

PHYLLIS ?



Womb Envy, Testyria, and Breast Castration Anxiety

Gloria Steinem asks:

What if Freud were female?

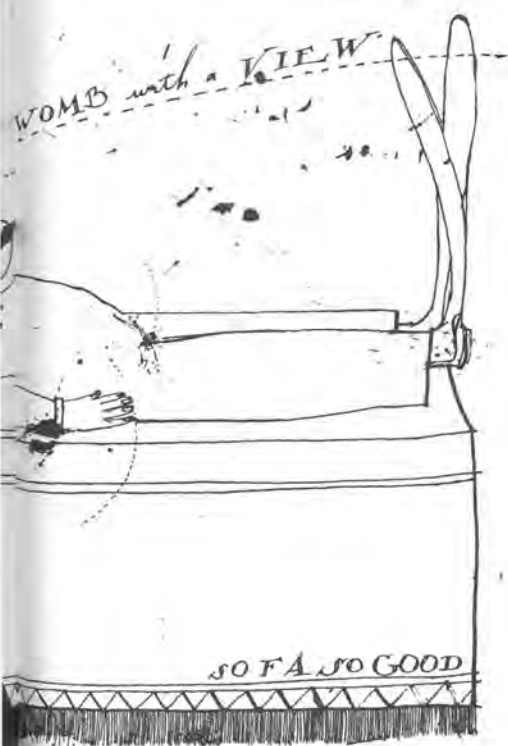
To sense the difference between *what is* and *what could be*, we may badly need the "Aha!" that comes from exchanging subject for object; the flash of recognition that starts with a smile. I've grown to have a lot of faith in this technique of reversal. It not only produces empathy, but it's a great detector of bias, in ourselves as well as in others. In fact, the deeper the bias, the more helpful it is to make a similar statement about the other gender—or a different race, class, sexuality, physical ability, whatever—and see how it sounds.

What if heterosexual male teachers were prejudged as sexual abusers of children instead of gay males (which actually makes more statistical sense)? If the jogger who was raped in Central Park in 1989 had been a black woman instead of a white one, would she have made the evening news? Suppose everyone not bisexual was suddenly labeled "monosexual"? What if a female president had thrown up and collapsed on the Japanese premier—as George Bush did? What if men had to ask: "How can I combine career and family?"

In pursuit of the reasons why Sigmund Freud is still with us, and, most important, how it feels to be on the wrong side of his ubiquitous presence, I propose that male human beings in general, as well as everyone in the psychological trade, male or female, imagine themselves on the receiving end of a profession—indeed, a popular culture—suffused with the work and worship of one of the most enduring, influential, and fiercely defended thinkers in Western civilization: Dr. Phyllis Freud.

You will come to know her here through the words of her biographer, a scholar who is a little defensive because of criticisms of Freud, but still starstruck, and very sure of being right—in other words, a typical

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DAVID HUGHES

**Phyllis Freud
not only listened
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Freudian. Every detail of Phyllis' biography springs from Sigmund's, with only first names, pronouns, and anything else related to gender changed in order to create a gender-reversed world.

As in so much of life, the fun is in the text, but the truth is in the footnotes. Read both.

It's important to understand that when little Phyllis was growing up in Vienna in the mid-1800s, women were considered superior because of their ability to give birth. This belief in female superiority was so easily mistaken for an immutable fact of life that conditions like *womb envy* had become endemic among males.¹

Indeed, the belief in women's natural right to dominate was the very foundation of matriarchal Western civilization. At the drop of a hat, wise women would explain that, while men might dabble in the arts, they could never become truly *great* painters, sculptors, musicians, poets, or anything else that demanded creativity, for they lacked the womb, which was the very source of creativity. Similarly, since men had only odd, castrated breasts that created no sustenance, they might become adequate family cooks, but certainly they could never become great chefs, vintners, herbalists, nutritionists, or anything else that required a flair for food, a knowledge of nutrition, or a natural instinct for gustatory nuance. And because childbirth caused women to use the health care system more than men did, making childbirth its natural focus,² there was little point in encouraging young men to become physicians, surgeons, researchers, or anything other than low-paid health care helpers.

