

The Clinical Structure of Phobia:

Lacan's Reformulation of the Variables of Its Treatment.

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## **Abstract**

Phobia has been understood and treated in many different ways throughout history, but mainstream treatments have overlooked a possibly crucial modality of treatment in the theory proposed by Lacan. By viewing phobia as nothing more than a symptom modern day treatments miss out on why the phobia may exist at all. Both Freud and Lacan see phobia as both symptom and structure, but only Lacan has gone past this expression in order to provide the clinic with a deeper comprehension of what a phobia is and how it can be effectively treated. Lacan separates out the mere symptom of fear from the proper structure of phobia so that the treatment is directed in a more appropriate way to the organisation of the phobic subject. By first understanding where the phobia stems from, and realising its particular use, the practitioner - Lacanian or otherwise - can produce the support needed to reduce the amount of anxiety experienced, as well as help the patient to cope better with certain phobic situations. The DSM-IV & ICD-10 do not currently provide this as a treatment option nor do they view phobia as anything more than a cluster of symptoms focused around anxiety. This thesis goes through modern, preferred, treatments of what is known as phobia, as well as the history of its emergence in psychoanalysis through Freud, in order to formulate the key proposals put forward by Lacan – in texts which are as yet unpublished in English. This produces a number of proposals that are important to the understanding and treatment of phobia and anxiety disorders.

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## Chapter I: Modern Treatments of Phobia: Development of Techniques

Phobia's present day treatments revolve around seeing the phobia as a symptom and a condition that requires a dissipation of these symptoms. Many people go through a treatment to rid themselves of this issue including author, composer and pianist Allen Shawn (Shawn [ 2007]). I will discuss modern day views and treatments for phobia as well as its root in psychoanalysis to expand further on a more effective method, understanding, and subsequent treatment of phobia.

Allen Shawn is a perfect example of a common case of phobia. Phobia statistics indicate that approximately 19.2 million people in the US alone suffer from a specific phobia. (National Institute of Mental Health, 29/05/2009) The UK statistics show that nearly 2.5 million suffer from what is classed as a phobia. (Phobias-Help.com. 29/05/2009) Generally a phobia tends to range from mild to severe on the scale of current day diagnosis in the western world (DSM/ICD). The average phobic may not even decide to come into treatment out of embarrassment. Shawn discusses in his book the way that life can be formed around such an issue. He also discusses the treatments options he experienced personally, such as what I will discuss in chapter one of this paper. (Shawn [2007])

I will start with the most common kinds of treatment available, discussing and explaining how these treatments orientate themselves to phobia. In chapter two I will further my discussion of psychotherapy by going back to the founder of psychoanalysis. In chapter three I will expand Freud's star case in phobia. And finally, in chapter four I

will develop the concept of a structural difference in diagnostic technique that is presently only found in untranslated texts. Those who practice modern behavioural techniques may find such structural pre-conditions both new and alien to the way they currently view and treat phobia. The Lacanian theory has great implications on our understanding of phobia and could light the way for new and more effective methods of treatment for phobia.

Today the treatment of phobia is cornered by cognitive-behaviouralists who claim to have the answer to taming fears. CBT uses a desensitising method by slowly immersing the patient into their fear in steps. For instance, if afraid of spiders, first you might talk about a spider, then look at a photo, then look at a fake spider, then look at a real one contained, then eventually touch and even hold one. These later events mark the ability for the person to get rid of the fear of spiders logically. Many fears are irrational and the patients know it, but something inside them triggers a response regardless. CBT views the underlying meaning behind the particular fear as being clinically useless and so only deals with the immediate effects of phobia. Fears are viewed as an inhibition to the quality of life a person maintains and therefore needs remedy. This type of therapy is also not mindful of the consequences of removing fears. For instance, a phobia in a patient may be holding together a delusion and removal of that phobia could result in a psychotic breakdown. A phobia is also a way to bind anxiety and premature removal could result in a patient's inability to cope. CBT does not take into consideration that the phobia may serve a purpose to the patient.

Anxiety disorders and phobia are often not classed in the same diagnostic category. There is a compiled idea of how to view a "phobia" in relation to mainstream

psychiatry. First there is a possibility of some genetic predisposition and possible organic abnormality or disease that could produce more of a potential for fear reactions. Secondly, there is a cognitive aspect, which has shown that the person with phobia consistently has a misconception of the object, or situation that they fear. "Researchers from around the world have consistently shown that individuals with specific phobias have distorted beliefs regarding the objects and situations they fear. " (Barlow [2002], p. 402)

Treatment for anxiety disorders is a disputable subject while treatment for specific phobias seems to have an agreed treatment amongst mainstream psychiatry. The preferred method is called flooding or systematic desensitisation. "Compared to other anxiety disorders, there is very little disagreement regarding the treatment of choice for specific phobias. Almost all experts agree that exposure to the feared objects and situations are both necessary and sufficient for treating the vast majority of patients with this condition." (Barlow [2002], p. 408) It is held by these 'experts', as they are called, that people with specific phobias hold certain misperceptions regarding the objects or situations that produce the fear reaction.

### The Medical Model

According to the Diagnostic and Statistical Manual (DSM) a phobia is classed under the 'anxiety disorders' category. Generally following the stimuli of agoraphobia, a specific phobia, panic attack, or even the expectation of a panic attack will result in an

episode of severe anxiety. The DSM does not class panic attacks as a codeable disorder therefore it is not something that can be considered a diagnosis, but is something that can occur in conjunction with a diagnosis. The DSM is based on a medical model of diagnosis through symptomology so it is best to look at the fear reaction itself in order to understand the classification of phobias in the DSM as well as the reaction of the real body.

Fear is an unrealistic feeling of dread or an uncertain knowledge of some unknown danger from an unknown source. Anxiety causes the body to activate what is called the "Fight or Flight" mechanism. This mechanism causes excess adrenalin to be discharged from the adrenal glands that are located superior to each kidney. The adrenal gland is a small triangular shaped gland that has an inner and outer portion which function as two separately acting glands. The inner part is the adrenal medulla and the outer part is the adrenal cortex. The adrenal cortex helps to maintain the salt and water balance in the body and is involved in the metabolism of carbohydrates and the regulation of blood sugar (cortisone release). In addition, the cortex produces sex hormones and acts as a regulatory function in the balance of the body. The adrenal medulla, inner portion of the gland, has a function of helping the body prepare for stress. It releases adrenalin and epinephrine along with small amounts of norepinephrine in order to break down the epinephrine for reuptake into the neurons. These hormones are released in response to the sympathetic nervous system. This is in turn activated by stress, and low blood sugar (all the things that the cortex regulates). Epinephrine & norepinephrine are referred to as the "fight or flight" hormones because of their role in preparing the body for vigorous physical activity. When these hormones



are taken back up into the system it affects many organs. This break down is caused by excess adrenalin & epinephrine in the system in order to create a homeostasis in the body. Catecholamines are then put out in the system in order to stabilise the balance once the stimulus of the hormone is released. The major effects of these hormones are a mirroring of the DSM symptomology for panic.

The bodily effects are as follows:

1. Stimulation of smooth muscle in the walls of the arteries supplying the internal organs and the skin, but not those supplying the skeletal muscle. The resulting constriction of blood vessels causes the blood pressure to increase and the blood flow to the internal organs and the skin to decrease.
2. Blood flow to skeletal muscles increases.
3. Increase in the heart rate, which also causes blood pressure to increase.
4. Increase in the metabolic rate of several tissues, especially skeletal muscle, cardiac muscle and nervous tissues.
5. Dilation of the air passages, called bronchioles, in the lungs through relaxation of the smooth muscle cells in their walls. This allows air to move in and out of the lungs with greater ease.
6. Increases the breakdown of glycogen to glucose in the liver, the release of fatty acids from fat cells. The glucose and fatty acids are used as an energy source to maintain the body's increased rate of metabolism.

(Seely et al [1991], p. 275-276)

As noted above, during panic the rate of respiration deepens, the heart palpitates rapidly, the blood pressure rises, then gets diverted from the stomach and intestines to the heart and central nervous system; the muscles in the alimentary canal cease to produce peristalsis, sugar is freed from the reserves in the liver, the spleen contracts and discharges its content of blood and antibodies, and adrenalin is secreted from the adrenal medulla located on the kidney.

The key to these marvellous transformations in the body is found in relating them to the natural accompaniments of fear and rage – running away in order to escape from danger, and attacking in order to be dominant. Which ever the action a life-or-death struggle may ensue. They are adjustments which, so far as possible, put the organism in readiness for meeting the demands which will be made upon it.

(Cannon, W. [1932], p. 227-229)

The secreted adrenalin and the sympathetic nerve impulses induce the release of stored glycogen from the liver, producing a flood of sugar in the blood for the use of the skeletal muscles; It also helps in distributing the blood to the heart, the brain, and the limbs while truncating it from the organs that do not require immediate use. The adrenalin in the blood stream can restore muscles to a state of readiness to act; and it renders the blood more rapidly coagulable to prohibit death by profuse bleeding. The increased breathing, the redistributed blood running at the high pressure to only vital organs, and the more numerous red blood vessels set free from the spleen provide

essential oxygen for riddance of acid waste, and produce an ideal condition for rapid action of the individual.

Cannon says, "In short, all these changes are directly serviceable in rendering the organism more effective in the violent display of energy which fear or rage may involve ... closely related to fear is pain ... the rule holds that pain is a sign of harm and injury . . . Thus pain saves us from repeating acts which in the end might make an end to life itself. " (Cannon [1932], pp. 227-229) This is the simplified process the body goes through internally when anxiety or fear is perceived externally. Some of the symptoms a person might physically notice are dry mouth, difficulty swallowing, hoarseness, rapid breathing and heartbeat, palpitations, twitching, trembling, muscle tension, headaches, backaches, sweating, difficulty concentrating, dizziness, faintness, nausea, diarrhoea, weight loss, sleeplessness, irritability, fatigue, nightmares, memory difficulty or loss, and sexual impotence. The same internal process can occur when an internal cue triggers an anxiety or fear response. This is how the body responds unaware of the difference between a real, present danger and a fantasy which is Symbolically based for avoidance of the Real.

The DSM classifies this type of anxiety in several different types: situational anxiety disorders, adjustment disorders, generalised anxiety disorder, panic disorder, post traumatic stress disorder, specific phobias, and obsessive compulsive disorder. The DSM separates these into specific categories relating to the major category of anxiety. It is important to know, medically speaking, how extreme anxiety and fear physically manifest, but the DSM fails to see that this reaction is often triggered by some unseen,

Symbolic, cue and often the use cognitive-behavioural techniques to desensitise the sufferer to the fear response may lead to a re-symbolisation of another such response.

The DSM & other methods suppose that the symptoms of phobia have some diagnostically determinable quality. Charles Brenner mentioned that a phobia as constituted by psychiatry is not a diagnostic. He tells us that:

If all phobias were dynamically or genetically similar in many important ways, calling a symptom a phobia would be useful. In fact however, the reverse is the case. The only thing all phobias have in common is the defensive use of avoidance. They share nothing else, either dynamically or genetically, which distinguishes them from any other class of symptoms.

(Ward, [2001], p. 73)

Brenner makes a very perceptive point about a symptom not having grounds for a diagnostic. A symptom is not the cause of all problems, but the symptom is a reaction to some problem; or in Lacanian terms a symptom is a symbol that may lead to another symptom or the main problem. The main diagnosis for one patient may produce different symptoms and yet another patient may share the same diagnosis and have another set of symptoms. If one focuses on symptoms then only the symptom can be treated and other symptoms will emerge from the newfound lack there of because the main problem or reason for a symptom as a means of defence remains untouched. This is one reason that the DSM continues to create categories within categories to explain

why there are so many variations to their diagnoses. Another factor is the DSM's reliance on pharmacological treatments that often rule the diagnosis in terms of correcting a certain symptom or set of symptoms using a certain drug or cocktail of drugs. This hedges the diagnostic towards more of a biological level again ignoring the root cause.

### Pharmacology: Psychiatry & Neuroscience

As mentioned regarding the DSM, the biological approach has spawned the use of drugs to treat the effects that the phobia has on the body. (Rachman et al [1996], p. 42) Once put into terms of how fear effects the body it is then possible to counteract the chemicals that are at play by suppressing the autonomic nervous system. There are six groups of drugs that are currently used to treat anxiety disorders. Those six are: antipsychotics, antidepressants, minor tranquilisers, serotonin effectives, beta-blockers, & psychostimulants. (Healy [1997], p. 132)

### Anxiolytic Drugs: Benzos, SSRIs, MAOIs, and Beta-Blockers

Anxiolytic drugs are drugs that are thought to reduce states and symptoms of anxiety. They are also known as minor-tranquilisers due to their sedative effects on the central nervous system (CNS). Most, such as benzodiazepines, work directly on the

brain causing a drowsy effect that retards perception and CNS neural transmissions. The effect is much like that of being drunk where the response of the person is delayed and inhibited by the substance. Other than benzodiazepines, some antidepressants are also used in this category. Selective serotonin reuptake inhibitors (SSRIs) as well as monoamine oxidase inhibitors (MAOIs), and beta-blockers are sometimes used to treat the physical symptom of rapid heart rate and the secondary symptoms that follow. However, they are not true anxiolytic agents due to the fact they do not effect the state of anxiety, but rather effect the physical symptom.

The first treatment for 'nerves' was a tactic of sedation and because of this effect the drugs were called sedatives. There was no other idea or treatment for a person with nervous problems other than sedating them. The first change in this way of thinking and treating came with the use of stimulants for nervous problems.

In 1955, Frank Berger launched meprobamate, the first non-barbiturate sedative. In the course of developing this drug, which had strong muscle relaxant properties, Berger became convinced that it would ultimately be possible to produce a drug for nervous problems that was non-sedative. He found that answer by only producing the effects of muscle relaxation. (Berger [1946], pp. 265-272)

To distinguish this new drug from what had been termed as sedatives, Berger called his drug a 'tranquilliser', which had been coined by Frederick Yonkman (Ciba Pharmaceuticals) the previous year to describe the effects of the first antipsychotic drugs. Those that followed it (Buspirone Hydroxyzine, chlorpromazine, meprobamate and the benzodiazepines) were called minor tranquilisers, to distinguish them from major tranquillisers such as Haloperidol (Butyrophenone). (Balon [2008], p. 1531)

The term tranquilliser became a problem in the 1980's due to benzodiazepine dependence. As a consequence, pharmaceutical companies have been careful to call the SSRIs 'anxiolytics' rather than 'tranquillisers'. However, Healy says, "There is no reason why the benzodiazepines could not also be called anxiolytics." (Healy [1997], pp. 142-143) Indicating that pharmacologically speaking these drugs have the same effects. (Silverstone [1974], pp. 195-201)

In the 1990's SSRIs came onto the market. In 1938, prior to the discovery of serotonin, a Swiss chemist named Albert Hofmann discovered lysergic acid diethylamide (LSD). It was intended as a synthesised anlyptic that would act as a stimulant on the circulatory and respiratory organs. The study was discontinued and the psychedelic properties were unknown until five years later when Hofmann intentionally over dosed himself in an experiment on the dosing threshold. In this experiment he progressively felt more and more insane. He experienced paranoia and hallucinations such as one might experience in psychosis. From then on LSD was considered to have some link to psychosis and particularly schizophrenia. (Hoffmann [1979], p. 35) It was later found that LSD simulates 5-HT<sub>2A</sub> receptors. (Preston et al [1994], p. 54)

Serotonin was unofficially discovered in 1933. It was first isolated in the intestines of animals and called enteramine. Entramine was found to cause the intestine to constrict and related to muscle tone. Maurice Rappaport gave the chemical structure and named it in 1947. This became the official discovery date of Serotonin. It is identified as 5-hydroxytryptamine or 5-HT for short. (Shorter [1997], pp. 320-322) With its relation to LSD it was thought that serotonin would be a key chemical in relation to mental illness. (Silverstone [1974], p. 17) In the 70's neurotransmitters were discovered

to be key in several major mental illnesses. Dopamine was linked to psychosis, noradrenalin to mood, and acetylcholine to dementia. Serotonin wasn't obviously linked to any psychiatric disorder in particular so was marketed as an anxiety drug. (Hoffmann [1979], p. 36)

## Non-Prescription Drugs

Opiate use also effects the body in regard to serotonin and dopamine. It is a predominantly central acting narcotic that effects the CNS by acting on descending serotonergic (5-hydroxytryptaminergic) pathways, to increase 5-HT release (which inhibits release of pain mediators). It also decreases cyclo-oxygenase (COX)<sup>1</sup> activity. (Silverstone et al [1974], pp. 21, 232-7, 262, 292, 294)

Alcohol is not a controlled medication, but is often used by people with anxiety disorders. (Semple et al [2005], p. 498) It can be purchased over the counter and is relatively cheap when compared to the cost of seeing a doctor and getting prescription drugs. (Goodwin [1983], pp. 118-120) Alcohol acts by binding directly to the receptors for acetylcholine, serotonin, GABA<sup>2</sup>, and the NMDA<sup>3</sup> receptors for glutamate. GABA's

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<sup>1</sup> Cyclo-Oxygenase (COX) decreases inflammation and pain in the body. It is an enzyme found in aspirin, ibuprofen, and other non-steroidal anti-inflammatory drugs (NSAIDS).

<sup>2</sup> Gamma-aminobutyric acid is the chief inhibitory neurotransmitter in the central nervous system. It plays a role in regulating neuronal excitability throughout the nervous system. It is also directly responsible for the regulation of muscle tone in humans. (Roberts et al [1993], p. 9.5)

<sup>3</sup> N-methyl-D-aspartic acid is a specific type of glutamate receptor that controls synaptic plasticity and memory function. It play a key role in a wide range of physiologic and pathologic processes, such as excitotoxicity. (Fei Li et al [2009], p. 302)



effect is to reduce neural activity by allowing chloride ions to enter the post-synaptic neuron. These ions have a negative electrical charge, which helps to make the neuron less excitable. This physiological effect is amplified when alcohol binds to the GABA receptor; probably because it enables the ion channel to stay open longer and thus let more negatively charged Chloride (CL-) ions into the cell. This causes the sedative effect of alcohol on the body. Alcohol acts on both serotonin and dopamine reuptake. Alcohol actually increases the release of these chemicals, but does not allow for a reuse by the cells leaving the person at first feeling better, but later feeling depressed. It generally inhibits the nerve cells causing a retardation of the CNS and a short period of increased serotonin and dopamine in the neural synapse. Behaviour is influenced by serotonin and dopamine influences enjoyment. (Adams [1977], pp. 773-775)

Other over the counter drugs such as antihistamines have also been used to decrease anxiety. There are two generations of antihistamines; the second generation has less sedative effects than the first generation. (Silverstone [1974], p. 1920) This is because it does not cross the blood-brain barrier as readily and is therefore less effective because of this quality. The molecules in the second generation were engineered so that they were too large to cross over the blood brain barrier and they are not as easily absorbed by fatty acids. The first generation antihistamine is well known for its sedative effects. One, which is commonly used in hospitals in the US, is called diphenhydramine hydrochloride. (Silverman [1979], pp. 366-368) It is cheap and can be administered by a nurse without consulting a doctor. It too acts directly on the CNS, unlike the more modern antihistamines that direct their effects towards tissues.

(Simmons [1996], p. 4) The first generation of anti-histamines inhibit the reuptake of serotonin.

In the CNS histamine functions in sleep/wakefulness, hormone secretion, and cardiovascular control. The H<sub>3</sub> receptor modulates neurotransmission in the CNS and peripheral nerves dealing with airway, gastrointestinal, and cardiovascular systems. H<sub>3</sub> receptors inhibit histamine release and modulate acetylcholine, GABA, glutamate, norepinephrine, and serotonin release in the CNS. As you can see all of these effects would target the main symptoms of anxiety. These over the counter drugs have the same effects as some antipsychotic medications such as hydroxyzine (which is a first generation anti-histamine) & thiorazine (closely related to an antihistamine called promethazine which was once used as an anti-psychotic). (Vander [1970], pp. 719-721)

Healy<sup>4</sup> states that to understand how anxiety is treated via the use of these drugs one must understand the various types and forms of anxiety. He has sectioned off anxiety in four sets of 'experience' including characteristic symptoms as well as several situational forms for which medication is prescribed.

