an erotogenic zone, and no doubt stimulation by the warm flow of milk is the cause of the pleasurable sensation. The satisfaction of the erotogenic zone is associated, in the first instance, with the satisfaction of the need for nourishment. To begin with, sexual activity attaches itself to functions serving the purpose of self-preservation and does not become independent of them until later.⁶ No one who has seen a baby sinking back satiated from the breast and falling asleep with flushed cheeks and a blissful smile can escape the reflection that this picture persists as a prototype of the expression of sexual satisfaction in later life. The need for repeating the sexual satisfaction now becomes detached

6. [This sentence was added in 1915.]

from the need for taking nourishment—a separation which becomes inevitable when the teeth appear and food is no longer taken in only by sucking, but is also chewed up. The child does not make use of an extraneous body for his sucking, but prefers a part of his own skin because it is more convenient, because it makes him independent of the external world, which he is not yet able to control, and because in that way he provides himself, as it were, with a second erotogenic zone, though one of an inferior kind. The inferiority of this second region is among the reasons why at a later date he seeks the corresponding part—the lips—of another person. ('It's a pity I can't kiss myself', he seems to be saying.)

* * *

Our study of thumb-sucking or sensual sucking has already given us the three essential characteristics of an infantile sexual manifestation. At its origin it attaches itself to one of the vital somatic functions; it has as yet no sexual object, and is thus auto-erotic; and its sexual aim is dominated by an erotogenic zone. It is to be anticipated that these characteristics will be found to apply equally to most of the other activities of the infantile sexual instincts.

[3] THE SEXUAL AIM OF INFANTILE SEXUALITY

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THE INFANTILE SEXUAL AIM The sexual aim of the infantile instinct consists in obtaining satisfaction by means of an appropriate stimulation of the erotogenic zone which has been selected in one way or another. This satisfaction must have been previously experienced in order to have left behind a need for its repetition; and we may expect that Nature will have made safe provisions so that this experience of satisfaction shall not be left to chance. We have already learnt what the contrivance is that fulfils this purpose in the case of the labial zone: it is the simultaneous connection which links this part of the body with the taking in of food. We shall come across other, similar contrivances as sources of sexuality. The state of being in need of a repetition of the satisfaction reveals itself in two ways: by a peculiar feeling of tension, possessing, rather, the character of unpleasure, and by a sensation of itching or stimulation which is centrally conditioned and projected on to the peripheral erotogenic zone. We can therefore formulate a sexual aim in another way: it consists in replacing the projected sensation of stimulation in the erotogenic zone by an external stimulus which removes that sensation by producing a feeling of satisfaction. This external stimulus will usually consist in some kind of manipulation that is analogous to the sucking.

The fact that the need can also be evoked peripherally, by a real modification of the erotogenic zone, is in complete harmony with our

physiological knowledge. This strikes us as somewhat strange only because, in order to remove one stimulus, it seems necessary to adduce a second one at the same spot.

[4] MASTURBATORY SEXUAL MANIFESTATIONS

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ACTIVITY OF THE ANAL ZONE Like the labial zone, the anal zone is well suited by its position to act as a medium through which sexuality may attach itself to other somatic functions.

It is to be presumed that the erotogenic significance of this part of the body is very great from the first. We learn with some astonishment from psycho-analysis of the transmutations normally undergone by the sexual excitations arising from this zone and of the frequency with which it retains a considerable amount of susceptibility to genital stimulation throughout life. The intestinal disturbances which are so common in childhood see to it that the zone shall not lack intense excitations. Intestinal catarrhs at the tenderest age make children 'nervy', as people say, and in cases of later neurotic illness they have a determining influence on the symptoms in which the neurosis is expressed, and they put at its disposal the whole range of intestinal disturbances. If we bear in mind the erotogenic significance of the outlet of the intestinal canal, which persists, at all events in a modified form, we shall not be inclined to scoff at the influence of haemorrhoids, to which old-fashioned medicine used to attach so much importance in explaining neurotic conditions.

Children who are making use of the susceptibility to erotogenic stimulation of the anal zone betray themselves by holding back their stool till its accumulation brings about violent muscular contractions and, as it passes through the anus, is able to produce powerful stimulation of the mucous membrane. In so doing it must no doubt cause not only painful but also highly pleasurable sensations. One of the clearest signs of subsequent eccentricity or nervousness is to be seen when a baby obstinately refuses to empty his bowels when he is put on the pot—that is, when his nurse wants him to—and holds back that function till he himself chooses to exercise it. He is naturally not concerned with dirtying the bed, he is only anxious not to miss the subsidiary pleasure attached to defaecating. Educators are once more right when they describe children who keep the process back as 'naughty'.