Even designing their own clothes was



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left to men only at the risk of unfortunate results. When allowed to dress themselves, they could never get beyond the envy of wombs and female genitals that condemned them to an

endless repetition of female sexual symbolism. Thus, the open button-to-neck "V" of men's jackets was a recapitulation of the "V" of female genitalia; the knot in men's ties replicated the clitoris while the long ends of the tie took the shape of labia; and men's bow ties were the clitoris *erecta* in all its glory. They were, to use Phyllis Freud's technical term, "representations."³

In addition, men's lack of firsthand experience with birth and nonbirth—with choosing between conception and contraception, existence and nonexistence, as women did so wisely for all their fertile years—also reduced any sense of justice and ethics they might develop.⁴ This tended to disqualify them as philosophers, whose very purview was the question of existence versus

nonexistence plus all the calibrations in between. Certainly, it also lessened men's ability to make life-and-death judgments, which explained—and perhaps still does—their absence from decision-making positions in the law, law enforcement, the military, or other such professions.

After life-giving wombs and sustenance-giving breasts, women's ability to menstruate was the most obvious proof of their superiority. Only women could bleed without injury or death; only they rose from the gore each month like a phoenix; only their bodies were in tune with the ululations of the universe and the timing of the tides. Without this innate lunar cy-

cle, how could men have a sense of time, tides, space, seasons, the movement of the universe, or the ability to measure anything at all? How could men mistress the skills of measurement for mathematics, engineering, architecture, surveying—and many other fields? In Christian churches, how could males serve the Daughter of the Goddess with no monthly evidence of Her death and resurrection? In Judaism, how could they honor the Matriarchal God without the symbol of Her sacrifices recorded in the Old Ovariment? Thus insensible to the movements of the planets and the turning of the universe, how could men become astronomers, naturalists, scientists—or much of anything at all?⁵

It was simply accepted for males to be homemakers, ornaments, devoted sons, and sexual companions (providing they were well trained, of course, for, though abortion was well accepted, it was painful and to be avoided, and a careless impregnation could be punished by imprisonment).⁶

Once Phyllis Freud got into brilliant theorizing that went far beyond her training as a nineteenth-century neurologist, however, her greatest impact was to come not from phrases like *womb envy* and *anatomy is destiny*. No, those truths were already part of the culture. It was her interest in and treatment of *testyria*, a disease marked by uncontrol-

lable fits of emotion and mysterious physical symptoms so peculiar to males that most experts assumed the condition to be related to the testicles. Though testyrial males were often thought to be perverse, pretending, or otherwise untreatable, some treatments had been devised. They ranged from simple water cures, bed rest, mild electric shock, or, for the well-to-do, trips to a spa, to circumcision, the removal of the testicles, cauterization of the penis, and other remedies that may seem draconian now, but were sometimes successful in subduing testyrial fits, and, in any case, were a product of their times.⁷ In Paris, Phyllis Freud had also been among the hundreds of women who assembled in lecture halls to see demonstrations of hypnosis—a new technique for treating these mysterious symptoms by reaching into the unconscious—on male testyrics brought in for the purpose.

In fact, that sight had coalesced in Freud's mind with a case of testyria she had heard about in Vienna. A neurologist colleague, Dr. Josephine Breuer, had discussed her progress in relieving testyrial symptoms by encouraging a patient to explore the memories of earlier painful experiences with which the symptoms seemed associated—first with the aid of hypnosis, later by just talking them out through free association. Actually, this method had been improvised and named the "talking cure" by the young patient in question, Bert Pappenheim.

1 Modern Freudians *still* won't give up on penis envy. In 1981, *Freud and Women*, by Lucy Freeman and Dr. Herbert S. Strean (Continuum), contained this typical defense: "Contemporary psychoanalysts . . . agree penis envy is a universal fantasy of little girls at the age of four, [but . . .] if a little girl's emotional needs are understood by a loving mother and protective father, the normal fantasies of penis envy that occur during her phallic stage of sexual development will be accepted, then suppressed . . . and she will be able to love a man not for the physical attribute which, as a little girl, she envied and unconsciously wished to possess, but out of her feelings for him as a total person. She will want him not as a possessor of the desired phallus, but as mate and father of her child. In Freud's words, her original wish for a penis has changed into the wish for a baby."