According to Healy the first is called "mental anxiety". This, he says, is a worry or preoccupation that something may go wrong.

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<sup>4</sup> David Healy qualified in Medicine in Dublin in 1979 and then did a MD in neuroscience in Galway on Biochemical Markers in Depression completing that in 1985. He studied psychiatry in University College Galway followed by Cambridge University Clinical School where he was a Clinical Research Fellow. He has authored 13 books on various aspects of psychopharmaceuticals as well as 110 peer-reviewed papers and approximately 100 other publications. Nine of these books are on the area of the history of psychopharmacology, two from Harvard University Press and he has a leading role world-wide in this area. His other research interests include cognitive functioning in affective disorders and psychoses, circadian rhythms in affective disorders. (Cardiff University, 29.05.09)

This may also include intrusive ideas, thoughts, or impulses of a distressing nature. This form of anxiety may be present without many physical symptoms such as increased muscular tension, heart rate, sweating or shaking. Antipsychotics and antidepressants tend to work on this component of anxiety.

(Healy [1997], p. 133)

Second is physical tension, which consists of a knotting of the various muscles around the body. This probably results from an inhibition of action. He explains how preparing the muscles of the body for an action without discharging them for the prepared action can result in chronic tension. He recommends relaxation to break the habit of chronic muscle tensing, activity to discharge the muscle tension, and benzodiazepines to control the mental component of anxiety.

The third 'experience' is a set of physical symptoms, such as increased heart rate and increased intensity of heartbeat – i.e., palpitations. Other symptoms include a tremor in the hands, profuse sweating, feeling faint or dizzy, nervous stomach, and sometimes nausea or diarrhoea. There is also a tendency towards rapid rate and shallow breathing. This hyperventilation leads to symptoms such as tingling in the hands and legs, a sensation of pins and needles, light-headedness, blackouts, and visual disturbances. "Beta-Blockers have been thought to help some of these features of anxiety." (Healy [1997], p. 133) Most notably they effect the heart and as a result relieve some of the other symptoms.

In conjunction with the third experience there is a fourth that is related to the symptoms produced by hyperventilation. This fourth form of anxiety is called dissociative anxiety. The symptoms include: a feeling of being detached or removed from oneself or as though one's body is not operating normally (depersonalisation), a perceived distortion of reality leading to a feeling of surrealism, flatness, or as though everything is happening on a stage (derealisation), an 'out of body' experience, auditory and or visual hallucinations, recurrent emotional states or short-lived negative feelings, feelings of numbness (mentally or physically), and amnesia for past events. (Healy [1997], p. 133)

Stage fright is one of the situational categories Healy mentions. Stage fright, according to Healy and others, leads to increased muscular tension, sweating, nervous stomach, hand tremors, increased heart rate, and an eerie unreal feeling. He feels that minor tranquilisers or even beta-blockers can benefit people who suffer from this form of phobia. Worry and thought can lead our body to react in the same way it would to a real and present danger and thus this reaction compounds the 'fight or flight' response. He suggests using these drugs in order to trick the body into thinking it is not actually afraid. He says:

If these signs of anxiety are blocked, we in turn appear to assume that we are less anxious. This tricking of ourselves is a legitimate manoeuvre and is undoubtedly what human beings have been doing for millennia, mostly hitherto by using alcohol to abolish the manifestations of anxiety – giving us Dutch courage.

(Healy [1997], p. 134)

Once the body is tricked, according to Healy, as well as other psychiatrists, the phobia will be relieved in that situation. It also leads to the possibility that the body can be classically conditioned to forget that it is afraid in particular situations.

Healy also talks about social phobia and lists it as part of the forms of social anxiety. He indicates that there are three forms of social phobia. The first is a specific form that involves fear of performing in front of others that most likely leads to avoidance behaviours. The second is a generalised form of social phobia that involves avoidance of most occasions where there is interaction with others. This may manifest in a range of avoidance behaviours from difficulty shopping because of the difficulties in asking for things, to avoiding the bank teller and using automated tellers instead, to crossing the street when aware of the approach of anyone who might want to stop and engage in conversation.

This phobia is thought to involve extreme self-consciousness and esteem issues. Healy suggests that affected individuals are constantly evaluating themselves as boring and have a negative outlook on themselves. Finally, there is a condition termed as avoidant personality disorder, which as the name implies, is a state where an individual's freedom to act is heavily restricted by their interpersonal difficulties. In its extreme form, individuals with this condition may become house bound. Healy, amongst others, have found that there is a high incidence of

alcohol abuse amongst those afflicted with social phobia. Social phobics tend to manifest other phobic disorders, panic disorders, or depression in addition to their social phobia. Healy says that:

MAOI & SSRI may bring about some improvements in the condition and may do so for individuals with severer forms of the disorder even in the absence of any obvious depressive disorder. In contrast, beta-blockers or benzodiazepines appear to be of limited usefulness.

(Healy [1997], pp. 136-137)

Neurotic anxiety is characterised by Healy as long lasting and self-perpetuating, which results from maladaptions to everyday anxious moments. For this type of situational anxiety Healy suggests behavioural therapy, but states that there are other treatments currently prescribed for neurotic anxiety that include anxiolytics. Under this category he classes the different types of neuroses and how they are treated.

Phobic neurosis, for Healy, encompasses those suffering with the DSM or ICD diagnosis of simple or general phobia. Agoraphobia in this way of thinking is a general phobia where a particular fear of, lets say, snakes, is a specific phobia. Healy suggests that exposure therapy is the treatment of choice when these disorders do not include depression. Antidepressants are used for agoraphobia and SSRIs or MAOIs act as an anxiolytic for general and specific phobia patients as well.

Panic attacks alone are not a codeable disorder according to the DSM-IV-TR, but the ICD-10 codes "Panic Disorder" as a disorder by which panic occurs in the

absence of any specific phobia and is the main diagnosis. Panic should occur several times within the period of a month where the attacks are acute in nature. (WHO [1992], pp. 139-140 / APA [2000], pp. 209-210) Panic disorder is generally defined by “episodes of intense anxiety” that can strike at any time whereby a person feels as though they might have a heart attack or stroke or an acute disturbing physical sensation that prompts a panic reaction. A description of the symptomology is as follows:

The primary experience is usually intensely physical – acute awareness of thumping heart and shaking hands, with feelings of nausea, weakness and shortness of breath, but there are usually also thoughts of impending doom. These attacks may lead secondarily to a phobia of going shopping if, for example, the first attack happens in the supermarket.

(Healy [1997], p. 136)

This shows the likeness of symptoms that this condition has with other forms of phobia as well as the debilitating effects of such a disorder.

There have been vigorous attempts to market anxiolytics, particularly the benzodiazepine alprazolam, for panic disorder. Most of the antidepressants have also been tested in panic disorder and shown to have a certain amount of usefulness. The drugs of choice for panic disorder is tricyclic anti-depressants (Rachman et al [1996], p. 47) In particular Imipramine is said to block episodes of panic & reduce general anxiety. (Rachman et al [1996], p. 48) Another type of drug used is called MAOI (Monoamine

Oxidase Inhibitors). These drugs seem to show improvement in users and are as effective, but are less prescribed due to the side effects. Drugs tend to be used for up to 12 months and then the patient's dosage is graduated until they are completely off the medication.

Another disorder that is grouped into the anxiety disorders by DSM & ICD is Obsessive Compulsive Disorder (OCD). "The drug for which most research has been done in OCD is clomipramine (Anafranil). Based on the success of clomipramine, studies of the SSRIs were undertaken for OCD, and each seem useful. Broadly speaking these drugs all seem to usefully take the edge off intrusive mental worries or imagery." (Healy [1997], p. 137) Healy furthers this by saying that in OCD there is often a depressive component, which can be relieved by antidepressants. Once this is relieved behavioural programmes are much more effective. SSRIs are also effective, as stated before, as an anxiolytic for many anxiety states and are also useful on OCD. However, Healy notes, "no proper clinical trials have been done on any other agents." He follows by saying that "it is unlikely that beta-blockers or benzodiazepines would help since there are no prominent physical symptoms related to anxiety." (Healy [1997], p. 138)

## Behavioural Therapy

Behavioural Therapy was founded by BF Skinner in the 1930's and caught on later in the early 1960's. This was at a time when psychoanalysis was the predominant orientation of practice. Behaviouralists claimed that behavioural conditioning could be



a viable therapy technique and that by targeting behaviours, rather than histories and unconscious processes, one could effectively and swiftly change a person's maladaptive behaviour. (Kazdin [1978], p. 468)

The theory is that the mind is a black box and the only thing that is quantifiable is the observation of behaviour. Thought, for Watson, was only an internalised dialogue of speech rather than a process related to the mental apparatus (ego, id, superego). Speaking was considered part of verbal-behaviour or a construct produced in order for a stimulation of action to occur. In an essay republished in his 1969 book *Contingencies of Reinforcement*, Skinner took the view that humans could construct linguistic stimuli that would then acquire control over their behavior in the same way that external stimuli could. (Skinner [1969], p. 283) Verbal behavior was defined as behaviour that is under the control of consequences mediated by other people. In this theory people can function as speaker and listener interchangeably. Skinner argued that verbal behavior is a function of the speaker's current environment and his past behavioural and genetic history. For Skinner, the proper object of study is behaviour itself, analysed without reference to hypothetical (mental) structures, but rather with reference to the functional relationships of the behavior in the environment in which it occurs. Feelings, for Skinner, were no excuse for behaviour, but rather the feelings are a product of behaviour. Feelings and mental structure are inside the 'black box' and deemed unnecessary to explain in the behaviouralist view. (Skinner [1957], p. 172-176)

Contemporary behavioural therapy began around the 1950's during a time when psychoanalysis, in all its forms, was prevalent. By the 1970's Behavioural therapies were commonplace and psychology departments were taking its theory up in its curriculum.

By the 1980's the theory had expanded to other uses and split into three factions: The original classical conditioning approach, operant conditioning approach, and cognitive-behavioural approach.

## Cognitive Therapy

There is a dispute over who is the founder of Cognitive therapy. Both Albert Ellis and Aaron Beck were the pioneers of cognitive therapy. Ellis's approach was branched off from the American psychoanalytic theory while Beck was becoming weary of long-term psychoanalytic approaches and felt that thinking was the root of his patient's issues. Both Ellis and Beck felt that a maladaptive perception was the root of the issues that their patients had though both dealt with this idea a bit differently.

Ellis started an approach called rational-emotive therapy. It is a psychotherapy based on correcting maladaptive constructs of reality. Ellis taught that beliefs, views, and philosophies, etc. about the world, including our selves, the people in it, and the view of our social system as a whole, produced emotional disturbances that could be corrected by thinking differently about the particular issue. Ellis started an 'A-B-C' model of therapy by which 'A' is for adversity (or activating event), 'B' is for beliefs, and 'C' is for consequences. So an activating event precipitates a bad thought or belief and leads to an action that equals a consequence. (Ellis [2002], pp. 4-8, 89)

Beck felt the way that patients perceived meaning was faulty. He felt there was no need to delve into drives and unconscious motives, but felt that the way forward was

through correcting thinking patterns. Beck outlined his approach in *Depression: Causes and Treatment* in 1967. He later expanded his focus to include anxiety disorders, in *Cognitive Therapy and the Emotional Disorders* in 1976. He also introduced a focus on the underlying "schema"—the fundamental underlying ways in which people process information—whether about the self, the world or the future. (Beck [1967], p. 323)

By the early 1960's Social Learning Theory emerged as an up-and-coming new form of therapy. This combined the theories of operant conditioning with observed learning. Cognition now found a place in the behavioural theory. From this Cognitive-Behavioural approaches were formed. The treatment of phobias became somewhat of a specialty of this orientation. Its methods are generally to expose the phobic person to the phobia producing stimuli and correct the thoughts and ideas a person has about this object. The result is that the person produces a conscious effort to both be aware of the irrationality of their fear and also to consciously control it.

## Exposure Treatment

Exposure therapy is often used to manage panic disorder. This form of therapy is another method of treatment in the cognitive therapy approach. The behavioural and cognitive approaches propose that people who panic interpret symptoms wrongly producing an evasive action response to avoid experiencing the worst possible outcome of their panic. Treatment in this approach aims to get the person to do the opposite to what they have been doing and to remember their thoughts during the episode of

panic. This is so they can recognise what is happening and produce a logical sense of control over the situation. Over and above this, cognitive approaches further emphasise the thinking style of affected individuals. (Healy [1997], p. 136)

When generally speaking of phobia both the cognitive and behavioural approaches promise short-term results. A step-by-step, logical, process of exposure to the thing feared produces a systematic desensitisation by way of showing that the physical and mental aspects of the fear will not result in harm or death. It will also produce a conditioning via constant exposure to reassure the individual that the feared object will only produce a short period of anxiety that they know the outcome of.

The principle behind a behavioural approach in these disorders is to expose the sufferer to the thing that is frightening them the most and to block, at least temporarily, their avoidance of what they have been avoiding. This forces the individual to encounter the stimulus to their fears and to habituate to it. Such an approach may produce a brief spell of intense anxiety, but appears to be an effective way of breaking obsessive cycles of behaviour.

(Healy [1997], p. 138)

Not only does this help the phobic to create a logical controlled way of both thinking and acting when in contact with an object or situation that provokes fear. This logic

formation also breaks old instinctual and habitual formations of behaviour through the production of thought and reflection on the action.

## Hypnotherapy

From around 1774-1815 hypnosis, although an old technique, began to shed light on the processes of the mind. The idea of possessions turned into personality disorders and the exorcist became what is known as the 'mesmer.' James Braid, in his 1843 book *Neurypnology: or the Rationale of Nervous Sleep*, coined the term "hypnotist" referring to the mesmer. (Braid [1843], p. 28) For a long time hypnosis, also known as mesmerising, was used to rid people of fears and other problems. This type of technique was used specifically to treat a variety of diseases known at the time.

The theory was that an unseen fluid was connecting both the mesmer and the mesmerised. This came about in 1774, when Mesmer produced an "artificial flux and reflux" in a patient by having her swallow a preparation containing iron, and then attaching magnets to various parts of her body. She reported feeling streams of a mysterious fluid running through her body and was relieved of her symptoms for several hours. Mesmer did not believe that the magnets had achieved the cure on their own. He contributed animal magnetism to the cause. He believed he had passed this magnetic fluid, which had accumulated in his own body, to her. He soon stopped using magnets as a part of his treatment. (Mesmer [1997], p. 125) Braid however did not agree with this idea and so Mesmer's theory was never taken forward. (Bushman

[1850], p. 276)

In 1775 Mesmer was invited to give his opinion before the Munich Academy of Sciences on the exorcisms carried out by Johann Joseph Gassner, a priest and healer. Mesmer said that while Gassner was sincere in his beliefs, his cures were due to the fact that he possessed a high degree of animal magnetism. This confrontation between Mesmer's secular ideas and Gassner's religious beliefs marked the end of Gassner's career as well as the emergence of what Ellenberger calls 'dynamic psychiatry'. (Ellenberger [1981], p. 3)

The scandal that followed Mesmer's unsuccessful attempt to treat the blindness of an 18-year-old musician, Maria Theresia Paradis, led him to leave Vienna in 1777. The following year Mesmer moved to Paris, rented an apartment in a part of the city preferred by the wealthy and powerful, and established a medical practice. Paris soon divided into those who thought he was a charlatan who had been forced to flee from Vienna and those who thought he had made a great discovery.

In his first years in Paris, Mesmer tried and failed to get either the Royal Academy of Sciences or the Royal Society of Medicine to provide official approval for his doctrines. He found only one physician of high professional and social standing, Charles d'Eslon, to become a disciple. In 1779, with d'Eslon's encouragement, Mesmer wrote an 88-page book *Mémoire sur la découverte du magnétisme animal*, to which he appended his famous 27 propositions. (Mesmer [1997]) These propositions outlined his theory at that time. (Marks [1947], pp. 51-53)

According to d'Esmon, Mesmer understood health as the free flow of the process of life through thousands of channels in our bodies. Obstacles to this flow caused illness. Overcoming these obstacles and restoring flow produced restored health. When nature failed to do this spontaneously it produced a crisis, and so contact with a conductor of animal magnetism was believed to produce a remedy. Mesmer aimed to aid or provoke the efforts of nature. To cure an insane person, for example, involved causing a fit of madness. The advantage of magnetism involved accelerating such crises without danger. (Ellenberger [1970], pp. 64-66)

Irrespective of the Mesmer theory, in the process of treating patients, seemingly unexplainable phenomena were noticed. Like how can the person be in a "sleep" and yet function as if they are awake. Further research revealed that even though the person has no conscious memory of being hypnotised, when hypnotised again the person could recall the incident with complete clarity. This demonstrated that there were two, not one, portions of the mind functioning at the same time. This was a breakthrough idea and the beginnings of what we today would consider to be called the unconscious mind. This theory began as dipsychism or a double ego. Meaning that there were two minds, one being conscious and the other laying just beneath in the unconscious. Patients who were hypnotised were believed to manifest a new life, like that of an alter ego. (Ellenberger [1970], p. 131)

From this point mesmers found that it didn't take a special set procedure to put people under, but that a variety of techniques were effective to place a person into a trace state. From this the relationship changed and psychotherapy began to develop. Many remnants of the hypnotist remained in the setting of the psychotherapist- for

example - the dimmed room, the couch, and the position of the therapist. Hypnotism was used to recover memory and so too was the first psychotherapy.

The relationship that the therapist had with his patients became a focus. As before when the exorcist had a relationship with the demon being exercised and the mesmer with the mesmerised patient, the psychotherapist based his/her self firmly in what was before it. The first psychotherapists were mesmers and hypnotists who shared the same doctrine, ethics, took notes, and were now paid for their work based on skill. They were urged to work only if purified. Meaning the therapist would be in good health and not have issues of their own to work through. They were to carry on a wise, dignified, calm, sober, kind sort of existence or be purified by such a philosophy of life before practicing. To practice in a bad state would transfer over to the patient and this was deemed unacceptable. They also had a mesmer's oath. (Crabtree [1993], pp. 351-355)

This was the start of something based more in philosophy, literature, arts, magnetism, spiritualism, hypnotism, and the idea of polipsychism. Polipsychism is like dipsychism, but there were more than one. Durand de Gros states that:

Human organisms consisted of anatomical segments,  
each of which had a psychic ego of its own, & all of them  
subjected to a general ego, the Ego-in-Chief, which was  
our usual consciousness.

(Ellenberger [1970], p .146)



He believed that some parts of the personality, although unconscious to us, suffered greatly even when under anaesthesia.

## Psychotherapy

Treatment of phobia in the psychotherapies often employs the borrowed techniques of CBT. If these techniques are not employed the therapist might take on any number of orientations in order to work within a specific frame. Speaking generally about modern psychotherapy, one can expect to speak about family history, events that precipitated the fear, and even events that seem to be unrelated.

Freud influenced the contemporary practice of psychotherapy. Many of his basic concepts are still part of the theory although many new theories have diverged from this point. The new theories that have built upon Freud's concepts have produced a modern version of psychoanalysis, one that works with today's need for fast results in treatment.

A framework is produced through many forms of psychotherapy, personality development, and philosophy (where human nature is thought to be driven by instincts) resulting in the ability for there to be a practice. The theories of libido are also maintained. The goal is to gain pleasure and avoid pain as stated in Freud's pleasure principle. Sexual energy and life energy form the libido. The death instinct forms aggressive drives and may unconsciously manifest in behaviours. Many forms of psychotherapies think that these sexual and aggressive drives direct patient's negative

behaviours. It is generally thought in psychoanalytic psychotherapies that our behaviours are determined by irrational, unconscious motivations, biological instincts, and the evolution of our psychosexual development.