The contents of the bowels,⁷ which act as a stimulating mass upon a sexually sensitive portion of mucous membrane, behave like forerunners of another organ, which is destined to come into action after the phase of childhood. But they have other important meanings for the infant. They are clearly treated as a part of the infant's own body and represent

7. [This paragraph was added in 1915.]

his first 'gift': by producing them he can express his active compliance with his environment and, by withholding them, his disobedience. From being a 'gift' they later come to acquire the meaning of 'baby'—for babies, according to one of the sexual theories of children, are acquired by eating and are born through the bowels.

The retention of the faecal mass, which is thus carried out intentionally by the child to begin with, in order to serve, as it were, as a masturbatory stimulus upon the anal zone or to be employed in his relation to the people looking after him, is also one of the roots of the constipation which is so common among neuropaths. Further, the whole significance of the anal zone is reflected in the fact that few neurotics are to be found without their special scatological practices, ceremonies, and so on, which they carefully keep secret.

Actual masturbatory stimulation of the anal zone by means of the finger, provoked by a centrally determined or peripherally maintained sensation of itching, is by no means rare among older children.

ACTIVITY OF THE GENITAL ZONES

Among the erotogenic zones that form part of the child's body there is one which certainly does not play the opening part, and which cannot be the vehicle of the oldest sexual impulses, but which is destined to great things in the future. In both male and female children it is brought into connection with micturition (in the glans and clitoris) and in the former is enclosed in a pouch of mucous membrane, so that there can be no lack of stimulation of it by secretions which may give an early start to sexual excitation. The sexual activities of this erotogenic zone, which forms part of the sexual organs proper, are the beginning of what is later to become 'normal' sexual life. The anatomical situation of this region, the secretions in which it is bathed, the washing and rubbing to which it is subjected in the course of a child's toilet, as well as accidental stimulation (such as the movement of intestinal worms in the case of girls), make it inevitable that the pleasurable feeling which this part of the body is capable of producing should be noticed by children even during their earliest infancy, and should give rise to a need for its repetition. If we consider this whole range of contrivances and bear in mind that both making a mess and measures for keeping clean are bound to operate in much the same way, it is scarcely possible to avoid the conclusion that the foundations for the future primacy over sexual activity exercised by this erotogenic zone are established by early infantile masturbation, which scarcely a single individual escapes. The action which disposes of the stimulus and brings about satisfaction consists in a rubbing movement with the hand or in the application of pressure (no doubt on the lines of a pre-existing reflex) either from the hand or by bringing the thighs together. This last method is by far the more common in the case of girls. The preference for the hand which is shown by boys

is already evidence of the important contribution which the instinct for mastery is destined to make to masculine sexual activity.

It will be in the interests of clarity⁸ if I say at once that three phases of infantile masturbation are to be distinguished. The first of these belongs to early infancy, and the second to the brief efflorescence of sexual activity about the fourth year of life; only the third phase corresponds to pubertal masturbation, which is often the only kind taken into account.

SECOND PHASE OF INFANTILE MASTURBATION

The masturbation of early infancy seems to disappear after a short time; but it may persist uninterruptedly until puberty, and this would constitute the first great deviation from the course of development laid down for civilized men. At some point of childhood after early infancy, as a rule before the fourth year, the sexual instinct belonging to the genital zone usually revives and persists again for a time until it is once more suppressed, or it may continue without interruption. This second phase of infantile sexual activity may assume a variety of different forms which can only be determined by a precise analysis of individual cases. But all its details leave behind the deepest (unconscious) impressions in the subject's memory, determine the development of his character, if he is to remain healthy, and the symptomatology of his neurosis, if he is to fall ill after puberty. In the latter case we find that this sexual period has been forgotten and that the conscious memories that bear witness to it have been displaced. (I have already mentioned that I am also inclined to relate normal infantile amnesia to this infantile sexual activity.) Psycho-analytic investigation enables us to make what has been forgotten conscious and thus do away with a compulsion that arises from the unconscious psychical material.

RETURN OF EARLY INFANTILE MASTURBATION

During the years of childhood with which I am now dealing, the sexual excitation of early infancy returns, either as a centrally determined tickling stimulus which seeks satisfaction in masturbation, or as a process in the nature of a nocturnal emission which, like the nocturnal emissions of adult years, achieves satisfaction without the help of any action by the subject. The latter case is the more frequent with girls and in the second half of childhood; its determinants are not entirely intelligible and often, though not invariably, it seems to be conditioned by a period of earlier *active* masturbation. The symptoms of these sexual manifestations are scanty; they are mostly displayed on behalf of the still undeveloped sexual apparatus by the *urinary* apparatus, which thus acts, as it were, as the former's trustee. Most of the so-called bladder disorders of this period are sexual disturbances: nocturnal enuresis, unless it represents an epileptic fit, corresponds to a nocturnal emission.

8. [This paragraph was added in 1915.]