2 Actually, this is true—women do use the health care system about 30 percent more than men do—but you'd never know it from who's in charge. Logic is in the eye of the logician.

3 Here are Freeman and Strean: "In her unconscious envy of the penis, many a woman adorns herself with feathers, sequins, furs, glistening silver and gold ornaments that 'hang down'—what psychoanalysts call 'representations' of the penis." I rest my case.

4 At the age of 76, with all the wisdom of his career to guide him, Freud wrote: "We also regard women as weaker in their social interests and as having less capacity for sublimating their instincts than men." His assumption that women were incapable of reaching the highest stage of ethical development—which was, in masculinist thought, the subordination of the individual to an abstract principle—became the foundation of the field of ethics. For an antidote, see Carol Gilligan's *In a Different Voice* (Harvard University Press).

5 As another antidote to antimenstruation bias, try this argument: "Since in women's 'difficult' days before the onset of the menstrual period, the female hormone is at its lowest ebb, women are in those few days the most like what men are like *all month long*."

6 Yes, abortion was punishable by imprisonment at that time, and yes, the other reversals are also true. Descriptions of the era's sexism have been used to make Sigmund's attitude toward women seem understandable, even enlightened. Ignoring the many advances of his day flattens the ground around him to make him look taller. Here are a few other realities: George Sand was born a half century before Freud, and was one of many women who managed to live a life more free and unconventional than Freud could imagine even for himself. U.S. suffragists had issued the Declaration of Sentiments at Seneca Falls eight years before Freud was born. Throughout his formative years, Austrian suffragists, socialists, and reformers were working on every area of women's social and political rights—as were their counterparts in other countries. And there was an active movement in Austria for homosexual rights at the turn of the century.

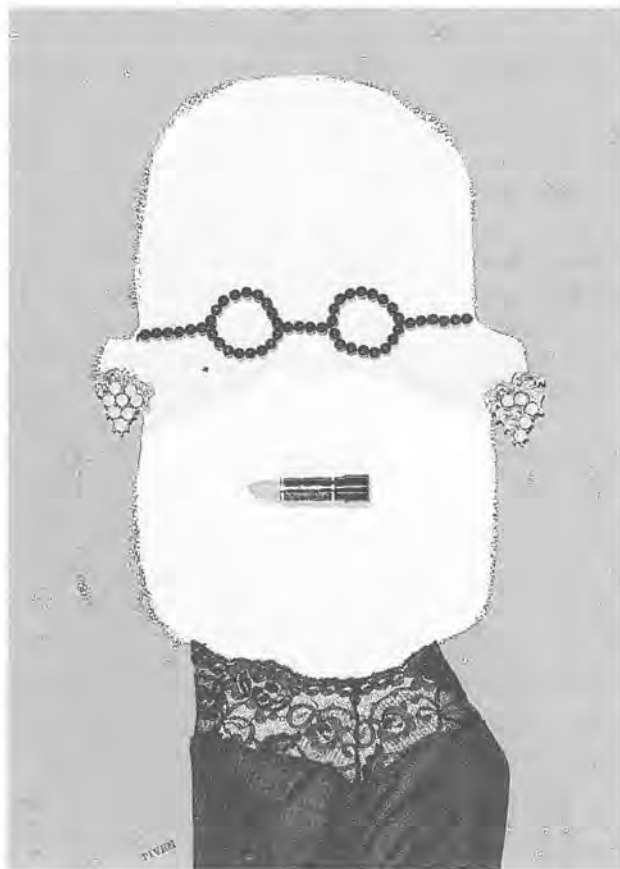
7 For from-the-horse's-mouth documents of the period on the sadistic treatment of female patients—from electrical shocks to clitoridectomy and other sex-related surgeries—see Jeffrey Moussaieff Masson's *A Dark Science: Women, Sexuality, and Psychiatry in the Nineteenth Century* (Farrar, Straus & Giroux). For this tradition as adapted in the Freudian era, see Phyllis Chesler's *Women and Madness* (Harcourt Brace Jovanovich).