Gerald Corey<sup>5</sup> presents that in such forms of psychotherapy, through producing an insight, the patient can rid his or her self of repetition and other defence mechanisms. As the unconscious becomes conscious then what was once uncontrollable is replaced by control over behaviour, decision, and thought. The aim is to make the unconscious conscious so that the person then has a life choice. The unconscious strongly influences behaviours and is the root of all neurotic symptoms. The cure that is produced is based on uncovering the meaning behind symptoms and behaviours that interfere with a healthy lifestyle in order to produce, for the person, a choice of different behaviours and to leave behind symptoms. Intellectual insight is not enough to resolve the symptom in psychotherapy. "Clinging to old repetitions must be confronted by working through the transference distortions." (Corey [1996], p. 94) The symptom is not logical and therefore cannot be removed by intellect. It can only be sorted out by working through the psychotherapeutic relationship.

Precisely to this view, the personality is an essential philosophy in psychotherapy. In order to treat or produce an effect the therapist must work with the concept of personality as an unconscious system. The construction of the personality is

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<sup>5</sup> Gerald Corey teaches courses in theories and techniques in counselling, professional ethics, and group counselling. His teachings and books are used across the US in universities training students in psychotherapy and counselling. He conducts workshops in the US, Canada, Mexico, Germany, Belgium, Scotland, and China. He regularly presents intensive courses, lectures, and workshops as well as having his own video lectures that are available for professors and those running workshops across the US. (Corey [1996], front flap) He is presented precisely because his teachings in the US are so influential.

produced by three systems. Those systems as they are called are the id, ego, and superego. The id is the biological component, ego the psychological component, and the superego the social component. These three systems function as a whole to produce the personality.

In this view the id is the original system of personality and is the location of the instinct. It completely lacks organisation and the ability to produce organisation on its own. It cannot tolerate tension or displeasure so its main goal is to discharge it immediately. This system is ruled by pleasure. It can be described as illogical, amoral, immature, unconscious, and action lacking thought.

The ego, according to Corey, is the system that maintains contact with the external world to produce a grounding of reality. Corey says, "It is the executive that governs, controls, and regulates the personality." (Corey [1996], p. 93) This system mediates between the id, or instincts, and reality in order to produce a result that both produces pleasure and avoids consequences. It is realistic and logical in its process of keeping the Id in balance.

The superego is the system that represents traditional values and the ideals of society. It functions to inhibit the id function and persuade the ego function to substitute for moralistic goals. It is considered the "judicial branch of the personality". (Corey [1996], p. 94) Its main concern is the moral code of what is right or wrong, good or bad, as represented in society. This system rewards the person with pride and self-love, but punishes with guilt and feelings of inferiority.

These three systems make up the unconscious. Working together they store up all the experiences, memories, repressed material, needs, and motivations that exist for a person. Most psychological functions are located in the unconscious.

Anxiety is also essential in psychotherapy. Anxiety is a state of tension that motivates actions so to maintain a degree of anxiety allows the person in therapy to wish to make a life change. Anxiety develops out of conflict with the unconscious system. The three portions fight over who has control over the flow of psychic energies. The function of anxiety is to warn the person of an impending danger within the system as well as in reality. There are three recognised types of anxiety: real, neurotic, and moral.

Real anxiety is that which is produced by a reaction to the external world. An example would be if you were close to a venomous snake. This is a real danger that produces anxiety due to the real possibility that the snake could strike and kill.

Neurotic anxiety is a fear that the instincts will get out of control and as a result produce a punishment. Many people with panic disorder have this type of anxiety. The fear that they will not be able to control their fear and as a result scream or struggle to get free of the situation. The thing that often holds them to control themselves is the punishment that would result from such actions. Another example is the fear that obsessive compulsives have that they will let something that they think slip by saying it out loud or worse acting it out without realising it. Especially with the obsessive compulsives there is a fear of punishment as a result of the uncontrolled action.

Moral anxiety is a fear of a conflict with their conscious thought with moral code. Guilt would be the punishment if for what ever reason their internal logic does not coincide with the social.

The ego is the controller of anxiety and when it cannot produce control by direct and realistic means it will resort to what is known as an ego defence. This is a behaviour that is displayed in order to cope with, avoid, or redirect in some way the anxiety that is produced. This in turn prevents the ego from being overwhelmed and allowing it to maintain its cohesion with the other two systems. There are several defence mechanisms<sup>6</sup> in psychotherapy that a person might display in order to cope with anxiety. Those mechanisms are: repression, denial, reaction formation, projection, displacement, rationalisation, sublimation, regression, introjections, identification, and compensation.

Repression is the most important process of all. It was discovered by Freud and is the basis of many of the other ego defences and neurotic disorders. Corey says, "It is a means of defence through which threatening or painful thoughts and feelings are excluded from awareness." (Corey [1996], p. 95) It is a removal of something in the conscious and a placement of that something into the unconscious. This process is done without conscious intent (unconsciously). For the first five years of life a person's painful events<sup>6</sup> are pushed into the unconscious and seemingly do not exist for that person. Though these events are repressed they still influence behaviour unconsciously.

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<sup>6</sup> Though it is obvious that Freud considered 'signal anxiety' an ego defence this is not included in the ego-psychology version of Freud widely taught in America and the UK. Cory's teachings specifically represent what is considered as the standard in education for American psychology students.

Denial is very similar to repression except it operates on a subconscious level. "It consists of defending against anxiety by 'closing one's eyes' to the existence of threatening reality." (Corey [1996], p. 95) The person is slightly aware that he or she is pushing the thing that causes anxiety away from their conscious state of mind. It is the simplest of all defence mechanisms and perhaps the most often used.

Reaction formation is the production of external thoughts or actions that are contrary to the internally held beliefs that a person holds. "Individuals may conceal hate with a facade of love, be extremely nice when they harbour negative reactions, or mask cruelty with excessive kindness." (Corey [1996], p. 96) This mechanism is essential to the idea of phobia in that often what most interests the phobic internally is what they fear the most externally.

Projection is a placing on to the other person the negative or problematic qualities of his or her self. It is a mechanism of self-deception by which a person does not have to work through or deal with these personality flaws because they do not belong to them, but instead are some one else's problem.

Displacement is where the person transfers anxiety from a threatening target to a safer one. The anxiety from the threatening target is held until it can be unloaded on a less threatening one. Phobics may do this by controlling their fear, but becoming snappy or angry with people or things that are unrelated to the fear incident.

Rationalisation is a way by which the ego can be maintained when injured. It is a production of reasons to justify actions or misconducted failed actions. The reasons usually seem logical and produce a reason why the person should not fret or care over

the failed action. Rationalisation often occurs with phobia. The phobic person will rationalise why he or she should proceed even when there is an element of fear. This mechanism is often attempted in phobia, but generally fails.

Sublimation is a redirection of negative thoughts and behaviours into more productive thought or behaviour patterns. "Sublimation involves diverting sexual or aggressive energy into other channels, ones that are usually socially acceptable and sometimes even admirable." (Corey [1996], p. 96) A phobic may sublimate their anxiety about coming into contact with a fear by diverting their attentions away from the fear in a way that is perceived as more socially acceptable, for example, obsessive cleaning to a point of perfection.

Regression is a form of behaviour that resurfaces even though the person has outgrown it. It is reverting to a former state of an earlier phase of development where the demand on the ego is not as great. This behaviour is reminiscent of a time when the person felt safe. Phobics may react this way in the face of fear. They may become overly dependent on another person, hide, or act in an infantile way that is not appropriate to their age.

Introjection is taking in the values and standards of other people. There can be negative and positive forms of this. A negative form is where the person takes in values and behaviours that are socially unacceptable such as abusive parenting. A positive form is used in psychotherapy where the person takes in the 'good example' of the therapist as to effect their lives outside of the therapy sessions. This is an essential idea in American psychotherapy. The patient's true goal is to emulate and eventually take in the therapist's 'good ego' function.

Identification is not only part of development, but also a defensive reaction. It produces an enhanced perception of self worth, security of another like person, and protection from personal failure. Inferiority complexes may result in identification issues. It is also essential in the therapeutic relation that the patient identifies to some extent with their therapist in order to produce an introjection of the 'working ego' and to maintain a good example for the patient to work with outside of the sessions.

Compensation is the smoothing over of weaknesses by producing a strength in its place. Corey says, "Thus children who do not receive positive attention and recognition may develop behaviors designed to at least get negative attention. People who feel intellectually inferior may direct an inordinate degree of energy to building up their bodies; those who feel socially incompetent may become 'loners' and develop their intellectual capacities." (Corey [1996], p. 97) He furthers by saying that this is a way for the person to hide what they perceive as inferior and show only what is superior.

Further to these ideas psychotherapy uses the development of a person's personality in their theory. Psychosocial and psychosexual development provides the therapist with the theoretical tools in order to comprehend the behaviour and personality of the patient in therapy. Understanding a normal progression of these stages shows the therapist where the person may have had an abnormal or incomplete progression at a particular point in their development. In this theory the unconscious system is in development and mechanisms of defence may become more or less prevalent in the patient's daily operation.



Not only did Freud contribute to the modern psychotherapeutic theory, but others did as well. From Freud other theorists came forward producing ideas that are still in use today. After Freud died a group of new psychoanalysts began to emerge and explore the function of the ego, as they understood it. Hartmann, Kris, Rappaport and Lowenstein led this movement; new discoveries were made in understanding the synthetic function of the ego as a mediator in psychic functioning. In the 1950's 'Ego Psychologists' started to focus analytic work on the defences of the ego before exploring the deeper roots of unconscious conflicts. (Hartmann [1939], p. 110) Child psychoanalysis also became very popular at this time and has since been used as a research and training tool in both psychoanalysis and psychotherapy. (Hothersall [2004], p. 139) In the 1960's the feminist movement brought questions about Freud's theory of feminine sexual development. Through these developments many of Freud's theories were altered or eradicated from use. The idea that society plays a more important role than mentioned by Freud began to take hold.

Erik Erikson was one of the many influential people in this movement. He began his work in Vienna with an analysis from Anna Freud, daughter of Sigmund Freud. After this experience he trained as a psychoanalyst in Vienna and became interested in the learning techniques of the Montessori school. This produced strong influences on Erikson, which led to his expansion on the theories of human development.

Erikson produced the psychosocial theory that he believed developed with the psychosexual theory. For each stage in psychosexual development there is also one in the psychosocial. For Erikson the theory developed over the entire lifespan of a person and is divided in stages by certain crises that occur at given moments in a person's life.

There is a potential for the person at the point of crisis to move forward or regress. Erikson felt that Freud did not go far enough in his explanation of the stages of development so he added key points to show how the ego works through these crisis points. (Gale Group [2001], pp. 109 & 139)

Erikson focused his work on the ego's resolutions of life stages rather than on the id's internalised needs. This use of the ego is believed in modern psychotherapy to produce strength and offers ways for the person to deal with difficult issues in life. Ego psychology deals not only with issues of the past but issues in the 'here and now'. The theory sees that not only does development create life issues, but also in the later stages of life new issues may arise. Ego psychology uses not only the early developmental stages of life, but also the later ones as well. It is believed by ego psychologists that adolescence is a central stage to be addressed in psychotherapy rather than dealing with the childhood issues in psychoanalysis.

Such Neo-Freudians moved even further away from Freud's original teachings producing the new methods and theories that combined to be known as ego-psychology. This movement introduced cultural and social components to the function of the mental structure. Ego psychology is thought to have been suggested by Freud in "Inhibitions, Symptoms and Anxiety" (1926). Hartmann, Lowenstein, and Kris refined the theory in a series of papers and books from 1939 through the late 1960s. Ego strengths, later described by Kernberg, include the capacities to control oral, sexual, and destructive impulses, tolerate painful affects without falling apart, and preventing fantasy to come into consciousness. (Fine [1990], p. 110 & 221) Synthetic functions, such as defence mechanisms, in contrast to autonomous functions, arise from the

development of the ego and manage conflicting processes. Defences, according to ego-psychologists, serve the purpose of protecting the conscious mind from awareness of forbidden impulses and thoughts. One purpose of ego-psychology has been to emphasise that there are mental functions that can be considered to be basic. However, it is important to note that autonomous ego functions can be secondarily affected because of unconscious conflict. For example, a patient may have a hysterical amnesia because of intrapsychic conflict. Memory is an autonomous function, but wishing to forget due to pain produces conflict.

Object relations theorists brought about another step forward in psychotherapy. Object relations theory attempts to explain aspects of the human relationship through a study of how internal representations of both the self and others are structured. The clinical problems that suggest developmental delays include disturbances in an individual's capacity to feel warmth, empathy, trust, sense of security, stable identity, consistent emotional closeness, and stability in relationships with other human beings. Concepts regarding internal representations (also sometimes termed, "introjects," "self and object representations," or "internalisations of self and other") although often attributed to Melanie Klein, it is believed by this group that it was actually mentioned first by Sigmund Freud in his early concepts of drive theory in his 1905 paper "Three Essays on the Theory of Sexuality". (Nolan [2002], pp. 81, 154-156) (Freud [1909], p. 135) For example, in Freud's 1917 paper "Mourning and Melancholia" object relations theorists interpreted his work as coinciding with their own theory. (Freud [1917], p. 243) They interpreted from the 1917 paper that unresolved grief was caused by the survivor's internalised image of the deceased becoming fused

with that of the survivor, and then the survivor shifting unacceptable anger toward the deceased onto the now complex self-image. (Summer [1994], p. 93)

Object relations theory emphasises the interpersonal relationships that are intrapsychically represented. They go back to the childhood and the relationship with another, usually the mother. In this theory there is an emphasis on observing children and the interactions of the mother-child relationship. The theory hypothesises that the child begins life believing he or she is fused with the mother or part of her, but later reincorporates portions of her into themselves in order to maintain their reality. Gradually the child will separate through the process of attachment or symbiosis. During this phase the child lacks clarity between the self and the object or mother, but begins to see a difference between the self and others. The third stage is individuation where the child completely pulls away and recognises the difference between the self and others. The fourth stage is integration where the child sees his or her self as not only separate, but also related to others. Though the child reaches this point unfinished crises and imprints of the previous state when the child was fused with the mother produce difficulties in individuation and integration. It is held that the child even after separated is in a constant search for the mother. All relationships are familiar in that they are influenced by the relationship the child had with his or her mother early on. The goal of this therapy is for the child to be able to relate to his or her parents without fearing a loss of their sense of individualism. (Summer [1994], pp. 19-20)

Margaret Mahler also contributed to this theory by describing distinct phases and sub-phases of child development leading to 'separation-individuation' during the first three years of life, stressing the importance of constancy of parental figures, in the

face of the child's destructive aggression, to the child's internalisations, stability of affect management, and ability to develop healthy individuation as an adult. (Mahler et al [1975], pp. 3, 12)

Generally the treatment of phobia through psychotherapy would be regarded as some blockage in development that happened in the person's past. Psychotherapy consists largely of using methods to bring out unconscious material that can be worked through. It focuses primarily on childhood experiences, which are discussed, reconstructed, interpreted, and analysed. The assumption is that the exploration of the past no matter what the exact orientation will be accomplished by working through the transference relationship created in the analytic frame. The result would be a character change of the patient and a healthier ego function in every day life. Phobia is not a healthy ego function and may be seen as a result of other troubling issues in the person's past and present that need to be worked through.

The general therapeutic goal is to strengthen the ego and make the unconscious conscious in all forms of psychotherapy; If necessary there is a modification that takes place on the person's ego. The therapist usually serves as a model of the 'good and healthy ego' for the patient. The therapist attempts to create a transference relationship by assuming the role of the blank slate. The patient then transfers his or her feelings and unconscious thoughts onto the therapist for the therapist to in turn interpret back to them. The interpretation is largely a product of feelings both of the therapist and the patient. For the patient these projections are showing the therapist that there is unfinished business regarding that relationship and produce a direction for the work. Most importantly the therapist teaches the patient how to appropriately deal

with their anxiety by producing the ability to speak freely due to the therapeutic relationship. The therapist may give suggestions as to how to deal with anxiety or model anxiety being dealt with in the session by restraining themselves from being intolerant to the patient's anxiety transferences.

After Freud there was an implementation of both new and old ideas regarding phobia. Hypnotherapy, which preceded psychoanalysis, is still in use today in order to cure phobias. The Behaviourist movement brought about what it thought was a new understanding of treatment. In 1924, while Freud was still moulding his theories, a theory of human behaviour arose that only decided to deal with rationalising behaviours. The mind became a black box and the behaviour was targeted. This was a new way of looking at mental health. From this point in the 1950's cognitive therapy arose focusing on the way that cognition affects behaviours, much like its predecessor. These two theories were eventually combined. Currently the market of phobia is cornered by cognitive-behaviourists who claim to have the answer to taming fears. CBT uses a desensitising method by slowly immersing the patient into their fear in steps. These later events mark the ability for the person to get rid of, for example, the fear of spiders logically. Many fears are irrational and the patients know it, but something inside them triggers a response anyway (Freud actually termed this as a signal anxiety). CBT views the underlying meaning behind the particular fear as useless clinically and so only deals with the here and now effects of phobia. This type of therapy is also not mindful of the consequences of removing fears. Fears are viewed as an inhibition to the quality of life a person maintains and therefore needs remedy. It does not take into consideration that the fear may serve a purpose.

In the 1950's medical practitioners were also beginning to prescribe medications such as Valium to patients with severe anxiety and nervous apprehensions. This method is used to the present day for panic attacks and phobias, but usually in conjunction with non-medicinal therapy. In the 1960's relaxation techniques such as those used in hypnosis began to become a form of treatment, but again this does not touch on the cause, but rather the current issue, which is the phobia or anxiety. It is still in practice as a way to cope with uncontrollable anxieties. Forms of it can be found in many other therapies including Dialectical Behavioral Therapy (DBT)<sup>7</sup>. (Lineham [1993])

All of these current and past forms of therapy have worked for some and not for others. Their roots are based in trying to correct something affecting the patient, but all through different means. In order to find some central coordinates to the wide variety of clinical approaches that have developed in this field we need to look somewhat more closely at Freud's theory of phobic anxiety and the structuring surrounding it.

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<sup>7</sup> Dialectical behavior therapy (DBT) is a treatment method developed by Marsha M. Linehan, a psychology researcher at the University of Washington, to treat persons with borderline personality disorder (BPD). DBT combines standard cognitive-behavioral techniques for emotion regulation and reality-testing with concepts of mindful awareness, distress tolerance, and acceptance largely derived from Buddhist meditative practice. DBT is the first therapy that has been experimentally demonstrated to be effective for treating BPD. It is widely used in mental facilities in the US. (Lineham et al [2001], p. 10-13)

## Chapter 2

### Freudian Theories of Phobia & Neurosis

#### Introduction

The theories described in the previous chapter developed against a backcloth of a wide range of theories of differing therapies. Sometimes the theories are explicit and sometimes totally implicit so that on occasion people pose treatment without being aware of its theoretical presuppositions. For Example, Charcot treated hysteria with hypnotherapy thinking that the mechanism of its cure resided in the hypnotherapeutic technique while Freud treated hysteria with the understanding that its relief of symptoms was found in merely talking. Freud was also influenced by hypnotherapy in his experiments by putting patients in a sleeping state and showing that though they were “asleep” they still manifested a waking state. This produced his idea of an unconscious element to the psychical apparatus. In this chapter I want to focus on Freud’s theories of neurosis and the particular nature of phobia. The literature chosen for this chapter will show what ideas I take to have influenced Freud in his work in psychoanalysis and how these ideas in turn further influenced the theories of Lacan.