The reappearance of sexual activity is determined by internal causes and external contingencies, both of which can be guessed in cases of neurotic illness from the form taken by their symptoms and can be discovered with certainty by psycho-analytic investigation. I shall have to speak presently of the internal causes; great and lasting importance attaches at this period to the accidental *external* contingencies. In the foreground we find the effects of seduction, which treats a child as a sexual object prematurely and teaches him, in highly emotional circumstances, how to obtain satisfaction from his genital zones, a satisfaction which he is then usually obliged to repeat again and again by masturbation. An influence of this kind may originate either from adults or from other children. I cannot admit that in my paper on 'The Aetiology of Hysteria' (1896) I exaggerated the frequency or importance of that influence, though I did not then know that persons who remain normal may have had the same experiences in their childhood, and though I consequently overrated the importance of seduction in comparison with the factors of sexual constitution and development. Obviously seduction is not required in order to arouse a child's sexual life; that can also come about spontaneously from internal causes.

POLYMORPHOUSLY PERVERSE DISPOSITION It is an instructive fact that under the influence of seduction children can become polymorphously perverse, and can be led into all possible kinds of sexual irregularities. This shows that an aptitude for them is innately present in their disposition. There is consequently little resistance towards carrying them out, since the mental dams against sexual excesses—shame, disgust and morality—have either not yet been constructed at all or are only in course of construction, according to the age of the child. In this respect children behave in the same kind of way as an average uncultivated woman in whom the same polymorphously perverse disposition persists. Under ordinary conditions she may remain normal sexually, but if she is led on by a clever seducer she will find every sort of perversion to her taste, and will retain them as part of her own sexual activities. Prostitutes exploit the same polymorphous, that is, infantile, disposition for the purposes of their profession; and, considering the immense number of women who are prostitutes or who must be supposed to have an aptitude for prostitution without becoming engaged in it, it becomes impossible not to recognize that this same disposition to perversions of every kind is a general and fundamental human characteristic.

COMPONENT INSTINCTS Moreover, the effects of seduction do not help to reveal the early history of the sexual instinct; they rather confuse our view of it by presenting children prematurely with a sexual object for which the infantile sexual instinct at first shows no need. It must, however, be admitted that infantile sexual life, in spite

of the preponderating dominance of erotogenic zones, exhibits components which from the very first involve other people as sexual objects. Such are the instincts of scopophilia, exhibitionism and cruelty, which appear in a sense independently of erotogenic zones; these instincts do not enter into intimate relations with genital⁹ life until later, but are already to be observed in childhood as independent impulses, distinct in the first instance from erotogenic sexual activity. Small children are essentially without shame, and at some periods of their earliest years show an unmistakable satisfaction in exposing their bodies, with especial emphasis on the sexual parts. The counterpart of this supposedly perverse inclination, curiosity to see other people's genitals, probably does not become manifest until somewhat later in childhood, when the obstacle set up by a sense of shame has already reached a certain degree of development. Under the influence of seduction the scopophilic perversion can attain great importance in the sexual life of a child. But my researches into the early years of normal people, as well as of neurotic patients, force me to the conclusion that scopophilia can also appear in children as a spontaneous manifestation. Small children whose attention has once been drawn—as a rule by masturbation—to their own genitals usually take the further step without help from outside and develop a lively interest in the genitals of their playmates. Since opportunities for satisfying curiosity of this kind usually occur only in the course of satisfying the two kinds of need for excretion, children of this kind turn into *voyeurs*, eager spectators of the processes of micturition and defaecation. When repression of these inclinations set in, the desire to see other people's genitals (whether of their own or the opposite sex) persists as a tormenting compulsion, which in some cases of neurosis later affords the strongest motive force for the formation of symptoms.

The cruel component of the sexual instinct develops in childhood even more independently of the sexual activities that are attached to erotogenic zones. Cruelty in general comes easily to the childish nature, since the obstacle that brings the instinct for mastery to a halt at another person's pain—namely a capacity for pity—is developed relatively late. The fundamental psychological analysis of this instinct has, as we know, not yet been satisfactorily achieved. It may be assumed that the impulse of cruelty arises from the instinct for mastery and appears at a period of sexual life at which the genitals have not yet taken over their later role. It then dominates a phase of sexual life which we shall later describe as a pregenital organization. Children who distinguish themselves by special cruelty towards animals and playmates usually give rise to a just suspicion of an intense and precocious sexual activity arising from erotogenic zones; and, though all the sexual instincts may display simultaneous precocity, *erotogenic* sexual activity seems, nevertheless, to be the primary one. The absence of the barrier of pity brings with it a

9. ['Sexual' in 1905 and 1910.]