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When Freud began her practice in the study of her Vienna apartment, hypnosis and Pappenheim's "talking cure" combined in her courageous focus on testyria. The symptoms she saw included depression, hallucinations, and a whole array of ailments, from paralysis, incapacitating headaches, chronic vomiting and coughing, and difficulty in swallowing, to full-scale testyrial fits, imitative pregnancies, and self-injury that included "couvade," or slitting the skin of the penis—an extreme form of womb and menstruation envy that was an imitation of female functions.⁸

Even as Freud worked first with hypnosis, then more and more with psychoanalysis (for she had honored Pappenheim's "talking cure" with that new and scientific name), she theorized about what might be the cause. Because testyria was particularly common among men in their teens and twenties, she surmised that homemaking, child-rearing, sexual service, sperm production, and other parts of men's natural sphere had not yet yielded their mature satisfactions. Since some young men were also indulging in the dangerous practice of masturbation, they were subject to severe neurosis and sexual dysfunction per se. Among older and more rebellious or intellectual men, there was also the problem of being too womb-envying to attract a mate. Finally, there were those husbands who were married to women who had no regard for their sexual satisfaction; who, for example, practiced coitus interruptus either as a form of contraception, or from simple disregard.⁹

Extreme gratitude from her patients



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was understandable. Not only was Phyllis Freud the rare woman who listened to men, but she took what they said seriously and made it the subject of her own brilliant theories, even of science.

This advanced attitude joins other evidence in exposing the gratuitous hostility of masculinists who accuse Freud of androphobia.¹⁰ As a young woman, Phyllis had even translated into German Harriet Taylor Mill's *The Emancipation of Men*, a tract on male equality that a less enlightened woman would never have read.¹¹ Later, she supported the idea that men could also become psychoanalysts—provided, of course, they subscribed to Freudian theory, just as any female analyst would do. (Certainly, Freud would not have approved of the current school of equality that demands "men's history" and other special treatment.)

I'm sure that if you read carefully each of Freud's case histories, you will see the true depth of her understanding for the opposite sex.¹²

Freud wisely screened all she heard from testyrial men through her understanding, well accepted to this day, that men are sexually passive, just as they are intellectually and ethically. The libido was intrinsically feminine, or, as she put it with her genius for laywoman's terms, "man possesses a weaker sexual instinct."

This was proved by man's mono-orgasmic nature. No serious authority disputed the fact that females, being multiorgasmic, were well adapted to pleasure, and thus were the natural sexual aggressors; in fact, "envelopment," the legal term for intercourse, was an expression of this active/passive

understanding.¹³ It was also acted out in microcosm in the act of conception itself. Think about it: the large ovum expends no energy, waits for the sperm to seek out its own destruction in typically masculine and masochistic fashion, and then simply envelops the infinitesimal sperm. As the sperm disappears into the ovum, it is literally eaten alive—much like the male spider eaten by his mate. Even the most quixotic male liberationist would have to agree that biology leaves no room for doubt about an intrinsic female dominance.¹⁴

What intrigued Freud was not these biological facts, however, but their psychological impact: for instance, the way males were rendered incurably narcissistic, anxious, and fragile by having their genitals so precariously perched and visibly exposed on the outside of their bodies. Men's womblessness and loss of all but vestigial breasts and useless nipples were the end of a long evolutionary journey toward the sole functions of sperm production, sperm carrying, and sperm delivery. Women were responsible for all the other processes of reproduction. Female behavior, health, and psychology governed gestation and birth. Since time immemorial, this disproportionate share in reproductive influence had

unbalanced the sexes. (Freud realized the consequences for women as well, among them *breast castration anxiety*: a woman who looks at the flattened male chest with its odd extraneous nipples fears deep in her psyche that she will return to that breast castrated state.)