## Pre-Freudian Ideations of Neurosis

Fear and phobias have been present since the dawn of history and man has over the years progressed through knowledge to cope with these anxieties. A phobia could be considered to have an evolutionary mechanism that protects against dangers that could be fatal such as fear of heights or dangerous animals. Early man constructed these things in the context of the supernatural realm and would use magic to have some form of control over them. Later the Greeks put forth a more logical and grounded assumption that something inside of the body, not outside, was the cause of medical conditions within in the psyche. Before 1775 exorcism and other shamanistic practices were used to deal with personality disorders until 1815 when the use of mesmerism and hypnotic technique began to shed light on the processes of the mind. From this point the archaic and superstitious ideas of possession were now understood as personality disorders.

Mesmerism was started by Franc Mesmer, a German physician and astrologist, who thought that he produced an artificial flow of energy in his patients by having them swallow a solution containing iron then attaching magnets to their body in various places. This, he believed, would produce a sensation of fluid flowing in the body. He called this 'animal magnetism'. Mesmer viewed the idea of health as a free flow of magnetic life force through thousands of outlets in our bodies. He thought obstacles to this flow caused illness. Overcoming these obstacles and restoring flow produced crises, which would eventually restore the body back to health. (Alpheus [2008], pp. 9-10) (Mesmer [1997], p. 18)

John Grieve, an English physician, observed Mesmer and described the treatment. He said that a vessel was placed in the middle of the room about a foot and a half high which Mesmer called a "baquet". This baquet was large enough that nearly twenty people could have fit round it. Near the edge of the lid that covers the baquet, there were holes pierced corresponding to the number of people who were to surround it. Into these holes iron rods were inserted and bent out at right angles with different heights. These different heights correspond to the part or area of the body that would be healed. There was also a rope that was connected to the baquet and held by one of the patients. This patient would then pass it to another, and so on. (Ellenberger [1970], p. 64) He also discusses the effects of this strange procedure saying that:

The most sensible effects are produced on the approach of Mesmer, who is said to convey the fluid by certain motions of his hands or eyes, without touching the person. I have talked with several who have witnessed these effects, who have convulsions occasioned and removed by a movement of the hand...

(Ellenberger [1970], p. 64)

This indicates that the supposed magnetic fluid was being drawn by Mesmer and caused a reaction accordingly in each patient. Because of the positioning of the metal rods it was thought that the effects would be seen in that particular region of the body.

In 1843 James Braid, a Scottish neurosurgeon, coined the term "hypnotist" in his book *Neurypnology: Or The Rational of Nervous Sleep*. (Braid [1943], p. 26) Braid became

interested in the ideas of Franz Mesmer. Braid rejected the ideas of Mesmer regarding the magnetic fluid that caused the hypnotic phenomena, but posited that the hypnotic effect was due to over-exercising the eye muscles through straining to pay attention. For Braid there were rules that could be followed in order to produce, what he called, a 'nervous sleep'. The most efficient way to produce a hypnotic effect, he thought, was through visual fixation on a small object about eighteen inches above the front of the eyes. The theory and practice of hypnosis later evolved into the present day idea and code of ethics within psychotherapy.

Also at this time the idea that the mind was structured as organic became important within the medical field. In 1866 Benedict-Agustin Morel described what he termed as "emotional delusions" (*Délire émotif*) which was the combination of anxiety, panic, and obsessive-compulsive behaviours. The root cause was thought to be a disturbance of the "visceral ganglionic nervous system" and especially the "epigastric center." Basically, fixed ideas cause fear. (Ellenberger [1970], p. 903)

In 1870 Moritz Benedikt developed the term agoraphobia or *platzschwindel* that meant a fear of open spaces. It was earlier discussed and identified by Benedikt in 1867 at a scientific conference in Frankfurt, Germany with two other colleagues (Griesinger & Ernest Lasegue). They agreed it was caused by masturbation and that it only concerned those who remained indoors or along narrow streets. These people would experience the fear of falling down. (Ellenberger [1970], pp. 32, 241)

In 1871 an article was published about a soldier during the US Civil War. The author of that article was Jacob M. Da Costa and he described the first anxiety syndrome ever written about in diagnostic terms. He termed the soldiers aversion to

battle as "irritable heart" due to pains in the heart region every time he was due to face going on the battlefield. He had noticed in soldiers, specifically one Henry H., that before battles they would be struck with diarrhea and later with "lancing pains in the cardiac region", dimness of vision, headaches, sweaty hands, palpitations, epigastric pain, insomnia, and nervousness. Da Costa found that these symptoms went away for patient Henry H. after he was put on police duty and no longer had to soldier the battlefield. It was considered a somatic symptom of anxiety. (Saul [2001], p. 104)

In 1872 Carl Westphal identified and clearly defined agoraphobia and panic attacks and elevated agoraphobia to a diagnosis. He posited that it was due to a restriction that agoraphobics could not move about in open spaces. He called it "Platzfurcht". He described the anxiety involved in agoraphobia and also distinguished between sudden panic, or panic attacks, that would come over patients who were not considered to be in agoraphobic situations. He found that the agoraphobia was not always indicative of panic attacks and vice versa. (Saul [2001], p. 29)

In 1877 Ernest-Charles Lasegue developed the idea of the syndrome of "Mental Vertigo". The symptoms included were the visual field becoming cloudy, anxiety, anxious respiration, cold sweats, dizziness, awareness of no reason for anxiety and yet unable to calm themselves down. It was thought that these panic attacks might coincide with agoraphobia and the term was widely used. It was a description of present day panic disorder. (Ellenberger [1970], p. 337)

## Neurasthenia

In 1869, in the US, George Miller Beard coined the term "Neurasthenia", or tired neurons. (Beard [1894], pp. 20 & 110) He wrote that "morbid fears" were related to the functionality of the nervous system where there is a lack of force in the disordered neural system. (Beard [1894], p. 65) He included topophobia (fear of places) and this became a common diagnosis to cover what could now be considered hysteria and other neurotic disorders. (Ellenberger [1970], p. 228)

Beard's exact definition of "neurasthenia" described a condition of both "physical and mental exhaustion manifested in the impossibility of performing physical and mental work" with symptoms of fatigue, anxiety, headaches, impotence, neuralgia, hypersensitivity (to climate, noise, people, and any sensory stimuli), insomnia, loss of appetite, dysphagia, disturbances of the secretions, muscle tremors, and general depression. (Beard [1894], pp. 34-36) (Ellenberger [1970], p. 242) It was explained as being a result of exhaustion of the central nervous system's energy reserves, which Beard attributed to American life. By this he referred to the climate extremes, and America's liberty, the need for increased mental work, speed in work, mental preparedness and a reduction of the time it takes to do all these things. (Ellenberger [1970], p. 243) Typically, it was associated with upper class individuals in sedentary employment.

In the late 1800s, it became a popular diagnosis that began to include a wide variety of symptoms including complaints of weakness, dizziness and fainting. This led

to rest cures, especially for women, who were the gender primarily diagnosed with this condition at that time. Neurasthenia was also a common diagnosis in World War I, but its use declined a decade later.

Janet

Pierre Janet was one of the first people in the history of psychiatry to draw a connection between events in the patient's past life and his or her present day complaint. He also coined the terms 'dissociation' and 'subconscious'. He studied under Jean-Martin Charcot<sup>8</sup> at the psychological laboratory in the Salpêtrière Hospital, in Paris.

In several ways, he preceded Sigmund Freud. Many consider Janet, rather than Freud, the true 'founder' of psychoanalysis and psychotherapy. As Ellenberger points out, few people realise that it was Janet who first coined the term subconscious. (Ellenberger [1970], p. 406) Janet thus differentiated between levels of consciousness. Since the study of elementary forms of activity was a study of basic forms of sensibility and consciousness, he therewith emphasized the unity of body and mind.

Babinski<sup>9</sup>, while formerly loyal to Charcot, invested exclusively in the neurological portion of Charcot's teaching. He then began to regard hysteria as essentially the result

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<sup>8</sup> The founder of modern neurology and the foremost neurologist of late nineteenth-century France. He was also a teacher to Freud and Babinski, among others. He was famous for his hypnosis and study of Hysteria.

<sup>9</sup> French Neurologist who was a favourite student of Charcot in the Salpêtrière.

of suggestion, and even as a form of malingering-- a disorder able to disappear entirely by the influence of persuasion. Babinski believed that hysteria was separate from other organic diseases and coined the term 'pithiatisme'<sup>10</sup>

Janet began with the study of human activity in its simplest and most rudimentary forms. His goal was to demonstrate that this elementary activity forms psychological automatism: automatic because it is regular and predetermined, and psychological because it is accompanied by sensibility and consciousness. (Van der Hart and Horst [1989], p. 4) In presenting his model of the mind, Janet distinguished between two different ways in which the mind functions: activities that preserve and reproduce the past and activities which are directed towards synthesis and creation (i.e., integration)

Janet felt psychological automatism was best studied in individuals who exhibit it in extreme degrees. These extreme degrees were psychiatric patients suffering from hysteria. In them, the integrative activity is significantly diminished, causing the development of symptoms that appear as magnifications of the activity designed to preserve and reproduce the past. Janet discovered that most of them suffered from unresolved (and therefore, dissociated) traumatic memories. In this population he studied catalepsy, paralysis, anesthesia, contractures, monoideic and polyideic somnambulisms, and successive existences (as he then termed multiple personalities). His analysis represented a departure from classical psychology which makes the distinction between intellect, affect and will.

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<sup>10</sup> Another name for Hysteria, or emotional excitability and disturbances of the psychic, sensory, vasomotor, and visceral functions without an organic basis.

## Freud's Beginnings

Sigmund Freud started out working in medicine under a Darwinist Zoology Professor (Karl Klaus) at the University of Vienna. After 1874, he was taught by German physiologist Ernst Wilhelm von Brücke who had been working in coordination with physicist Hermann von Helmholtz, who was one of the formulators of the first law of thermodynamics. Together these two professors supposed that all living organisms are energy-systems which are also governed by the principle of energy conservation. Ernst Wilhelm von Brücke who was not only one of Freud's lecturers, but also his first year supervisor, greatly influenced him in his later conception of the psychological structures of the mind.

In October 1885 through February 1886 Freud went to Paris to study with Jean Martin Charcot, a world-renowned neurologist, hypnotist, and specialist in the study and treatment of hysteria. Freud later remembered those four months with Charcot as central in turning him toward the practice of medical psychopathology rather than a less financially promising career in research neurology. (Aguayo [1986], pp. 223-260) Charcot specialised in the study of hysteria and its susceptibility to hypnosis.

Applying to hysteria the method of observation and methodical description borrowed from neurology, Charcot's aim was to lay down the universal rules of the great hysterical attack. By means of hypnosis, Charcot induced a hysterical attack in his patients meeting his



standards. The trouble was that his patients, like his collaborators, were more inclined to confirm the Master's insights than undertake true scientific search.

(AROPA [2008])

He frequently demonstrated this with his patients on stage in front of an audience. His work and the ideas and practice of hypnotherapy greatly influenced Freud in his practice. This influence led Freud to the idea of the unconscious by showing him that even when the conscious mind was shut down there was still something working in the mind. This was what produced the theory of the unconscious. Effecting this part of the mind, he theorised, would also effect the waking, conscious, state.

In 1886 Freud returned to Austria and opened his own neurological practice where he started out experimenting with using hypnosis on his neurotic patients. Freud eventually discontinued this form of treatment because it seemed to him ineffective and instead began a treatment where the patient would talk through his or her problems. He retained the same doctor-patient positioning and atmosphere that was used in treatment with hypnotherapy, but instead of hypnotherapy allowed his patients to express what they felt was wrong with them.

This came to be known as the "talking cure". The ultimate goal of this "talking cure" was to locate and release energy that had become bound in the unconscious mind resulting in symptoms. The idea that there was a system of energy which was both able to flow and be blocked became an important aspect to Freud's theory and can be seen as having stemmed from his early years in medical school as well as his friendship with

Josef Breuer. This combination of thought and practice was the beginning of what would later be known as Psychoanalysis.

Freud worked closely with Josef Breuer, an Austrian physician who had great interest in the studies of hysteria, the relation to fantasy, and the idea of catharsis. Freud was greatly influenced by his work in his early practice and they often discussed cases together. Breuer had found in his work that adults were often effected by traumas that occurred to them in childhood. Freud took this idea and added in his theories that early childhood sexual experiences could be the root of such traumas. (Gay [1988], pp. 32-33)

A question of the emergence of sexual difference is found in Juliet Mitchell's 1966 article "On Freud and the Distinction Between the Sexes". (Mitchell [1966], p. 221) She points out the ambiguity of the terms 'masculine' and 'feminine' in Freud. In a footnote to the "Three Essays on Sexuality" dated 1915, Freud wrote:

It is essential to realise that the concepts of 'masculine' and 'feminine', whose meaning seems so unambiguous to ordinary people, are among the most confused that occur in science. It is possible to distinguish at least three uses.

(Freud [1915], p. 219)

She points out that as Freud reworked the question of anatomical or psychological bases of sexual identity he was moving—in 1925—to key restructurings of his theory of the Oedipal relationship.

In Freud's 1925 essay, "Some Psychological Consequences of the Anatomical

Distinction Between the Sexes”, he admits that all his earliest work had taken the male sex as the model for normal psychological development. In this essay Freud revises his theory and presents a psychological development for the female. He established the pre-Oedipal phase, which was particularly important for the development of the feminine structure. The Oedipus complex in the female is a secondary formation to the pre-Oedipal relationship.

Both males and females share the identifications and attachments of the pre-Oedipal phase and so go through the Oedipus complex at an even rate, but what is important is how they go about this progression. Both sexes love their mother and only abandon her at the intervention of their father. The father acts as a boundary to prevent incestuous relations. In the Oedipus complex the male child is expected to retain the love of his mother by refusing to identify with her while the female child is expected to identify with the mother. Up to this point the development was symmetrical, but we can now see it is asymmetrical. In this revised theory this relationship focuses more on the love of the mother than on the male genitals or lack thereof. The key is how each sex deals with the love relationship to the mother.

#### Freud Theory: Oedipal Mapping

After working with female hysterical patients Freud came up with the 'Seduction Theory' in 1893 to explain all the memories of seduction in the patients' childhoods. Though at first he believed these memories of his hysterical patients to be

true and actual events in their lives, later, after finding that so many patients could recall such a scene, he began to hypothesise that these recollections were imagined due to a wish held deep within the patient's unconscious. This wish later led Freud to the discovery of the Oedipus complex. The seduction theory was first used in relation to hysteric patients, but later Freud tried to expand his theory to generally explain the psychoneuroses. This expansion began to explain how repression came about in the patient.

Repression was hypothesised by Freud to take place in two stages. The first stage was when the patient was sexually immature and as a result could not experience physical arousal. This left the young patient experiencing something that he or she did not have the ability to process. Therefore the experience is not repressed in this first stage, but remains as a residue that becomes cohesive to a like occurrence later on. The second stage takes place when the patient is sexually mature (after puberty). At some point in the patient's life a similar event of sexual arousal will occur and the patient, this time, will have the ability to process the experience physically. As a result, of the prior event plus the current event, the impact of the experience is traumatic and therefore becomes repressed. The repression is a way for the person to cope with and bind the mental anxiety of the previous event. These two stages are later termed as primary and secondary repression.

In Freud's seduction theory he also notes that the unconscious cannot distinguish between what is real and what is fantasy. He says, in his letters to Fleiss, "There are no indications of reality in the unconscious, so that one cannot distinguish between truth and fiction that has been cathected with affect." (Freud [1897], p. 260)

From this Freud concluded that fantasy and the organisation of that fantasy plays a major role in the development of the patient.

He discovered from his cases and also from his own self-analysis that children, although sexually immature, do still have feelings, thoughts, fantasies, and sensations that are all sexual in nature. Freud now had the 'theory of infantile sexuality' to explain his constant findings of seduction in relation to the parent child relationship. In this theory Freud postulated that the child desires his or her parents and from the beginning is submerged into a world filled with sexual experiences which the child cannot at this point fully process. The child sucks the breast, is touched while naked on the erogenous zones, and is even praised for being naked by its caregivers. If it is in the nature of the human to experience these things as sexual then, although the child is sexually immature, he or she does experience the same sexual arousal that an adult would. The child experiences fantasies and feelings and even stimulates its own genitals prior to maturity. Infantile sexuality according to Quinodoz (the author of *Reading Freud*) "Comprises a whole series of transformations in mind and body which continue until puberty and adolescence." (Quinodoz [2004], p. 23)

Freud started his own self-analysis in 1896 not long after his own father died. His analysis was mainly based on his own dreams and memories. He writes in a letter to Fleiss dated in 1897 that he recalls wanting to see his mother naked and that in this memory something was aroused in him that produced a jealousy towards his younger brother. He says: "Later (between two and two and a half years) my libido towards matrem was awakened, namely, on the occasion of a journey with her from Leipzig to Vienna, during which we must have spent the night together and there must have been

an opportunity of seeing her nudam." (Freud [1985], p. 286) Later in the letter Freud says, "I greeted my one-year-younger brother with adverse wishes and genuine childhood jealousy." One week after writing this to Fleiss, Freud would call this the Oedipus complex. Freud says:

My self-analysis is in fact the most essential thing I have at present and promises to become of the greatest value to me if it reaches its end. [...] I have found, in my own case too, [the phenomenon of] being in love with my mother and jealous of my father, and I now consider it a universal event in early childhood [...]. If this is so, we can understand the gripping power of Oedipus Rex, in spite of all the objections that reason raises against the presupposition of fate."

(Freud [1985], p. 263)

The discovery of the Oedipus complex created a new understanding of the way that a child develops in relation to sexuality and identification. This concept organises the mental apparatus and prepares them for maturity. The theory itself took some time to fully develop for Freud. The first inklings of an idea started in 1897 during a period of his own self-analysis where he recalls in a letter to Fleiss that he had desired his mother. It was developed further in his writings on *The Interpretation of Dreams* in 1900, the 'Dora' case in 1905, and the Case of 'Little Hans' in 1909. It isn't written explicitly into his theory until much later when he made further additions to the "Three Essays on the Theory of Sexuality" after 1905. (Freud [1905]) The 'little Hans' case provided an

example of infantile sexuality for Freud, making the idea of the Oedipus complex more concrete in his construction of the theory of sexual development in children.

Before he comes to the idea of the Oedipus complex he starts off by trying to generally describe infantile sexuality and, in that, normal sexuality. In his "Three Essays on the Theory of Sexuality" Freud speaks about the infantile origins of perversion "basing his argument on the notion of instinctual drives and objects - concepts which later proved to be decisive for psychoanalysis." (Quinodoz [2004], p. 59) In this text Freud discusses the sexual object and the sexual aim. The object is the person that the child is attracted to and the aim is the act that the child is driven to. In childhood perversion Freud was trying to show that these elements of sexuality could be deviated to produce a perverse sexuality in adulthood.

When Freud discussed the deviation in sexual object he spoke of the various forms of homosexuality and perversion, which at the time was considered degenerate, or of the person's natural inclination. Natural inclinations were also considered by Freud to be of a bisexual nature. By this he meant that present from birth the human being has both masculine and feminine tendencies and traits that develop with the child through to adulthood shaping his or her object choice. For Freud, infantile sexuality is autoerotic while in contrast, puberty deals with an object choice.