danger that the connection between the cruel and the erotogenic instincts, thus established in childhood, may prove unbreakable in later life. Ever since Jean Jacques Rousseau's *Confessions*, it has been well known to all educationalists that the painful stimulation of the skin of the buttocks is one of the erotogenic roots of the *passive* instinct of cruelty (masochism). The conclusion has rightly been drawn by them that corporal punishment, which is usually applied to this part of the body, should not be inflicted upon any children whose libido is liable to be forced into collateral channels by the later demands of cultural education.¹

[5] THE SEXUAL RESEARCHES OF CHILDHOOD²

THE INSTINCT FOR KNOWLEDGE At about the same time as the sexual life of children reaches its first peak, between the ages of three and five, they also begin to show signs of the activity which may be ascribed to the instinct for knowledge or research. This instinct cannot be counted among the elementary instinctual components, nor can it be classed as exclusively belonging to sexuality. Its activity corresponds on the one hand to a sublimated manner of obtaining mastery, while on the other hand it makes use of the energy of scopophilia. Its relations to sexual life, however, are of particular importance, since we have learnt from psycho-analysis that the instinct for knowledge in children is attracted unexpectedly early and intensively to sexual problems and is in fact possibly first aroused by them.

THE RIDDLE OF THE SPHINX It is not by theoretical interests but by practical ones that activities of research are set going in children. The threat to the bases of a child's existence offered by the discovery or the suspicion of the arrival of a new baby and the fear that he may, as a result of it, cease to be cared for and loved, make him thoughtful and clear-sighted. And this history of the instinct's origin is in line with the fact that the first problem with which it deals is not the question of the distinction between the sexes but the riddle of where babies come from. (This, in a distorted form which can easily be rectified, is the same riddle that was propounded by the Theban Sphinx.) On the contrary, the existence of two sexes does not to begin with arouse any

1. [Footnote added 1910:] When the account which I have given above of infantile sexuality was first published in 1905, it was founded for the most part on the results of psycho-analytic research upon adults. At that time it was impossible to make full use of direct observation on children: only isolated hints and some valuable pieces of confirmation came from that source. Since then it has become possible to gain direct insight into infantile psycho-sexuality by the analysis of some cases of neurotic illness during the early years of childhood. It is

gratifying to be able to report that direct observation has fully confirmed the conclusions arrived at by psycho-analysis—which is incidentally good evidence of the trustworthiness of that method of research. * * * (Freud is, of course, as he observes later in this long footnote, thinking of 'Analysis of a Phobia in a Five-Year-Old Boy', the famous case nicknamed 'Little Hans', published in 1909.)

2. [The whole of this section on the sexual researches of children first appeared in 1915.]

difficulties or doubts in children. It is self-evident to a male child that a genital like his own is to be attributed to everyone he knows, and he cannot make its absence tally with his picture of these other people.

CASTRATION COMPLEX AND PENIS ENVY This conviction is energetically maintained by boys, is obstinately defended against the contradictions which soon result from observation, and is only abandoned after severe internal struggles (the castration complex).

The substitutes for this penis which they feel is missing in women play a great part in determining the form taken by many perversions.³

The assumption that all human beings have the same (male) form of genital is the first of the many remarkable and momentous sexual theories of children. It is of little use to a child that the science of biology justifies his prejudice and has been obliged to recognize the female clitoris as a true substitute for the penis.

Little girls do not resort to denial of this kind when they see that boys' genitals are formed differently from their own. They are ready to recognize them immediately and are overcome by envy for the penis—an envy culminating in the wish, which is so important in its consequences, to be boys themselves.

THEORIES OF BIRTH Many people can remember clearly what an intense interest they took during the prepubertal period in the question of where babies come from. The anatomical answers to the question were at the time very various: babies come out of the breast, or are cut out of the body, or the navel opens to let them through. Outside analysis, there are very seldom memories of any similar researches having been carried out in the *early* years of childhood. These earlier researches fell a victim to repression long since, but all their findings were of a uniform nature: people get babies by eating some particular thing (as they do in fairy tales) and babies are born through the bowel like a discharge of faeces. These infantile theories remind us of conditions that exist in the animal kingdom—and especially of the cloaca in types of animals lower than mammals.

SADISTIC VIEW OF SEXUAL INTERCOURSE If children at this early age witness sexual intercourse between adults—for which an opportunity is provided by the conviction of grown-up people that small children cannot understand anything sexual—they inevitably regard the sexual act as a sort of ill-treatment or act of subjugation: they view it, that is, in a sadistic sense. Psycho-analysis also shows us

3. [Footnote added 1920:] We are justified in speaking of a castration complex in women as well. Both male and female children form a theory that women no less than men originally had a penis, but that they have lost it by castration. The conviction which is finally reached by males that women have no penis often leads them to an enduringly low opinion of the other sex. (For further discussion of this important and delicate topic, see below, pp. 670–78.)