Finally, there was the physiological fact of the penis. It confirmed the initial bisexuality of all humans.¹⁵ After all, life begins as female, in the womb as elsewhere¹⁶ (the explanation for men's residual nipples). Penile tissue has its origin in, and thus has retained a comparable number of nerve endings as, the clitoris.¹⁷ But somewhere along the evolutionary line, the penis acquired a double function: excretion of urine and sperm delivery. (Indeed, during boys' feminine, masturbatory, clitoral stage of development—before they had seen female genitals and realized that their penises were endangered and grotesque compared to the compact, well-protected clitoris—the penis had a third, albeit immature, function of masturbatory pleasure.)¹⁸ All this resulted in an organ suffering from functional overload. The most obvious, painful, diurnal, nocturnal (indeed, even multidurnal and multi-nocturnal) outcome for this residual clitoral tissue was clear: *men were forced to urinate through their clitorises.*

8 I couldn't resist *couvade*, a pregnancy-imitating ritual among men in tribal cultures where pregnancy and birth are worshiped. Women are made out to be the "naturally" masochistic ones in patriarchal cultures, but doesn't sitting the penis sound pretty masochistic to you?

In the case of Freud and his colleagues, however, the self-cutting and other mutilations they were seeing in their practices were probably what has now been traced to real events of sexual and other sadistic abuse in childhood: females (and males when they are similarly abused) repeat what was done to them, punishing the body that "attracted" or "deserved" such abuse, and anesthetizing themselves against pain, just as they were forced to do in the past.

9 Interesting—this one works both ways. Since "coitus interruptus" could be defined as an "interruptus" by whichever half of the pair has finished coitus—if you see what I mean—it needs no reversal.

10 O.K., maybe it's not perfect, but you try making up a word for man-hating. Also try figuring out why there isn't one.

11 Freud picked up a little extra money by translating John Stuart Mill's *The Emancipation of Women* while doing peacetime military service. What this mostly proves is that he was exposed to ideas of equality early—and rejected them. As he wrote to his wife, Martha: "Am I to think of my delicate sweet girl as a competitor? . . . the position of woman cannot be other than what it is: to be an adored sweetheart in youth, and a beloved wife in maturity."

12 You bet.

13 Try replacing "penetration" with "envelopment" and see what happens to your head.

14 Let's face it. Biology can be used to prove anything. Phyllis describes fertilization in terms of female dominance. Sigmund's terms are better suited to rape: "The male sex cell is actively mobile and searches out the female one, and the latter, the ovum, is immobile and waits passively," he wrote in "Femininity." "This behavior of the elementary sexual organisms is indeed a model for the conduct of sexual individuals during intercourse. The male pursues the female for the purpose of sexual union, seizes hold of her, and penetrates into her." What feminism asks—and I hope science, too, will ask one day—is, why do we have to assume domination? How about cooperation?

15 Actually, S.F. did believe in bisexuality—especially in young children, for they hadn't yet figured out how precious the penis was.

16 True.

17 Also true. *Somebody* had equality in mind.

18 Here is Sigmund in "Some Psychological Consequences" of the Anatomical Distinction Between the Sexes: "There is 'a momentous discovery which little girls are destined to make. They notice the penis of a brother or playmate, strikingly visible and of large proportions, at once recognize it as the superior counterpart of their own small and inconspicuous organ, and from that time forward fall a victim to envy for the penis. . . . She has seen it and knows that she is without it and wants to have it.'"

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No doubt, this was the evolutionary cause for the grotesque enlargement and exposure of the penis, and for its resulting insensitivity due to lack of protection. Though the nerve endings in the female's clitoris remained exquisitely sensitive and close to the surface—carefully carried, as they were, in delicate mucous membranes, which were protected by the labia—the exposed penile versions of the same nerve endings had gradually become encased in a protective, deadening epidermis; a fact that deprived men of the intense, radiating, whole-body pleasure that only the clitoris could provide. Men's lesser sex drive and diminished capacity for orgasm followed, as day follows night.