The aim for the child is compiled of drives that manifest in the erogenous zones of the body. As the child matures these drives unify into what is known as "genital maturity". In the case of perversion Freud suggests that the drives do not unify and that the erogenous zones are fragmented. He also suggested that the neurotic was the opposite of the perverted patient in that one, the neurotic, has a unified sexual drive

and the other, the pervert, has a fragmented one. The fact that the neurotic does not have the drives in a fragmented state leads the neurotic to have symptoms and to only imagine perverted situations rather than acting on them. While the pervert lacks neurotic symptoms, due to the fragmentation of the drives, and therefore has the ability to indulge in sexually perverse behaviour and enjoy it. Perversion for Freud is a normal formation. He felt that during normal development, before the drives are unified, hints of perversion could be seen in children. He tells us in his 1905 paper entitled the "Three Essays on Sexuality" that "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 drives can emerge." (Freud, [1905], p. 172)

Infantile amnesia causes one to forget the earliest memories of one's life and therefore at the time people didn't recognise that children had a sexuality. At the time it was a widely held belief that the sexual drive only started at puberty when the body had also matured. Freud thought that this forgetfulness was caused by repression of the idea due to the conflicts that were caused by this lack of maturity of the body. Freud hypothesised that at the age of three to four years of age a child would begin to show signs of the sexual drive being present. This phenomenon was demonstrated by the later case of 'Little Hans'. Freud also felt that once these signs emerged, social restrictions and internal conflicts would cause the ideas to soon be repressed. In the latency period sexual aim is diverted to other things such as achievement or other culturally acceptable means. This is what is called sublimation of the drive. This is what a neurotic sexual development would seem like outwardly. Repression and sublimation



mark the organisation of the drives.

When Freud discovered that children have erogenous zones even in early childhood he came to the conclusion that children were "polymorphously perverse". This meant that children have a number of erogenous zones that can be stimulated to cause enjoyment in the child from the very beginning of its life. This is an early stage of the psychosexual development prior to the genital organisation of these zones. This is why Freud terms this "perverse". The unconscious questioning that a child has about sex and where babies come from also proved to Freud that children do have a sexual drive although not yet fully organised.

The 'Little Hans' case was central in the observation that children have a sexual drive. The observations given by Hans' father were invaluable in the work Freud was doing on the theory of infantile sexuality. Not only did the case show polymorphous perversion, but it also showed the development of a normal four-year-old boy's sexuality in relation to the Oedipus complex. This case was for Freud, a form of investigation of his theories of infantile sexuality.

In 1912, Freud began to see that affections, or feelings, influenced the object choice when he wrote "The Dynamics of Transference". (Freud [1912], p. 97) Here he became interested in love, ambivalence, hate and sensual affections in relation to the object. Love and hate were for him characterised by pre-genital object relations and sensual affections were linked to an object choice in puberty. Starting from the latency period, children attribute a sexual love to the one(s) who care for them and this is later transferred to other object choices when they are older. Quinodoz says, "For the sensual current of object choice to operate the child has to give up the early incestuous

love-objects represented by the father and mother because of the barrier against incest, and direct his or her object choice towards other people." (Quinodoz [2004], p. 62) Freud felt that "Even a person who is fortunate enough to avoid an incestuous fixation of his libido does not entirely escape its influence." (Freud, [1905], p. 228) Even after the barrier is placed to protect the child from incestuous object choice he or she will never be able to shake the impact of that first love - mother or father. From the moment the child seeks another object he or she will be doomed to find objects that are similar to the primary choice of the mother and father.

In 1915 Freud furthered his work with infantile sexuality by introducing and explaining more in depth the phases a child would go through in order to reach an organised state of the sex drive or what is now known as 'libido'. Each phase of the development corresponded to different erogenous zones that are at the time the dominant zone in the developmental phase. The original phases were known as the oral, anal-sadistic, and genital phases. By 1923 Freud added another stage called the phallic stage that was placed between the anal and genital phases. The phallic stage is only located around one organ - the penis - and is present from the beginning of sexual organisation right through to the very end. Freud considered the mental development of sexual organisation a sort of evolutionary break through. These phases are all states of organisation which the child goes through until he or she reaches a genital or sexual maturity. These stages do not progress directly from the lowest organisation to the next highest until complete, and the stages often overlap if they do progress in this way. These stages also leave permanent marks in the patient's psyche and therefore even when the patient moves on to another stage there is still a trace of the previous

stage present in their unconscious mind. Problems, or complexes, may also occur in each stage, which can then produce certain symptoms in the patient's adult life. Freud thought that true sexual maturity was very rarely attained due to these complexes. Freud tells us: "Every pathological disorder of sexual life is rightly to be regarded as an inhibition in development." (Freud [1905], p, 208)

Freud then had the idea that there were libidinal phases that linked to certain objects that were in turn related to the specific erogenous zones. Once the component drives become integrated the child then has an object choice or an object to which he or she directs his or her sexual drive. Whole object choice is characterised by the genital phase and of the completion of sexual maturity.

Part of the completion of sexual maturity was found in what in 1910 Freud termed as the Oedipus complex.

You will all know the Greek legend of King Oedipus, who was destined by fate to kill his father and take his mother to wife, who did everything possible to escape the oracle's decree and punished himself by blinding when he learned that he had none the less unwittingly committed both these crimes.

(Freud [1917], p. 330)

The case of 'Little Hans' also portrays the process of this complex in a child. The complex was originally worked out for a boy child, but later in 1931 Freud argued that there was also an Oedipus complex for girls albeit more complex.

In his theory the male child becomes sexually attracted to his mother. Gay explains to us how this theory works:

The process of arriving at an object, which plays an important role part in mental life, takes place alongside of the organisation of the libido. After the stage of autoerotism, the first love-object in the case of both sexes is the mother; and it seems probable that to begin with a child does not distinguish its mother's organ of nutrition from its own body. Later, but still in the first years of infancy, the relation, known as the Oedipus complex becomes established: boys concentrate their sexual wishes upon their mother and develop hostile impulses against their father as being a rival, while girls adopt an analogous attitude. All of the different variations and consequences of the Oedipus complex are important; and the innately bisexual constitution of human beings makes itself felt and increases the number of simultaneously active tendencies.

(Gay [1989], p. 22)

The unconscious desire for little boys to replace their father's position and have a love relationship with their mother was the first to be explained by Freud and the idea came to him as early as 1897 when writing to Fleiss. He hypothesised that the boy first fell in love with the mother and was at odds with the father vying for the mother's love. As a

result the boy child would then wish to kill, or get rid of his father in order to have his mother all to his self. This occurred, he believed, from between three to five years of age. This competition for the mother's love brings about a jealousy and a hatred for the father. The child then begins to fear that the father will become aware of the feelings and wishes he has for his own mother and as a result castrate him (as he appears to have done to the mother) to prevent any sort of relationship from happening. Due to the anxiety caused by the threat of castration the child then gives up his desire for the mother and reinvests his libidinal energy into being like the father. This strong identification marks the entrance of the latency period. Once the child comes to this point he internalises the law or rule given to him by his father that "you can have any other woman, except your mother". This internalisation results in the formation of the super-ego and a more socially acceptable relationship with his mother. The male version of the Oedipus complex is called the 'positive' form.

The female form of the Oedipus complex, or negative Oedipus complex as it was later known, was more difficult for Freud to describe. He showed that the girl takes a more direct path to the object of her desire. Like the boy, the girl has an initial love for her mother. This is a sexual and therefore a homosexual desire for the mother. Later the girl child shifts her love interest from the mother to the father. This is because the girl child discovers that the mother is already castrated and has nothing to offer her. She then learns that in order to possess the phallus she must place her sexual interest in the father - much like the mother has done. An identification occurs for the girl child, who has no penis, to the mother, who also has no penis, and a love for the father takes over. Unlike in the positive Oedipus complex the female never expresses a wish to kill or

get rid of the mother, but continues to love her and identify with her throughout sexual maturity. What is essential here is the disappointment involved in finding out that the mother doesn't have a penis. This shock produces in the child a shift and an internalisation that results in super-ego formation.

Freud eventually amended this idea to produce what was called the complete Oedipus complex. This encompassed the ideas of identification and bisexuality into his original theory. The idea of bisexuality in children remained firm in his theories of psychosexual development. The masculine & feminine dispositions are hypothesised to exist in everyone according to Freud and it is at the very point of infantile sexuality that the prominent disposition forms. From early childhood to the point at which a child adopts its final object choice one of the two dispositions will become prominent. In the idea of the 'complete Oedipus complex' Freud no longer sets aside the negative complex for the girl and the positive for the boy, but suggests that a boy could progress through a negative Oedipus complex just as a girl could progress through a positive one. Each one produces identification with a parent of a certain sex, but neither is confined to one identification as a result of their biological sex. For the positive it results in a masculine identification and for the negative it results in a feminine one. The idea is that in each individual there is a potential for both situations and it is the path of the Oedipus complex that decides the outcome.

The loss, and threats of loss, experienced by the child in the navigation of the Oedipus complex is known as the castration complex. Again, the best account of the shifting forms of the castration complex in Freud is found in Juliet Mitchell's article "Freud and Lacan: Psychoanalytic Theories of Sexual Difference". (Mitchell [1966], p.

248)

The castration Complex, introduced by Freud in his 1915 Essay "Three Essays on Sexuality"; marks a turning point for Freud and the conflicting view other analysts have in relation to his. The castration complex was first discussed in the 1908 essay "On the Sexual Theories of Children". From there it evolved and was crucial to the analysis of 'Little Hans' case in 1909. By 1914 Freud was still not sure that the castration complex was a universal occurrence and wrote in "On Narcissism: An Introduction" that: "These are themes which I propose to leave on one side, as an important field of work which still awaits exploration. The most significant portion of it however, can be singled out in the shape of the 'castration complex'. (Freud [1914], p. 92) By 1915 Freud begins to assume it is more and more central to the theory and by 1924 that status is achieved in his paper "The Dissolution of the 'Oedipus Complex'." (Freud [1924], p. 173) Freud wrote "The castration complex is the profoundest importance in the formation alike of character and of neurosis". (Freud [1925], p. 37)

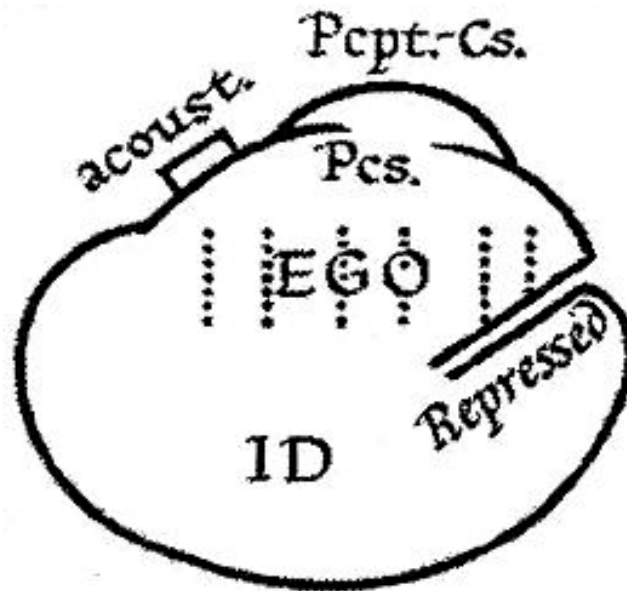
Mitchell says "When Freud started to elevate the concept of the castration to its theoretical heights, resistance started." (Mitchell [1966], p. 265) Resistance to this notion of castration can be seen as one of the reasons for adequate theories of phobia being relatively dormant for so long in the Freudian tradition.

So arising from this period of redevelopment in the 1920's, the next step for Freud was to understand more about how these developments were housed in the mind. He begins to step away from his biological background and focus completely on the psychical idea of the mind. Freud devised topologies to help express how the mental apparatus was made up. It was separated into the ego, id, and the super-ego as

well as the perception consciousness (Pcpt.-Cs) and the preconscious. (See Figure 1)

Figure 1

Topology of the Mental Apparatus



(Freud [1923], p. 24)

The id is the portion of the psychical apparatus that contains the basic drives. It is in an infantile state meaning that it remains unorganised until the function of the super-ego develops in the child. Prior to this the id is in a state of self-satisfaction and acts in relation to the 'pleasure principle'. Reality is not its concern, but rather it wishes above all to produce instant gratification by any means. This component of the apparatus is the reservoir for the libido and retains all our basic drives. These basic drives were divided into two categories - the life drive (Eros) and the death drive (Thanatos). The life drive is represented in our drives to sustain us in a pleasurable way. Eating and sex are two of the components of this drive. The death drive is the unconscious wish to kill us by pleasurable means. It can also be the mode in which we



detach from the world and in which we see our real miserable existence.

The ego on the other hand acts in accordance to the 'reality principle'. It works with the id in order to get what it needs based on reality rather than fantasy. For Freud the 'ego' formed what we would consider conscious thought. Freud devises this to distinguish between thoughts that are conscious and thoughts that we would be unaware of or that would remain unconscious. He soon found that the ego not only dealt in what is conscious, but also put up resistance to disclosing things that had been repressed. From this Freud realised that the ego was not only the conscious part of the psychological apparatus, it was in fact unconscious as well. One part of the ego picks up on reality in order to help to organise thoughts around that reality.

The ego is that part of the id which has been modified by the direct influence of the external world ... The ego represents what may be called reason and common sense, in contrast to the id, which contains the passions ... in its relation to the id it is like a man on horseback, who has to hold in check the superior strength of the horse; with this difference, that the rider tries to do so with his own strength, while the ego uses borrowed forces.

(Freud [1923], p. 25)

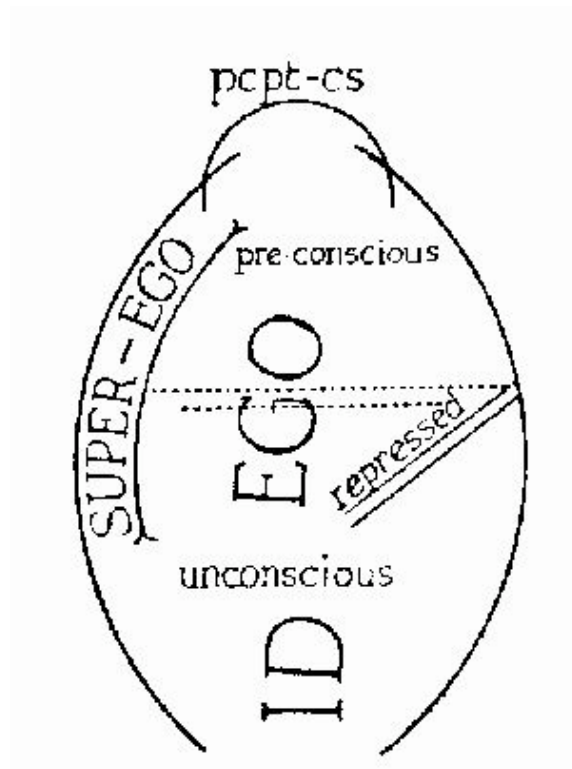
The super-ego is the exact opposite of the id. It strives to punish self-gratifying behaviour with guilt. It also helps us to gauge what we should do in order to fit in socially. Freud suggested that this was an internalisation of the father and that this

internal father acts as an inhibitor of inappropriate things. The Super-ego can be described as 'morals'. The super-ego, like the ego, is started in a time when we experience a natural state of helplessness as infants and eventually is solidified through the Oedipus complex. Freud said, "The ego-ideal (superego) is...the heir of the Oedipus Complex". (Freud [1923], p. 36) This means that the super-ego is forged here at the point of the Oedipus complex.

This then led Freud to investigate the complete apparatus. Some ten years later Freud made alterations to his original topology of the mental apparatus in 1932 in his "New Introductory Lectures on Psychoanalysis". There are at least five differences. The most obvious is that the superego is now shown whereas before it was not. (Burgoyne [2000], p. 160) (See Figure 2) This altered topology depicts the proportion of each of the three levels of consciousness in relation to the mind. The consciousness was on the top or surface level of the topology, the perception consciousness to be in the middle and the unconscious, which was the largest portion, was on the bottom. The metaphor is that the unconscious is like an iceberg; there is always a portion on the surface of the water for all to see, but the vast majority of the iceberg is located deep below the surface untouched by human eyes.

Figure 2

Second Topology of the Mental Apparatus



(Freud [1933], p. 78)

Freud, in his paper on "A Question of Lay Analysis", describes the mental apparatus as an instrument of many parts, also known as agencies, which perform in different ways.

He says:

We picture the unknown apparatus which serves the activities of the mind as being really like an instrument constructed of several parts (which we speak of as 'agencies'), each of which performs a particular function and which have a fixed spatial relation to one another: it being understood that by 'spatial relation' -- 'in front of'

and 'behind', 'superficial' and 'deep' -- we merely mean in the first instance a representation of the regular succession of the functions.

(Freud [1926], p. 194)

This description was meant as a part of an introduction to the concept of psychoanalysis. It was an informal piece on behalf of a friend of his who was accused of practicing without a license. Freud felt that psychoanalysis need not be restricted to physicians as long as the person in question had appropriately trained as an analyst. It is, however, pertinent to the above topology explaining in Freud's own words what he considered to be the mental apparatus.

Later on, in "An Outline of Psychoanalysis" (1940), Freud says, regarding the same topic, that:

We assume that mental life is the function of an apparatus to which we ascribe the characteristics of being extended in space and of being made up of several portions [i.e. the id, ego, and super-ego]

(Freud [1940], p. 145)

This tells us that Freud believed these agencies worked together to produce a manifestation of effects, be it symptoms, defenses, or otherwise, that we consider to be the intrapsychic workings of the mind.

The idea of phobia for Freud wasn't a clear-cut issue, and took many forms. In

1893, at the same time as seduction theory, Freud proposed the idea of an anxiety neurosis in letters to Fleiss in order to produce a distinction between neurasthenia and anxiety neurosis. This was an essential idea used by Freud to distinguish neurasthenia from other forms of hysteria and the related symptoms of anxiety. The distinction was on the basis of the predominance of the symptoms of anxiety in anxiety hysteria rather than a general neural exhaustion as seen in neurasthenia. Without this distinction the two diagnoses could easily be confused and therefore not treated appropriately. Freud was one of the first physicians to propose that this diagnosis was being used too generally and therefore had to distinguish it from other forms of neurosis. (Laplanche & Pontalis [2004], p. 265)

Freud did think that neurasthenia was a form of neurosis, but that the symptoms were too general. The symptoms that distinguished anxiety neurosis included a "chronic anxious expectation, attacks of anxiety, or somatic equivalents" (such as the reaction of panic attacks in the body). (Laplanche & Pontalis [2004], p. 38)

The causation of this syndrome was considered by Freud to be based in sexual excitation that was transformed directly into anxiety without any physical mediation. Against the background of general irritability he suggests that different kinds of anxiety appear. Chronic anxiousness becomes bound to any ideational content that is able to support it. Pure anxiety attacks are accompanied or replaced by various somatic equivalents and phobic symptoms have affect (anxiety) bound to an idea or object, but to an idea which cannot be identified as a symbolic substitute for another repressed idea. For Freud neurasthenia was also considered to be part of actual neurosis, as was anxiety neurosis, making the distinction between the two even more difficult.

This was what Freud would consider an actual neurosis a year later in 1894. Freud proposed that there were two forms of neurosis - psychoneurosis and actual neurosis. Freud made clear the difference between these two categories. Actual neurosis's origin is found in the present symptom rather than in repressed past experiences. The symptom is a direct outcome of an absence or inadequate sexual satisfaction. This term was used first to set anxiety neurosis apart from neurasthenia. The idea is that sexual excitement is not mediated by the body or an object and so is turned directly into anxiety. (Laplanche & Pontalis [1973], p. 10) The symptoms are not based in the symbolic therefore Freud thought that the actual neurosis could not be treated with psychoanalysis because the symptoms have no meaning. Psychoneurosis was considered the opposite of actual neurosis where the symptoms were symbolically invested and often expressed infantile conflicts. (Laplanche & Pontalis [1973], p. 369) Also the anxiety is bound to an object in the psychoneurosis. Freud saw these as a progressive state where an actual neurosis often turned into a psychoneurosis.

In 1908 anxiety hysteria was introduced followed by the case of 'Little Hans'. Wilhelm Stekel further expanded upon this in 1908 in his paper on "Nervous Anxiety-States and their Treatment". Freud says that Stekel was one of the first colleagues that he imparted the knowledge of psychoanalysis to. Freud very modestly says in the foreword to Stekel's work:

I am glad to take the responsibility for his [Wilhelm Stekel's] work in the sense which I have just indicated, I think it is only right to declare explicitly that my direct influence upon the volume on nervous states of anxiety

which lies before us has been a very slight one... My share has been limited to proposing the use of the term 'Anxiety Hysteria'.

(Freud [1908], p. 250)

This was his first publication of the term, but he went more into detail about this type of hysteria in the case of 'Little Hans' which was published soon after.

Anxiety hysteria's central symptom was phobia. Phobia has a structural resemblance to hysteria. (Freud [1909], p. 115) Compton says, in his first paper on "The Psychoanalytic View of Phobia", that anxiety hysteria is in fact structurally similar to hysteria except for one important point; "The libido liberated from the repressed pathogenic material is not converted into "somatic innervations" but is, rather "set free in the shape of anxiety." (Compton [1992], p. 215) He furthers by saying that the anxiety is bound by the function of the phobia rather than converted as one would find in hysteria.

The job of repression is to separate affect from idea. In anxiety hysteria the libido is liberated from the pathogenic material by repression that is not converted but set free in the shape of anxiety. The anxiety hysteric's mind is always trying to find a path to send this freed anxiety down and eventually attaches it to an object of phobia. The 'Little Hans' case beautifully illustrates this phenomenon and Freud used this case to propose that there could be a neurosis based around phobia (and in that it could be a clinical entity). (Freud [1909], p. 115) Freud also says "repression corresponds to an attempt at flight by the ego from the libido which is felt as a danger." (Freud [1917], p.

410) Freud means that this danger may have been misrepresented as the libido in the unconscious and once that misrepresented element is present the ego responds by preparing the body in a 'fight or flight' response.

Freud's first theories on anxiety are that phobia is seen merely as a symptom. Pre-1900's Freud disagreed with Charcot in that agoraphobia was hereditary in nature, but instead posited that: "The more frequent cause of agoraphobia, as well as most other phobias, lies not in heredity but in abnormalities of sexual life." (Freud [1887], p. 139) At this time Freud was also attempting to establish the diagnostic status of hysteria, which at the time was held as a form of degeneracy. (Compton [1992], p. 215) Freud felt that traumatic experiences were held in the hysteric patient and were not released by expressing the trauma (abreacted) in some way. This also held true for phobias.

Freud felt, at this time, that some phobias were formed due to traumas that were experienced. Therefore phobia resulted as a symptom like any other hysterical symptom. Freud thought there were certain phobias that were inherent in the nature of all human beings. Those would be the primal fears of things such as snakes, thunderstorms, the dark, etc. Phobias that were specific were what he classed as those caused by traumas.

In 1894 Freud differentiated phobias into three classes: 'typical', 'hysterical', and 'obsessional'. Typical phobias have no repressed idea and cannot be traced back to any psychological sexual mechanism. Agoraphobia was classed into this category. Hysterical phobias resulted from traumas of sexual nature, which have not been properly abreacted if at all. Freud felt that the obsessional class caused the majority of phobias.



This class detaches affect from the ideational content displacing it onto some other ideational content seemingly unrelated to the affect. Freud calls this 'transposition of affect', which is most commonly found in cases of obsessional neurosis. (Freud [1895], p. 83)

By 1895 Freud wrote a paper on the comparison of these two phenomena called "Obsessions and Phobias: Their Psychological Mechanism And Their Aetiology". In this paper he clearly defines what is considered obsession and phobia by distinguishing the constant state of anxiety found in phobias from the mix of affect found in obsessions. In this paper he also alludes to phobia being akin to hysteria by saying that some phobias and obsessions stem from a traumatic event in the person's life such as one would find in his theory of hysteria at this time. (Freud [1895], p. 80)

Up until this point, Freud's idea of anxiety seems to have been influenced by his medical training rather than by a new theory. He felt that anxiety had a bodily origin rather than a mental one. He looked on panic attacks as having a mainly somatic symptomology much like that of Grave's Disease<sup>11</sup> after it had been found to be endocrinological rather than mental.

Freud also wrote a paper entitled: "On the Grounds for Detaching a Particular Syndrome from Neurasthenia Under the Description 'Anxiety Neurosis'" in 1895. This paper took up the issue of how to separate anxiety-based symptoms in patients from

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<sup>11</sup> A syndrome in which there are excessive quantities of thyroid hormones in the system causing exophthalmos, goiters, and sometimes skin diseases. It is now known to be an autoimmune disease; most patients with this condition have antibodies against thyroglobulin, thyroid microsomes, and often some components of the thyroid cell membrane. Other symptoms and signs include hand tremors, nausea, diarrhoea, increased metabolism, heavy sweating, nervous irritability, skin changes, hyperglycaemia, anaemia, and tachycardia. Ten percent of all those effected by this syndrome will gain weight or have secondary effects related to thyroid dysfunction. (Merck [1999], p. 2377)

what was at the time a monster of symptoms – neurasthenia.

Later he printed “A Reply to Criticisms of My Paper on Anxiety Neurosis” also in 1895. In this paper Freud stated that phobias are more than their component physical symptoms. At this point in his work Freud was attempting to produce a diagnostic category called the ‘neuroses’. Neurosis was made of two groupings: ‘neuropsychoses of defense’ and ‘actual neurosis’. The neuropsychoses included what would be classed as hysteria, obsessional, and some cases of paranoia. The actual neuroses were made up of neurasthenia and anxiety neurosis.

However, phobias occurred in both groups of the neuroses causing a slight problem in the theory’s solidity. Therefore Freud saw phobias at this time as simply a symptom rather than a diagnostic category in and of itself. Any of the neuroses could have a phobia, but the source and use of the phobia seemed different in each category of neurosis.

In 1907 Freud published “The Sexual Enlightenment of Children” where the theory of infantile sexual development was explored. After the discovery of infantile sexuality and founding a new theory called psychoanalysis Freud began to slowly see the phobia as something more. The method of psychoanalysis was at this point new and yet to be fully developed.

The analysis of a five-year-old boy was published in 1909, before Freud postulated an aggressive drive, before the second theory of anxiety and the formulation of the structural theory.

(Ornstein [1992], p 87)

The earliest portion of Hans' case ("Analysis of a Phobia in a Five Year Old Boy" [1908]) was previously published in Freud's papers "The Sexual Enlightenment of Children" (1907) and "On the Sexual Theories of Children" (1908). (Freud [1908], pp. 137 & 208) The 1907 paper briefly discussed the case of 'Little Hans' and his infantile sexual curiosity. In the 1908 paper, published only a few months before the case itself, Freud produces a more in depth explanation of the sexual theories of children.

In the case of 'Little Hans' published in 1909 Freud's theories on anxiety hysteria were that it was not something that was wholly dependent on heredity. He says in this case that it has not yet been proven to him at this time that anxiety hysteria and either heredity, trauma, or both in combination produce the neuroses. Freud tells us, "It seems to me that of all the neurotic disorders it [anxiety hysteria] is the least dependent upon a special constitutional predisposition and that it is consequently the most easily acquired at any time of life." (Freud [1909], p. 116) This suggests that Freud leaned more towards anxiety hysteria being caused by traumas in the progression of life.

Freud says that the nature of the illness is a compromise between the drive and repression. (Freud [1909], p. 139) Hans' phobia produced a situation whereby he could stay home with his mother instead of leaving her to go out and in this his mother could show her desire for Hans. Perhaps in the early stages of phobia there is a discrepancy between allowing desire and separating from that desire. (Freud [1909], pp. 139-140) In effect, Hans was able to produce a circular situation where the desire could play out and he could also put a halt to it. His mother could coax with him and he could enjoy this,

but also he would have to face the punishment from the biting horse for those actions. Freud tells us "the true character of a neurotic disorder is exhibited in this two-fold result". (Freud [1909], p. 140) Showing that repression and desire were both trying to vie for dominance and that in anxiety hysteria the mechanism of repression is operative.

This view of anxiety didn't change for some time and was much the same as his pre-1900's view of anxiety. Anxiety at this point to Freud was something that started at some other point in time for the subject and that was coming back in a delayed fashion. In this anxiety was coming from somewhere else and the energy would be wrongly discharged onto an unrelated phobic object. The only addition to the earlier theories was that of binding anxiety. This was a secondary effect of having the energy that must be discharged, but has no content. This energy would then attach itself to an object via projecting content onto the object. This attaching effect produced a binding of the anxiety and a containing effect that the subject could then manage. (Nunberg & Federn [1962], pp. 175-182)

By 1917 Freud classed all predominantly phobic symptoms as an anxiety hysteria. Freud believed that free-floating anxieties were independent of what he classed as a phobia. (Freud [1917], p. 400)

Originally Freud viewed phobia as an "independent pathological process" which did not warrant a clinical entity in and of itself, but rather was merely a symptom found in neurosis and psychosis alike. Specifically, Freud felt that phobia was most commonly found in obsessional neurosis, schizophrenia, and anxiety neurosis. Obsessional and anxiety neuroses produced this symptom through the process of what Freud termed

actual neurosis, which progressed into a psychoneurosis. While in schizophrenia it is produced by the direct process of psychoneurosis.

In 1926 Freud introduced something he termed 'signal anxiety', which was a revision of his theory of anxiety based on his treatment of hysterical patients from 1895-1900. Signal anxiety was anxiety that could be in relation to a traumatic event and later misrepresent it by some element of that trauma. When the ego comes into contact with the misrepresentation it then signals a 'fight or flight' response as if the danger is real and present. It is considered a mode of defense by the ego and not a clinical structure in and of itself. This mode of defense gives a new ideation to the idea of anxiety. Instead of anxiety needing to be mastered (as it is not in anxiety hysteria) the anxiety is a form of trigger to protect the ego from a harmful encounter with something repressed. (Laplanche & Pontalis [2004], p. 422) This is a clearly outlined mode of defense that is omitted from the current, modern Freudian list of possible ego defenses. (See Chapter 1 Footnote, pp. 36)

Freud first mentions signal anxiety in "Inhibitions, Symptoms, and Anxiety" (1926) and it is usually referred to as his second theory of anxiety. (Freud [1926], p. 87-175) The first theory supposes that the energy system in the psychic apparatus is not able to contain or control the amount of energy and therefore it results in a free release of that energy which is eventually directed towards an object. The new theory doesn't suppose this and instead proposes that the anxiety has another function in the apparatus of the ego and that is to produce a mode of defense.

This new theory also supposes that the signal may produce a warning of a situation that has once occurred or not yet occurred and therefore producing an

avoidance of that situation all together. Signal anxiety is secondary to the first instance of anxiety that is called 'automatic anxiety'. Automatic anxiety was proposed at the same time in "Inhibitions, Symptoms, and Anxiety" as the reaction one has to exposure to a situation or object that produces anxiety. This exposure can be both internal or external but is not able to be controlled and therefore produces anxiety. Freud considers this to be a biological helplessness as well as a mental helplessness. Freud says, "In these two aspects, as an automatic phenomenon and as a rescuing signal, anxiety is seen to be a product of the infant's mental helplessness which is a natural counterpart of its biological helplessness." (Freud, [1909], p. 138) Freud goes on to say that the condition of the child changes little from intrauterine to post birth. The mother satisfied all biological needs pre-birth and continues to do so post-birth in a psychological sense. The mother eventually becomes an object to which the infant has a relation to and there is a great anxiety there for the loss of that object. This would be considered the first anxiety, but automatic anxiety is considered a spontaneous response to the stimulus that is too intense to be processed.

This second theory of anxiety however posed problems for the understanding of phobias for Freud. In *The New Introductory Lectures* (1933) he revises this issue posed by the second theory of anxiety. He says that at the conclusion of his earlier writing on anxiety he expressed the opinion that somehow his theory of phobia and anxiety did not fit in with one another. (Freud [1933], p. 84) He furthered by saying that something was missing to bring the whole thing together and that something was the theory that "the ego is the sole seat of anxiety." (Freud [1933], p. 85) and that "it was not repression that created the anxiety; the anxiety was there earlier; it was the anxiety that made the

repression.” (Freud [1933], p. 86) He also mentions that the real danger the child faces in the threat of castration is not always castration itself, but also the castration of love the mother has for her child. Freud tells us, “Fear of castration is not, of course, the only motive for repression: indeed it finds no place in women... Its place is taken in their sex by a fear of loss of love...” (Freud [1933], p. 87) So Freud answered the question of a female phobia given that there is no real penis to castrate. This also opens up the possibility for Freud that this is a factor in both sexes given that of the original anxiety of birth – separating from the mother. (Freud [1933], p. 87)

## Chapter 3

### Freud's Clinical Work with Phobia: The Little Hans Case

#### Introduction

Max Graf who was an avid follower of Freud's teachings brought the case of 'Little Hans' to Freud. Max Graff was the father of Herbert Graff who later became known as Hans in order to conceal his identity from those who would later read "A Case of Phobia in a Five-Year-Old-Boy" by Freud. The 'analysis' itself was only over a period of four months starting in January of 1908 and ending in May of the same year. Freud himself hardly saw Herbert Graf, but relied on the writings of his father, Max Graf, to tell him how the child was developing both mentally and sexually. Freud did offer suggestions and generally supervised the 'treatment' of Herbert from a distance. The 'treatment' consisted of observations of Herbert as he grew over the four-month period.

Included in the analysis were some memories and past events that had happened prior to Herbert's analysis. All of the accounts are from the perspective of Herbert's father, but Freud did contribute to the case by adding his current insights and understanding in regards to psychoanalysis. Freud, with permission from Max, published the analysis in the first issue of the *Psychoanalytic Review* a year later in 1909. This case was not only proof of how well psychoanalysis worked, but most importantly, for Freud, the proof that was needed to support his hypothesis of infantile sexuality and later the Oedipus complex. From this Freud also developed the diagnosis of anxiety



hysteria in order to distinguish it from cases of neurasthenia. This case was of crucial importance, in many ways, to the theory of psychoanalysis and also to the support and proof of Freud's most basic theories.

Freud took the observations of Max Graf and compiled them into a story that could be read in a more comprehensible fashion. Max Graf started by telling some events he could remember about Herbert, or 'Little Hans' as Freud called him, starting at the age of three prior to the onset of his phobic symptoms. After the accounts of Max Graf, Freud writes a commentary of how the work progressed. Freud pointed out that Hans was thinking on a sexual level regularly and that this must be indicative of some form of emerging sexuality. This supported the theory of infantile sexuality, which Freud put forward in 1905. This theory was based on the case history of his patients as well as his own self-analysis. The case only proved, in a more concrete way, that incorrectly recalled memories of adults could possibly be a clue to how a child forms his or her sexuality. The case of 'Little Hans' also showed the possibility of the existence of an Oedipus complex in children and the existence of a neurosis whose central symptom is phobia.

#### Little Hans' Analysis

Herbert Graff was born in April of 1903 and the first accounts of his case were given to Freud when he was three to three and three-quarter years in age. These accounts were published in Freud's earlier works entitled "The Sexual Enlightenment of

Children" (1907). After Freud published "Analysis of a Phobia in a Five-Year-Old-Boy" (1909) Freud changed Herbert's name to 'Hans' in order to conceal his identity. Hans' analysis began on January 5<sup>th</sup>, 1909 and ended on May 2<sup>nd</sup>, 1909 when he was just five years of age. (For further details of the case that is presented below see Appendix A.)

#### Max Graff's Account of the Little Hans Case

To give a timeline of the case, the reports start in 1906 when Hans is at the age of three and three-quarters. Hans' parents were pupils of Freud and decided to raise their son by "letting him express himself without intimidation" (Freud [1977], p.170). Hans' father begins by stating that prior to his current age Hans had a great interest in his own genitals, which he termed as his "widdler." (Freud [1977], p.170) Following this his father put forth a memory he had of Hans asking his mother a question. The conversation was as follows:

Hans: 'Mummy, have you got a widdler too?'

Mum: 'Of course. Why?'

Hans: 'I was just thinking.'

(Freud [1977], p. 170)

At the same age he had gone into a cowshed and watched a cow being milked. He said, "Oh look! There's milk coming out of its widdler!" (Freud [1977], p.170-171) His father was showing how interested Hans was in the ownership and use of a 'widdler'. Not

only did Hans realise something was amiss with the look of his mother's 'widdler', but he also noticed there was something interesting about the cow's 'widdler.' From this Hans began to formulate the differences between man and woman.

At three and one half Hans' father explained how Hans experienced a castration threat from his mother. The threat of castration came when Hans' mother had caught him touching his penis and told him "If you do that I shall send for Dr. A. to cut off your widdler. And then what'll you widdle with?" Hans replied to her "With my bottom." (Freud [1977], p.171) Her intent seemed to be to remove his precious toy from him and give him some idea of its loss. He immediately denied the loss by finding another method of 'widdling'. Hans therefore solved the problem without being faced with anxiety at this point. At this same age Hans also went to Schönbrunn to see the animals there in the zoo. His father described that he was particularly excited to see the lions and, of course, a lion's widdler. (Freud [1977], p.172)

Also at three and one-half Hans' little sister Hanna was born. At 5am, on the morning of the birth, Hans' mother went into labour so Hans' bed was moved into the next room. Hans had woke up a couple of hours later at 7am. He asked, "Why is mummy coughing?" upon having heard her groan with labour pains. Soon after this he said "The stork's coming today for certain". (Freud [1977], pp. 173-174) His father recounted that Hans was told that the stork would come to prepare him for the arrival of his sibling. Hans then went into the kitchen where the doctor had laid his bag and asked his father what it was (referring to the bag). He then quickly reiterated that the stork would be coming today for sure. (Freud [1977], p. 174) This gives us the idea that Hans was aware of the link between the birth, his mother, the doctor, and the stork that

brings his sibling.

After Hanna was born the midwife requested tea and Hans said, "I know mummy's to have tea because she's been coughing." (Freud [1977], p. 174) His father noted that this is a total denial of the event that he seemed to be at least slightly aware of. Soon after Hans went into the bedroom where there were washbasins filled with blood and water. Hans seemed fixated on these basins ignoring the fact that his mother was holding a baby. He said "But blood doesn't come out of my widdler." (Freud [1977], p.174) Again producing a denial of what he perceived as happening.

When Hanna was seven days old Hans watched her take a bath. He says "But her widdler's still quite small. When she grows up it'll get bigger all right." (Freud [1977], p. 175) Showing some concern for her lack of penis and also a denial of the differentiation of her sex.

At three and three-quarters Hans began to see that some objects have a widdler and some do not. When Hans starts to understand who and what owns a widdler he starts with animals, his mom, and even inanimate objects. Hans' father described a time at this age when Hans was at the station and water was let out of an engine. Hans noticed that the engine was 'widdling', but was confused as to where the 'widdler' was (Freud [1977], p. 173). He then followed this confusion with logic. His father said, "After a little while Hans added in reflective tones: 'A dog and a horse have widders; A table and a chair haven't.'" (Freud [1977], p. 173) Hans also began to be interested in his father's widdler. He asks his father:

Hans: Daddy, have you got a widdler?

Dad: Yes, of course.

Hans: But I've never seen it when you were undressing.

(Freud [1977], p. 173)

Another time the father recounted that Hans was looking intently at his mother while she was undressing. His mother stopped and asked him:

Mum: What are you staring at me like that for?

Hans: I was only looking to see if you got a widdler too.

Mum: Of course. Didn't you know that?

Hans: No. I thought you were so big you'd have a widdler like a horse.

(Freud [1977], p. 173)

He also had his first dream at this same age and it was about, Mariedl, a girl he had played with six months previously at their holiday in Gmunden. He said in the dream he was in Gmunden with Meriedl, but later insisted he was more than with her... he was "quite alone with Mariedl" (Freud [1977], p. 176) His father then explained where this comes from and who Mariedl is.