As Phyllis Freud proved in clinical studies that would become both widely accepted and tremendously influential, male sexuality became mature only when pleasure was transferred from the penis to the mature and appropriate area: the fingers and tongue. Freud reasoned brilliantly that since insemination and pregnancy could not accompany every orgasm experienced by multiorgasmic females, it must also be the case for males that sexual maturity would be measured by their ability to reach climax in a nonprocreative way. Immature *penile* orgasms had to be replaced by *lingual* and *digital* ones. In "Masculinity" as elsewhere, Phyllis Freud was very clear: "In the clitoral phase of boys, the penis is the leading erotogenic zone. But it is not, of course, going to remain so. . . . The penis should . . . hand over its sensitivity, and at the same time its importance, to the lingual/digital areas."¹⁹



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As brilliant a thinker as Phyllis Freud was, when she listened to her male testyrics in those first dozen or so years of her practice, she made a crucial error, the unraveling of which would give rise to the tenets of Freudian theory.

The error began understandably enough. Freud noticed that many testyric symptoms of her male patients were too severe to be aftereffects of such destructive yet all-too-common traumas as masturbation (which was less common in men, anyway, due to their weaker sexual instinct) or the witnessing of the "primal scene" of sex between parents (in which the mother devoured the defenseless father). Nor did they appear to be conjured up by testyric lying, or by a hereditary "taint" of insanity, as some of her colleagues believed. On the contrary, she began to notice that her patients' incapacitating floods of fear—even testyric paroxysms in which they seemed to be fighting off un-

seen enemies—seemed to be pieces of a jigsaw puzzle that, when gradually assembled, revealed scenes of sexual attacks suffered in childhood, usually at the hands of family members or other adults on whom the child had been totally dependent. Furthermore, these testyric symptoms were triggered only by something in the present environment that had been a part of that repressed memory. Finally, the symptoms actually began to diminish as the buried memory was dug out and brought into consciousness.

Suddenly, Freud had a revelation: *these "scenes" might be true!* As she wrote: "The fact is that these patients never repeat these stories spontaneously, nor do

they ever in the course of a treatment suddenly present the physician with the complete recollection of a scene of this kind. One only succeeds in awakening the psychical trace of a precocious sexual event under the most energetic pressure of the analytic procedure, and against an enormous resistance. Moreover, the memory must be extracted from them piece by piece, and while it is being awakened in their consciousness they become the prey to an emotion which it would be hard to counterfeit."

Needless to say, believing the ravings of testyrial males was a great departure from matriarchal wisdom. Nonetheless, Phyllis Freud felt she was on to something. It could be the discovery she'd been looking for; one that would bring her, as she wrote, "eternal renown" and "certain wealth." Identifying the cause of testyria could be the key to the Alexandra the Great, Hannibalia-type fame for which she felt destined. To this new theory of the roots of testyria, she gave the odd name "the seduction theory," apparently as a polite way of referring to "premature sexual experience," not as any suggestion that very young males had been complicit with their abusers. On the contrary, she defended her patients' veracity in personal letters and professional papers.²⁰

Of course, Phyllis Freud could make no attempt to investigate or intervene in any way in such sensitive family matters. One couldn't embarrass the very families who were sending her their sons. But proof sometimes walked in the door. Once, the sibling of a testyrial patient told Freud of having witnessed the sexually perverse acts from which the patient suffered. On another occasion, two patients had been sexually used as children by the same person. In another case, a parent had begun to cry

as an admission after a child's accusation of sexual abuse, and Phyllis, as sensitive as ever to suffering, dropped the subject so the parent and child could go home together. Spurred on by such validation, she grew more excited about the import of her discovery, and began working on what was clearly much more important than any intervention: papers to be given at professional societies.²¹

Phyllis Freud was well aware that her seduction theory would make her "one of those who had disturbed the sleep of the world," but she continued to hope for praise and fame from the colleagues to whom she presented it. However, when the reception of her colleagues turned out to be cool, varying from noncommittal at best to irate at worst, she was bitterly disappointed.