At three and one-quarter to three and one-half was when the first Gmunden visit took place. This was in the summer of 1906. While there, Hans had often played with the children of the landlord. Mariedl was the thirteen-year-old daughter of this landlord and had played with Hans a lot during their stay at Gmunden. At the time of

leaving Gmunden Hans seemed unphased, but weeks later he started to reminisce back to being in Gmunden. His father noted at four weeks past their trip he pretended to be playing with the landlord's children. Specifically Berta, Olga, and Fritzl. He referred to Berta and Olga as his children and told his father that "[his] children, Berta & Olga, were brought by the stork too." (Freud [1977], p. 176)

During play Hans asked his father to draw a giraffe's widdler. So his father drew him a giraffe, but asked Hans to draw the widdler. Hans made a short dash then added another dash because he felt it wasn't big enough. Hans said, "Its widdler's longer" (Freud [1977], p. 176) It seems he was trying to work out the size in relation to his father's knowledge on the subject. He perhaps assumed his father would correct him or even scold him, but instead neither happened.

During this period there was a lot of pretend play in order to answer this question. While Hans and his father were out walking one day they saw a horse urinating. Hans said to his father "That horse has got its widdler underneath like me." (Freud [1977], p. 176) He also noticed his now 3-month-old sister taking a bath and commented again in a pitying tone "She has got a tiny little widdler" (Freud [1977], p. 176) Hans had been given a doll to play with. He undressed the doll and looked at its groin to see if it had a widdler. He said, "Her widdler's ever so tiny" (Freud [1977], p. 176) He had seen a monkey in his picture book with a curled up tail. He pointed at the picture and said to his father "daddy, look at its widdler!" (Freud [1977], p.178) This continuing interest in the riddle of widdlers turned into a game of pretending to go to the toilet. "Leading out of the front hall there is a lavatory and also a dark store room for keeping wood in. For some time Hans had been going into the wood-cupboard and saying ' I'm

going to my water closet.' I once looked to see what he was doing in the dark storeroom. He showed me his parts and said: 'I'm widdling.' That is to say he has been playing at water closet." (Freud [1977], p. 178)

In 1907 at the age of four Hans and his family moved to a new flat. At the new flat there was a balcony where Hans could see into the house opposite to him. There lived a little girl that was about seven or eight years old. His father says that Hans would sit on the step and admire her form afar for hours on end. The girl would return from school at 4pm and at this time Hans could not be kept in his room. He would want to see the girl. His father recalled one time the girl was not seen and Hans became very restless. His father felt that this love attachment was due to a lack of playmates for Hans. (Freud [1977], p. 179)

At the age of four and one-quarter to four and one-half Hans was visiting Gmunden for a summer holiday for the second time. He had gone with his family the year before. Here he would play with the landlords children again. Hans would play with everyone, but Fritzl was his favourite. He would hug him much like he did with his cousin and once when asked which of the girls he liked the best he answered 'Fritzl'. His father also reports that he played rough with the girls just as he would with the boys in order to treat them as equals or as if unable to distinguish boy from girl and vice versa. (Freud [1977], p. 180)

Here on this trip Hans wanted Mariedl to sleep with him. He did take an interest in girls as much if not more than his affections for boys and this is an excellent example of this. In this instance Hans' father explains that Hans demanded that Mariedl sleep with him, his mum, and his dad. When his parents insisted that it wouldn't be

appropriate for her to sleep with them Hans insisted he was going to go down to her and sleep with her then. His parents stopped him, but he seemed fully prepared to go down to sleep with Mariedl. (Freud [1977], p. 180) He also "falls in love" with a little girl in a restaurant. His father noted that Hans blushed, stared, and flirted with this little girl from across the room. (Freud [1977], p. 181) Hans says to his father that he would like to sleep with her as he wanted to sleep with Mariedl and so his father managed to speak with her parents in order to arrange a play date with Hans. Hans became very excited at the idea, but on the day it rained and the play date was cancelled. Hans then played with Berta and Olga instead. (Freud [1977], p. 182)

Also at four and one-quarter Hans made a seduction attempt with his mother. He received a bath from his mother. Afterwards she dried him and began to powder around his groin area. She powdered around his penis, but doesn't touch it. Hans then asked her why she won't "put her finger" on his penis. His mother told him it isn't proper and refuses to which Hans replies to her "It would be great fun". (Freud [1977], p. 182) Hans had also developed a need to 'coax' with his mother at bedtime. He would also say 'what if I had no mother to coax with.' in an attempt to get his mother to take him into the bed with her. This was a very effective tactic much to the dislike of Hans' father. (Freud [1977], p. 186)

Hans has a dream within this time frame that includes in its scope a game Hans commonly plays with his friends. When he told his father about his dream Hans said, "Someone said 'who wants to come to me?' Then there's a reply: 'I do'. Then he had to make him widdle". (Freud [1977], p. 183) Hans' father speculated this is from a game called "Forfeits". In forfeits one person asks "Who's forfeit is this?" and someone from



the group of players responds that it is theirs. Once that person claims the forfeit they must do whatever the other person requests of them. (Freud [1977], p. 183) It is a bit like modern day 'Truth or Dare' where the request for the forfeit is usually a kiss or something forbidden. Hans repeated his dream and changed some parts. He changed the 'someone said' to 'then she said'. His father speculated that Hans wants Berta or Olga to make him widdle.

There was another instance where Hans asked his father to help him to urinate. Hans asked his father if he would take him around to the back of the house to do this. This was so that no one would be able to see or watch him urinating. At this point Hans claimed that the previous time they had gone to Gmunden for the summer Berta and Olga would watch him urinate. (Freud [1977], p. 184)

At the age of four and one-half Hans is observed while watching his mother bath his sister Hanna. He, all of the sudden, began to laugh out loud. When his mother asked him what was so funny he responded to her that it was because "her widdler is so lovely" (referring to Hanna's genitals).

In 1908 at the age of four and three-quarters Hans experienced the first signs of his phobia. On January 1908 Hans began to have night terrors about his mother disappearing. He was afraid that he would have "no mummy to coax with". (Freud [1977], p. 186) His father suspected that this idea came from the earlier attempt to seduce his mother into letting Hans into her bed in Gmunden. (Freud [1977], p. 186).

On January 7th 1908 Hans' first signs of phobia appear. He was walking in Stadtpark with his nursemaid when Hans began to cry in the middle of the street and

begged to be taken home to 'coax with his mummy'. When he got home his mother asked him why he had gotten upset, but he only cried in response. Later on he was said to have cheered up a bit, but by night he seemed fearful until his mother 'coaxed' with him again. (Freud [1977], pp. 186-187)

On the 8th of January 1908 Hans' mother decided this time she would take Hans on his walk to see if it would help. They went for a walk at Schönbrunn, but in the street Hans became frightened and his mother decided she would take him home. As they were walking home Hans told her "[he] was afraid a horse would bite [him]" (Freud [1977], p. 187) That evening Hans had a panic attack over the idea that he knew he would have to go on another walk tomorrow. This fear then expanded to the idea that "the horse'll come into the room" and bite him. (Freud [1977], p. 187) Once calmed down Hans mother asked him if he touches his penis. Hans answers, "Yes. Every evening when I'm in bed." (Freud [1977], p. 187)

On January 9th 1908 Hans got a warning from his mother not to touch his penis before his afternoon nap, but Hans couldn't resist and did it anyway. He said he did 'for a little bit'. (Freud [1977], p. 187)

Hans' father consulted with Dr. Freud about his son's fear and Freud suggested that he sexually enlighten Hans. Dr. Freud felt that Hans had an obsession with penises and that explaining the puzzling aspect of the 'widdler' would have helped Hans to rid himself of his repressed sexual urges. After this consultation whenever Hans would enquire about widdlers his father was meant to explain. As a result from March 1st through the 17th Hans' father began to enlighten Hans (Freud [1977], p. 191) There was a quiet period, but Hans' obsession with widdlers now turned into a compulsion about

horses. Hans now felt compelled to look at horses. "I have to look at horses, and then I'm frightened." (Freud [1977], p. 191) So Hans had to keep within his sight the thing that caused him the most distress. It was the point where the question about the widdler turns into a question about a horse. Hans phobia begins to increase from this point.

#### General Observations As Reported By Max Graff

The description of the case suggests that Hans has a father who is often absent and a mother who is very close and affectionate to him. Freud theorised that Hans, like all children, wanted to have sexual relations with his mother, but fears his father. Hans also has an obsession with "widdlers" including the possibility of "widdlers" in the opposite sex.

In the original account of the case the first thing that can be noticed is Hans' preoccupation with 'widdlers' or penises. Hans' first interest is in his own widdler. His mother caught him touching it and tells Hans "If you touch your widdler the doctor will come and cut it off!" (Freud, [1909], pp. 7-8) This is what Freud would consider a threat of castration in the most real sense.

The next point of interest is Hans' interest in his mother's widdler. At first he denies that a woman is without a widdler and at one point fantasises that his mother must have a widdler the size of a horse. Hans says, "Mummy's widdler must be big as a horse!" (Freud [1909], p. 27) This is all very logically laid out in the child's thought

because of his mother's size and his understanding of the concept that things grow in proportion to their size. Later on he understands that his mummy has a different kind of widdler, but the idea is difficult for him to form.

The next interest is in daddy's widdler. His father tells him that he has a widdler too, but it seems unclear to Hans. His father was absent a lot and he spent more time with his mother than with his father.

Next Hans begins to see that not all things have widdlers. He notes that animals do, but things such as tables do not. (Freud [1909], p. 9) This can be seen as Hans developing his sense of self. He differentiates inanimate objects from those that are living or animate.

Hans produces the logic that widdlers grow. He notices while his baby sister Hanna is having a bath that she has a very small widdler, but that it will grow as she grows. It almost seems like a hope, for her sake and his, that it will grow. If Hanna's widdler does not grow then Hans' logic would have to suggest that Hans' widdler will also not grow. He is using these things as a guide to form logical outcomes.

From this he concludes that all women must have widdlers and that they will grow. This begins to pique his curiosity further and so he begins to watch others urinate. This is perhaps to catch a glimpse of the other person's widdler and also to see girls who have such a small widdler.

His phobia began after a dream that he had no mother to "coax" with. When the nursemaid took him out on his walk he began to cry for no apparent reason and said that he wanted to go home to his mother. Prior to the phobia Hans only suffered from

anxiety because the object of his fear at this point was unnamed. Freud says,

Hans's anxiety, which thus corresponded to a repressed erotic longing, was, like every infantile anxiety, without an object to begin with: it was still anxiety & not yet a fear.

(Freud [1909], p. 25 / Freud [1977], p. 188)

When Hans would get into states like this his mother would take him into her bed to comfort him – exactly what he dreamt he lost. The next time his mother decided to take him on a walk herself. There he again became agitated and when she asked him why he said because he was “afraid a horse would bite him.”

The phobic symptoms revolved around the horse. He admits that he is afraid a horse will bite him. Later he's afraid that a horse will fall down and makes a row with its feet. He had seen this happen once on another walk with his mother where a bus horse fell down and made a “row with his feet” as if dying. (Freud [1909], p. 50) Hans also played with a toy horse making it fall down as the bus horse did. Any horse that carried a heavy cart would cause Hans to worry that the horse might fall down. And at the last stage Hans feared that a horse would be whipped or teased.

'Widdle' and 'Lumpf'

Hans also goes through a phase of finding interest in urination and defecation processes. Prior to this he was interested in the 'widdler' itself, but seeing that the

widdler has effect on these processes and also brings a 'glance' of the 'widdler' itself  
Hans begins to show more and more interest in these actions. First Hans pretends to urinate or fantasises that he will urinate. He does so by playing at 'water closets' by pretending that a closet is actually a bathroom and there he pretends to go to the bathroom. Next he is watched while urinating and also watches others while they urinate. He then has a fear of being seen urinating. Soon, with the suggestions of his father, Hans begins to see colours that remind him of both urine and faeces. The leather interior of a carriage looks to him like the colour of faeces. Horses that fall, such as the one that he saw with his mother, are like faeces. Horses passing through a gate are like faeces passing through the anus. Hanna, his sister, also reminds him of faeces because having a child is like having a bowel movement in his logic. This logic was produced after he recalls seeing the calf being born. He assumes that it was born from the anus.

### Boxes and Storks

Hans is curious as to how babies appear so he makes some connections based on what he sees and what he's told. Because the things he is told contradict each other Hans' idea of birth is confused. Hans initially believes the stork brings babies. He has an idea that the stork actually comes to his house the night prior to Hanna's birth and leaves Hanna in the bed with his mother. Later this idea morphs in order to make the maximum amount of sense leaving no detail in the story without support. So his sister

came from a red stork-box like the one that he sees in his picture book. In this book he sees two storks in a nest that is sitting on red brick chimney connected to a house. From this Hans gets the idea that the babies that the Stork brings are all contained in this box.

Hanna was alive in this box, according to Hans, before she was actually born. At this point in Hans' fantasy he and his mother let Hanna out of this box clearly excluding his father from any function in the production of his sibling. Hans' idea of how the Stork got in to his house also changes. He thinks that the stork has a pocket in his mouth. This pocket first carries a key to their house and later 'carts' Hanna in his beak prior to giving her to the midwife. This story however isn't matching up and so Hans begins to produce another theory.

Hans begins to question more about birth and so his father poses the idea to him that babies come like the calf he saw being born. Hans recognises that the calf came out like a poo. So this leaves Hans with a serious issue - If having a baby is like having a poo then every poo is a potential baby. The amount of potential babies that can be born is concerning for Hans and so he searches for a way to produce a limit. When Hans asks his mother she tells him it is her who has the control and places the limit on when she produces a child or not. When he speaks to his father it is 'God', not his mother, who places the limit on children. This leaves Hans with a very poor idea of limit. What was once a possible satisfactory limit becomes easily contradicted and control is given to God - An unseen being who has the power to decide to stop a poo from becoming a baby or to make any one who poos a parent.

Hans then begins to question if he can have babies. This is again a confusing

point for Hans. He begins to prepare himself to become a mother by playing with dolls that he pretends are his children. His father attempts to enlighten him by telling him that boys do not have children, but that statement doesn't make sense in Hans' logic. If boys do not have children then why does his father have Hans? Hans begins to doubt his father knows what he's talking about.

### Death and Limit

From this idea Hans begins to fathom an alternative. If there can be birth then there must also be death. He starts to ask if there is a limit on where dead people are buried. He wants to know if they are in every inch of the ground or only under the ground in cemeteries. (Freud [1909], p. 69) His link to death is also seen in the bus horse that fell. Hans jokes to his father that the horse died after making a row with its feet. His father asks Hans if he wished his father would fall and die. Hans makes a link that his father may make a row with his feet by leaving at some point and he would then be without his father. Without his father there is no limit on his mother. Hans also wants a limit on Hanna. He can't stand her 'row', or noise that she makes, and wishes her to die. Making a limit to the amount of noise he has to endure. This idea of death must also stem from the idea of children being in the box and when their lives begin or end. Hans is looking for a specific limit, a beginning and end point, to which he can orient himself with more certainty.

When he was younger he had been told by his mother not to put his hand to his



penis or she would call the doctor to come and cut it off. This is a threat of real castration made by the mother, which acts as a limit. Hans had noted on an earlier occasion that his mother's penis must be relative to her size – so if she has a penis it must be the size of a horse's. This idea of a penis being relative to size is also a limit.

Two times prior to the dream Hans attempts to seduce his own mother (Freud [1977], pp. 182, & 186). Now the fear that a horse would bite him appears after the anxiety dream of losing his mother. At night Hans' anxiety would increase producing another boundary to his desire for his mother. His mother asked him if he touched his penis. Hans replied that he did. So his mother asked him not to - though he admits he touched it anyway. Freud thinks that this is in fact the beginning of the phobia and the fundamental phenomenon in the case. He says,

Disorder set in with thoughts that at the same time fearful and tender, and then followed an anxiety dream on the subject of losing his mother and not so being able to coax with her anymore. Hans' affection for his mother must therefore have become enormously intensified.

(Freud [1977], p. 187)

And if Freud is correct this anxiety provides a possibility for Hans to receive more affection and attention from his mother while still maintaining a limit via anxiety. He is caught in a loop of desire by perpetuating the anxiety-provoking situation. Freud sees the case as showing the development of infantile sexuality as well as the progression of a child through the Oedipus complex.

## Things That 'Row'

Hans uses the word 'row' quite a lot and in a particular way. His first instance is that horses that fall make a row with their feet and this idea and its associations frightens Hans. Hans makes a row when he protests going to the bathroom so that he can continue playing. His father makes a row with his feet when he 'trots' away from Hans. (Freud [1909], p. 45) Toilets that flush loudly make a row. Hanna's screaming makes a row. And finally Horses that are beaten make a row. Most incidences of 'rowing' indicate something is being taken away. The horses that fall down almost die or seem to (which is what seemed to frighten Hans), Hans is taken from his much enjoyed play-time, His father is frequently absent, the toilet takes away his lumpf (possible children), Hanna is taken away when she screams, and Horses are again threatened with having their lives taken away when beaten. Row for Hans is a form of castration - a removal and loss of something important. And particularly we will see that the loss or lack of the presence of his father produced the need for something else, such as the phobia, to produce a presence as a function of limit.

## 'Gee-Up'

Hans also uses the phrase 'gee-up' at particular points in his story. It isn't wholly clear in the English translations what this phrase actually means to Hans, but he does present it through out the case. At Gmunden Hans and the landlord's children play

horse and the rider says 'gee-up'. Hans says 'gee-up' when he plays horse alone. When Hans rides the maid he tells her to 'gee-up'. In Hans' fantasy of Hanna's trips to Gmunden she tells the horse she is riding to 'gee-up'. Later when he alters this story upon the questioning of his father he says that his mummy and the maid were riding the horses and they are the ones who say 'gee-up'. Hans also has a fantasy and a fear of horses being beaten and they tend to be beaten when the words 'gee-up' are said. Something may be forming here for Hans in the form of 'Gee-up'. In English this word is a command that means to "go ahead" which is usually directed at an animal. It seems that going ahead with his desire is exactly what he wishes to prohibit.

#### Freud's Case Discussion

Freud was pleased with the case of 'Little Hans' and it was important in producing tests to his theories. In regards to Max Graff's skill as an analyst Freud writes that:

No one else, in my opinion, could possibly have prevailed on the child to make any such avowals; the special knowledge by means of which he was able to interpret the remarks made by his 5 year old son was indispensable, and with it the technical difficulties in the way of conducting psychoanalysis upon so young a child would have been insuperable. It was only because the authority

of a father and of a physician were united in a single person...

(Freud [1977], p. 169)

Even in his discussion of Max Graff as analyst Freud suggests that he must produce a supporting function to Max's authority in order for it to be effective. This is exactly the issue which Hans seems to present in his phobia.

Of the issues that Freud discusses in the case the main topic is that of the emerging infantile sexuality. Hans, according to Freud, had a polygamous and bisexual object choice at the time of his case. He was both interested in girls and boys. There were episodes where he had very affectionately hugged his male cousin and told him "I am so fond of you." (Freud [1977], p. 178) While at the same time he also found interest in girls. This was no doubt confused by the question of who does and does not possess a penis. Slowly Hans answers this question, but it wasn't till he was four and one-half that Hans had his first distinction between male and female with no denial of the fact that a woman has no penis. (Freud [1977], p. 184)

Another issue for Hans was the closeness in the relationship between he and his mother. His father made several complaints that Hans was too fond of his own mother and that he could not keep him from sleeping in the bed with his mother – especially when he was absent. According to Freud, this lack of separation between he and his mother produced a great deal of anxiety for Hans.