Still, she might have continued with her foolish and fundamental error, had it not been for a decisive realization that prompted her to abandon the seduction theory: *Phyllis Freud came to understand that, in order to maintain it, she would have to go to the ridiculous and dishonorable lengths of indicting her own family.*

This realization began soon after her mother's long illness and death, which she hadn't expected to affect her deeply. After all, she felt hostility toward her mother, the opposite of the love and sexual attraction she felt for her beautiful and adoring father. "The old woman's condition does not depress me," she wrote to her friend Wilhelmina Fliess. "I do not wish her a prolonged illness . . ." But after her mother died in the fall of 1896, Freud wrote: "By one of these dark pathways behind the official consciousness the old woman's death has affected me deeply."

For many months, Freud continued to write down her

19 In "Femininity," Sigmund explained: "In the phallic phase of girls the clitoris is the leading erotogenic zone. But it is not, of course, going to remain so. . . . The clitoris should . . . hand over its sensitivity, and at the same time, its importance, to the vagina."

Should we excuse him as a man of his time? Here's the conclusion of Lisa Appignanesi and John Forrester in *Freud's Women* (HarperCollins): "It is almost inconceivable that Freud was not aware of the orthodox views of contemporary anatomists and physiologists, who had, from well before the early nineteenth century, demonstrated that the clitoris was the specific site of female sexual pleasure, and who, in the medical writing of his time, had asserted that the vagina had virtually no erotic functions at all. Nineteenth-century medical encyclopedia writers closed the file on the vagina in the same way Alfred Kinsey [did] in the mid-twentieth century, with a flourish of definitively and chillingly rank-pulling medical rhetoric: virtually the entire vagina could be operated on without the need of an anesthetic."

Still think the digital/lingual reversal is too outrageous? Maybe—but it allows men a lot more nerve endings than Freud allowed us.

20 A century ago Sigmund Freud was on to the pervasiveness and damage of sexual and other abuse of children—all the truths we are only now rediscovering. He often failed to publish the whole truth (for instance, he waited years before disclosing that a young girl's rapist had really been her father, though her case history in "Studies on Hysteria" was anonymous). Nonetheless, his letters plus published work combine to tell us what he was seeing and hearing in his practice: stories about the pain and terror associated with defecation and menstruation, which we now know are traceable to experiences of anal intercourse as a young child, or having had objects forced up the anus and vagina; complaints about vomiting and other eating disorders, which are believed to have had their source in the use by adult males of infants' and children's mouths for oral sex; descriptions of an inability to talk or walk, which seem related to memories of being threatened or tied up during sexual abuse; disturbed sleep patterns and night terrors, which occurred at the same time that past sexual abuses had usually taken place—and so on. What had been called "hysteria" was almost always an abreaction: that is, a buried memory of a real event, triggered by something in the environment, so that the emotion of the event was reexperienced as if it were happening in the present.

21 Papers detailing true cases—all of fathers and daughters. Freud wrote of one: "I told her that I was quite convinced that her cousin's death had nothing at all to do with her state. . . . At this, she gave way to the extent of letting fall a single significant phrase; but she had hardly said a word before she stopped, and her old father, who was sitting behind her, began to sob bitterly. Naturally I pressed my investigation no further; but I never saw the patient again." For an extensive account of these cases, see *The Assault on Truth: Freud's Suppression of the Seduction Theory*, by Jeffrey Moussaieff Masson (Farrar, Straus & Giroux).

patients' stories of abuse by "perverts" as if they were real.²² After all, it was difficult to give up a cherished theory. In one case, Freud had observed that "testyrial headache with sensations of pressure on the top of the head, temples, and so forth, is characteristic of the scenes where the head is held still for the purpose of actions in the mouth." Freud had been afflicted with painful and incapacitating headaches of the same sort throughout her life. This certainly must have influenced her questioning of the seduction theory. The sentence that followed clearly demonstrates how bizarre the theory would become if consistently applied. Freud wrote that she would have to believe "my own mother was one of these perverts and is responsible for the testyria of my sister . . . and that of several younger brothers."²³

By May of 1897, Freud had realized that *all* children feel hostility toward their parents, and want them to die: "This death wish is directed in sons against their father, and in daughters against their mother." It was not only a comforting confirmation of her own normalcy, but the origin of the discovery of the Electra complex and the less important Oedipus complex. Soon she also realized the reason for her melancholy after her mother's death: the natural hostility to the same gender parent is "repressed at periods when compassion for one's parents is aroused—at times of their illness or death."

In August, she went off to Italy where her historic self-analysis finally began to succeed. We don't know what heroic battles Phyllis Freud fought within herself. One step was that she turned her attention from memory to fantasy, developing a highly symbolic and brilliantly intellectual interpretation of fantasies as wish fulfillments.

Since all boys were in love with their mothers and wished to replace their fathers sexually, the "scenes" of her patients could easily be indications only of what they wanted to happen, not what really happened. And even if it had happened, it didn't matter, for it was one's fantasy life and the desire to have sex with one's parents that was of import. She needn't delve any further.²⁴

By September, Freud was finally able to renounce the seduction theory in a letter to Fliess. It was to become a famous letter, quoted and memorized by all those struggling against the superficial belief that suffering was inspired by real events, not the deep and immortal struggles isolated within the psyche. There was the "great secret that has been slowly dawning on me in the last few months. I no longer believe in my *neurotica*." She cited "the absence of the complete success on which I had counted." Also the fact that, "in all cases, the *mother*, not excluding my own, had to be accused of being perverse." Finally, there was "the realization of the unexpected frequency of testyria, with precisely the same conditions prevailing in each, whereas surely such widespread perversions against children are not very probable."²⁵ This realization diminished her torment, even though it meant publicly reversing a previously held position—not something Freud was fond of doing. Phyllis Freud bravely apologized for her past errors. "I believed these stories, and consequently supposed that I had discovered the roots of the subsequent neurosis in these experiences of sexual seduction in childhood," she wrote. "If the reader feels inclined to shake her head at my credulity, I cannot altogether blame her." **MS**

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22 For instance, Freud wrote about one young woman patient: ". . . her supposedly otherwise noble and respectable father regularly took her to bed when she was from eight to twelve years old and misused her without penetrating ('made her wet,' nocturnal visits). . . . A sister, six years her senior, with whom she talked things over many years later, confessed to her that she had had the same experiences with their father. A cousin told her that when she was fifteen she had had to fend off her grandfather's embraces . . . a quite ordinary case of hysteria with the usual symptoms." Among her "ordinary" symptoms: she had feelings of great anxiety about riding in a carriage. Her brother had been taken off to an asylum in one. We never learn what had been done to the brother.

23 Here's the whole quote made public for the first time in Jeffery Moussaïef Masson's *The Complete Letters of Sigmund Freud to Wilhelm Fliess, 1887–1904* (Harvard University Press): "Hysterical headache with sensations of pressure on the top of the head, temples, and so forth, is characteristic of the scenes [Freud's term for his patients' childhood sexual memories] where the head is held still for the purpose of actions in the mouth. (Later reluctant at photographer's, who holds head in a clamp.) Unfortunately, my own father was one of these perverts and is responsible for the hysteria of my brother . . . and [that] of several younger sisters. The frequency of this circumstance often makes me wonder."

24 We'll never know what really happened to Freud. Here is the closest I've found to a scholarly espousal of such a thesis: in *Freud and His Father* (Norton), Marianne Krull—who conducted a careful examination of Freud's letters, recorded dreams, and actions after his father's death—concluded that his sudden decision to turn child abuse into fantasy came "precisely at a time when his self-analysis could have forced him to accuse his own father of being a seducer, of being perverse."

25 Of course, that's the opposite of what Sigmund Freud *had* been saying, and what was in his own library. But never mind. What's more interesting is his switch from the personal and detailed to the impersonal and statistical. There is Sigmund in "The Aetiology of Hysteria": "All the singular conditions under which the ill-matched pair conduct their love-relations—on the one hand, the adult, who . . . is armed with complete authority and the right to punish, and can exchange the one role for the other to the uninhibited satisfaction of his moods, and on the other hand the child, who in his helplessness is at the mercy of this arbitrary will . . . and whose performance of the sexual activities assigned to him is often interrupted by his imperfect control of his natural needs—all these grotesque and yet tragic incongruities reveal themselves as stamped upon the later development of the individual and his neurosis."