Freud thinks that January 9th was specifically the beginning of his anxiety and phobia. There were two attempts at seduction according to Freud. The first was in the

summer and the second was when he tried to get his mother to touch his penis. (Freud [1977], pp. 182 & 186) The second attempt at seduction happened just before the outbreak of Hans' anxiety. Freud says, "Hans' anxiety, which thus corresponded to a repressed erotic longing, was, like every infantile anxiety, without an object to begin with; it was still anxiety and not yet fear." (Freud [1977], p. 188) Hans at this point didn't know what he was afraid of, but knew he wanted his mother. At bedtime his libido increased for the object, his mother, and for him this was overwhelming. Freud does not think masturbation alone produced Hans' anxiety, but that repression generated anxiety when he tried to stop. (Freud [1977], p. 190) Freud suggested that Hans' father sexually enlighten Hans due to his obsessions with widdlers. (Freud [1977], p. 191)

Hans' dream on March 16th about his mother being naked, showing him her widdler, and Hans putting his finger to his penis was in Freud's opinion purely fantasy rather than an actual dream. (Freud [1977], p. 194) Freud sees this dream as a confirmation of the threat of castration and denial of the fact that a woman does not possess the phallus. (Freud [1977], p. 195)

On March 22, when Hans goes to Schönbrunn and Lainz, Hans, according to his father, was frightened of the bigger animals and would not go to see them. Instead he only went to see the smaller animals. Hans made a comment on this day that indicated that he thought everyone has a widdler and that his widdler would grow. Freud thinks that Hans was dissatisfied with the size of his widdler (Freud [1977], p. 197) and this is why he acted this way at the zoo. Freud also thinks, regarding the comment of it being "fixed in" that Hans was having a deferred effect of castration. (Freud [1977], p. 198) The knowledge that women don't have penises aroused the castration complex and

lowered his self-consciousness. (Freud [1977], p. 198)

On March 27th-28th Hans has a dream of a big giraffe and a crumpled one. His father interprets that the dream is a reproduction of the morning bedroom scene where Hans comes to get into bed and his mother cannot resist letting him get into bed with them. Hans' father would insist it was not a good idea, so his mother would only let him stay for a short while. Freud says that this is "probably Hans' representation of taking possession" of his mother by defying his father's wish that Hans was not in the bed between he and his wife (Hans' mother). But Hans wins and is taken into bed with his mother time and time again. (Freud [1977], pp. 201-202)

On March 30th Hans has two ideas that seem to work out the consequences of breaking rules. Freud says, "He [Hans] had come up against the barrier against incest, but he regarded it as forbidden in itself." (Freud [1977], p. 204) On this day Hans actually visits Dr. Freud. He tells Hans directly, instead of through the father as he had been doing, that:

He [Hans] was afraid of his father precisely because he was so fond of his mother. It must be, I told him, that he thought his father was angry with him on that account; But this was not so, his father was fond of him in spite of it, and he might admit everything to him without any fear. Long before he was in the world, I went on, I had known that a little Hans would come who would be so fond of his mother that he would be bound to be afraid of his father because of it; And I had told his father this.

(Freud [1977], p. 204)

Freud felt that "Hans' anxiety had two constituents: There was a fear of his father and a fear for his father..." (Freud [1977], p. 207) This was shown on April 3rd when Hans expressed his concern about his father leaving him. On this same day Hans begins to play horse and he runs up to his father and bites him. Freud says that biting the father was the same as identifying with the father. Previous to this Hans had been speaking and explaining a great deal to his father about horses, boxes, and where he saw a horse fall down.

Hans and his father discuss many things in an attempt to 'enlighten' him about sexuality. Freud thinks that during the talks Hans plays a little game with his father. Hans tells his father stories that couldn't possibly be true and Freud believes this is basically a protest against his father's knowledge. Hans according to Freud knows that the stork does not bring babies, but to test this idea out he tells his father that he's sure this is the way babies are born. He tells this story in many different varieties to call his father out in his lie to Hans regarding sex. (Freud [1977], p. 231) Freud saw the little Hans case as proof to not only infantile sexuality, but also to the Oedipus complex. What arises though is an obvious emphasis on the role the father plays in the development of Hans.

Lacan on Freud's Case of Little Hans

Lacan sees the father as having been absent and ineffective, and I would add,

confusing to the law that was being set for Hans by his mother. The father could not effectively remain in accordance with this law and with this strengthen it in a signifying sense to produce separation of Hans from his mother. So Hans uses the temporary phobia to produce this separation and guarantee its effect. The horse becomes a signifier that works, as the father should have in this relationship.

Lacan views Hans' use of the phobia as something more elaborate than a simple wish to have sex with his own mother. The phobia makes shifts and seems at times to become intensely interested in certain objects/signifiers such as horse, rowing with the feet, gee-up/whip/tease, widdlers, faeces, stork-boxes, and panties. All of these can be drawn back to the point of the phallus. A horse can be any member of the family including himself when he needs it to be. This is his main and most reliable aid in propping up the prohibition of the father.

Hans enjoys "coaxing" with his mother very much and it serves to separate him from the real anxiety of being overtaken by the desire of his mother and his desire for his mother. He needed a signifier that could be flexible, but strong enough to do the job of placing Hans in the world of signifiers. Perhaps the rowing, gee-up/whipping, and widdlers relate to the function of the father most due to the way that these repeated elements are reconstructing a form of punishment. To make a row, whip, and have the penis all relate to the father and what he might do to Hans if he did manage to become the object of his mother. The panties, faeces, and the stork-box are all designated to the mother. There was a point where Hans actually tells his father he wants to get inside the box and widdle and that there is no shame in that. Hans' unconsciously said "I'd like to do what his father did to mummy in order to make Hanna" and he wonders if



this will result in punishment. His father fails Hans yet again and does not respond as needed to establish a prohibition. According to Lacan, Hans' father is impotent in the sense of establishing a satisfactory barrier between Hans and the desire of his mother.

## Chapter 4

### Developments Introduced By Lacan: Theory & Technique

#### Introduction

Leading to the reference of Seminar IV is a synoptic account of the main outline of the Lacanian theory. This comes before merging it into the details about phobia found in Lacan's Seminar IV on Object Relations. These details are, as of yet, unpublished in the English Language and are key to understanding other Lacanian texts that broach the topic of phobia.

#### From Need to Demand to Desire

From the first six months of life, and possibly before as some research is showing, the child is immersed in language, culture, and everything that is Other<sup>12</sup>. When the child subject is born by nature it is born without physical control over its own body and is helpless. Sight, motor function, hunger, and excretions are not under the

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<sup>12</sup> Other with a capitalised 'O' denotes that we refer to what is equated with both language and the law (Symbolic Register). This can be anything or anyone who has these two attributes. The Other is always particular to the subject, but can refer to society as a whole. In the case of Hans we speak of the mother in relation to the child - the primary relationship which embodies these two elements (law & language).

control of the child and therefore it depends on another, a mother, father, or carer, to meet his or her needs and to help it to remain alive.

So what does the child need from the Other? Primarily the child wants and needs to eat. So to express this frustration of a lack the child will cry. Here is where the cry begins to take a meaning to the other albeit a misunderstood meaning. The carer will attribute a name to the cry – “baby wants to eat, baby wants his/her nappy changed, baby is frightened!” So from this time on the cry takes on meaning to another and the child recognises this. So now the carer presents the child with an object to satiate its cry and the child sees this object as a demand. Here is the breast – eat, here is a diaper – shit, here is my voice – respond, here is my look – pay attention to me. This demand and the objects given never produce a complete satisfaction for the child. What is demanded is love from the carer; and this giving and attending to the call is a form of love, but what we are talking about is not completely captured by this symbolisation.

The problem is now that the child can only express him/her self with a demand – a demand that cannot be filled completely. What the child is seeking is something unmediated by language – a love by sign only. Now the child might cry just to have the carer come to him/her, but that is not enough. We now have from the child a demand addressed to the Other which cannot be fulfilled – this is what we would call a “lack.” Now that there is a lack the child can only desire to have what he/she has never had which is a complete love from the Other. This is important because now the child produces acknowledgement of the carer as lacking and in turn this facilitates the progress from demand to desire. It is now a desire of the Other’s desire. This desire will

remain, in relation to the 'object a'<sup>13</sup>, and once a structure is formed the child will use his or her desire in a particular way throughout his or her life.

### The Mirror Stage

From the age of six to eighteen months the child develops enjoyment of his or her own image. This enjoyment begins the imaginary register in a child. The image of another child or the reflection of the child in the mirror creates in the child the image that the body is whole and not in parts as it has been previously experienced. Lacan explains the mirror stage by saying:

What I have called the mirror stage is interesting in that it manifests the affective dynamism by which the subject originally identifies himself with the visual Gestalt of his own body: in relation to the still very profound lack of co-ordination of his own mobility, it represents an ideal unity, a salutary imago; it is invested with all the original distress resulting from the child's intra-organic and relational discordance during the first six months, when he bears the signs, neurological and humeral, of a physiological natal prematuration.

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<sup>13</sup> Lacan reformulated his notion of the object a over a number of years giving it in particular a formulation in *Seminar X on Anxiety* in 1962-63 and again in "Kant with Sade" (1963). In the context of his 1957 work 'a' is representing the object of desire which is a partial object that is based in the Imaginary register. This object is separate from the body due to something being left over from desire. 'Object a' is also any object that causes desire for the subject.

(Lacan [1977], p. 21)

This integrated illusion creates the prototype of the ego in the child and allows it to imagine what it is or can be in the future. Now it knows itself as the functions that are undeveloped and as a whole being, one that functions. H. Glowenski, Z. Marks, & S. Murphy state in their *The Compendium of Lacanian Terms* that:

From this point the duality of the ego becomes established in his/her psyche, as represented in the ideal form of the spectacular other, the mirror image or what Lacan termed as the 'Ideal Ego' on the one hand and on the other hand the fragmented body which gazes upon the 'Ideal Ego' and which Lacan designates as the 'Ego'.

(Glowenski et al [2001], p. 115)

The ego begins to form dual perspective creating the spectacular other or the ideal ego and the ego itself. From here the imaginary register begins and the first moment of the psychological structuring of the subject forms.

The beginning of the subject's structure starts in the mirror stage where the subject sees him or herself as whole and functioning. Prior to this the child saw itself in parts, such as a hand or a foot that pops into view, functioning separately from the whole. The child also imagines it is part of the mother and not a separate being. Because the mother and child are so close it is imperative for the bond to have a boundary where the child does not continue to see itself as fragmented or merely part of the Other. This is where the primary signifier, or the paternal function, sets in to

ensure that there is a certain boundary to where the child is able to acknowledge the Other's law and obey it as well as giving up certain pleasures for more "Otherly" socially acceptable ones. With this acknowledgement and obedience to the father function comes the ability to live in meaning and be separate from the Other. The paternal function is imperative in this process.

What is seen in the Mirror stage is the fantasy of a functioning image. Images outside the self are what constitute the ego in alienation. The Ego is a mental projection of the body surface, or better known as the specular Image, Libido cannot be represented in this image completely so it is held there in the physical body or sex. By having an image outside of the self the child gains the ability to create a co-ordinated image or imaginary mastery over its body (which is originally fragmented) that comes from the other. If the child is unable to master the body it remains fragmented as in the state of broken psychotics (as opposed to 'white psychosis'<sup>14</sup>). Once mastered the child imagines what it is or can be in the future. Now it knows itself as the functions that are yet undeveloped seen as a whole being - one that functions. This is where the separation between the self and the other begins in what Lacan calls the Imaginary register.

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<sup>14</sup> White psychosis refers to the Lacanian structural diagnoses of psychosis that has not yet manifested in the classical symptomology of the ICD & DSM psychosis.

## The Three Registers

There are three registers according to Lacan: the Real, the Imaginary, and the Symbolic. The Real is the fragmentation of the body and the lack of separation in being from the Other. This is when the child sees itself as parts, such as a foot or a hand, rather than a whole functioning being. Not only this the child does not see any separation between itself and the carer. The Imaginary creates the fantasy of a complete functioning body in the Infant so that the hand is now associated with the whole body. This fantasy is known as identification because the child sees others and recognises them as whole beings, like itself, rather than a collection of parts. The Symbolic register binds the Imaginary's identification by the use of words, meanings, and signifiers. Now not only is the child a whole collection of parts, but it can also incorporate signifiers of itself and others. The way that a subject orients his or herself primarily within these registers also helps to understand the structure of the subject. The father function holds all of these separate registers together.

After introducing the three registers in his 1953 "Rome Discourse," Lacan applied the notion to the problem of phobia in his 1956-1957 Seminar entitled *La Relation d'Objet*. For Lacan, these three registers were produced to better describe the psychic structure, which Freud had already put forth in his theory of the unconscious. Lacan closely looks at Freud's case of 'Little Hans' (1909) to explain the origins of the psychic structure.

Like Freud, Lacan used the case of a child to show the formations made in the beginning of structure. The three registers explain the 'myth' (Levi-Strauss [1979]), or phobia, constructed by Hans in response to his sexual desire. This desire, as previously explained, relates to a form of enjoyment or *jouissance* for Hans. An enjoyment that is forbidden and therefore situated in the Real. To accept his desire Hans would be subject to something unconscionable. Freud terms the thing Hans wishes to avoid as castration in his Oedipal theory. Hans successfully manages to avoid being castrated by using his Imaginary to construct his phobia in order to bring him into the Symbolic. The phobia Hans has is at a point where the Imaginary and the Symbolic cross, but is a tool used to produce the Symbolic register for Hans.

For Freud Hans's case was simply a matter of the Oedipal complex and emerging sexuality, but this fails to explain the way in which (Symbolic) pathways function in the production of the phobia. Lacan fills in Freud's blanks by adding in a new descriptor, which opens up other dimensions to the constructs of the structure. Freud described the case of 'Little Hans' as Hans developing love for his mother and later transferring it to his father. He put forth that Hans sexuality is initially bisexual. His mother was seen as giving in to his desires too much and his father was never there. Hans' libido increased at night when he would masturbate and Freud suggested that at this time he felt an overwhelming desire for his own mother. This is where Freud feels Hans' phobia began and suggest that Hans' father enlighten him about sex. And eventually Hans' phobia did recede, but Lacan adds to the account of how this happened.

Lacan looks on this case differently; It is the lack of the father that produces the phobia rather than the coaxing of the mother. And he uses the three registers to



explain the meaning of this further. The Real father for Lacan is the father who biologically produced Hans. He is the father who is partnered to his mother and who produces children with her. This was something that disturbed Hans – the idea of the production of children and the rules of such an event.

The Symbolic father for Lacan is the speech his mother uses to portray the law and is the agent of castration. That is to say, the words his mother used to convey the desires of both herself and the father in accordance. These words and ideas would have given Hans a real boundary in which to organise his life. Instead Hans was faced with a failure of this to transmit and his mother left him no place for his own jouissance (his widdler). His mother threatened him with castration through her dislike of his masturbation, but this is not the real threat of castration. Instead it only left open the question of “what did his mother want with him?” and created a need for there to be an answer. Instead it is this father, the Symbolic father, which produces castration and makes a kind of answer to the question for Hans. (Palomera [1993] p. 45-56) (See Figure 3)

**Figure 3**

Formula for Metaphor & Hans' Phobia

$$\frac{S}{\$} * \frac{\$}{x} \rightarrow S \left( \frac{I}{s} \right)$$
  

$$\frac{\text{Horse}}{\text{Desire-of-the-Mother}} * \frac{\text{Desire-of-the-Mother}}{\text{Signified to the subject}} \rightarrow \text{Horse} \left( \frac{O}{\text{Phallus}} \right)$$

(Palomera [1993], p. 52)

The Imaginary father for Lacan is Hans' phobia. The phobia does for Hans what the Real father could not – it produces a very effective boundary and plays out scenarios for Hans. It is what Lacan, using the theories of Claude Levi-Strauss, called the production of Hans' personal myth. And the treatment for Hans' phobia was to exhaust all pathways that this myth might take. On this topic Palomera says that:

It is to cover over what we can call the complete circle of what emerges as both a possible and an exit impossible to take. Once the circuit has been run through something has taken place which signifies that the subject has placed himself at the level of the question.

(Palomera [1993], p. 58)

This is exactly what Hans' father did by symbolising and resymbolising Hans' phobia in their 'enlightening' conversations as well as what Hans' himself did with his fantasies, ideas, phobia, and dreams. Once Hans exhausted these fantasies, fears, and dreams an entrance into the Symbolic became available to him so that he could proceed with his development in the Oedipus complex<sup>15</sup>.

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<sup>15</sup> Lacan is in opposition to Freud here and thinks that Hans has not resolved the Oedipus complex, but instead has only just entered it due to remaining at the level of the imaginary phallus (Palomera [1993], 58)

## The Phallus & The Three Registers

Lacan also looks at the phallus in relation to the three registers. The phallus exists in all three registers for Lacan and in most of these registers, as expected, the actual male organ. Instead it is a signifier; and a particularly privileged one at that because it is the original signifier which begins the construction of the signifying chain. It eventually is seen by Lacan as the signifier of signifiers, which acts by anchoring the chain of signification.

The Real phallus is the sexual organ or the actual penis. (Lacan[1957], p. 153) This is exactly where anxiety is located. It plays an important role in the Oedipus complex, as we say in the case of 'Little Hans', due to the emergence of infantile sexuality through masturbation. This was seen by Hans as an intrusion from the Real into the Imaginary. It changed what should be enjoyable into something that provoked in him great anxiety. The Real phallus produces a question through the process of the Oedipus complex regarding its location for the subject. In order for the child to resolve the Oedipus complex and triangulation the child must realise that the real phallus is located in the Real father. (Lacan [1958], p. 281) Hans uses the horse to represent his Real father and the Real penis in order to produce what is perceived by him as lacking.

The Imaginary phallus is the 'object a' or the imaginary object. (Lacan [1956], p. 31) This imaginary object is the image of the penis as a part-object which can be detached from the body either by castration or maternal fallacy in the case of the structure of perversion. This form of the phallus exists before the Oedipal complex and

is therefore considered by Lacan to be pre-Oedipal. Lacan uses the lowercase phi ( $\phi$ ) to symbolise the imaginary phallus and a negative lowercase phi to represent castration ( $-\phi$ ). The imaginary object is the object of the mOther's<sup>16</sup> desire beyond her desire for the child. The child slowly realises that it is not the one and only object of its mother's desire and that her desire is actually directed elsewhere. This prompts the child to attempt to gain what is lost by trying to return to the position of the supposed original state. The state where the child believes that at one point it was part of the mother and the sole desire of the mother. This however never existed and is therefore a fantasy.

This produces a triangulation where the child, mother, and the desire of the mother interact. The desire of the mother, or the third term, is the imaginary phallus which signifies not only the desire of the mother, but also the desire of the child for the mother. It is what the child thinks one must have in order to be what the mother wants. The father is usually, for Lacan's description of the situation, what the mother wants. The child is aware of this and is therefore obliged to identify with the father in order to gain the love of the mother. This is Lacan's version of the Oedipus complex integrating Freud's original ideas with the three registers to add more explanation and depth to the theory. Castration is the child realising that it is lacking and that thing that it is lacking is, what Lacan terms, the Imaginary phallus. It is only when the child gives up this Imaginary phallus, or attempt at identification in the Imaginary register, that a fourth element is introduced, the 'father function', and the child enters into the Symbolic register.

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<sup>16</sup> 'mOther' denotes a mix of the Other and the other for the child. Written this way shows that this is not only the mother of the child, but also the big Other denoting that it is equated with both language and the law (Symbolic Register). The Other is always particular to the subject in this case we speak of the mother to the child.

The Symbolic phallus begins in the Imaginary. The Imaginary object is like training for the child to use the Symbolic register. When the Real phallus becomes, for the child, an Imaginary phallus it evolves into an Imaginary signifier as well. Lacan says in *Seminar IV* that the phallus is not only Imaginary, but also a Symbolic object as well. (Lacan [1957], p. 152) It is a phallic signifier. Later in *Seminar V*, on the 21<sup>st</sup> of May, Lacan describes it as "the signifier of the desire of the Other." (Lacan [1958], p. 11) / (Lacan, [1977], p. 290)

Sexual difference is the question that the Symbolic phallus presents to the child. Every child, male or female, must assume castration and reject the possibility that they can be the phallus for the mother. Once a child of either sex overcomes wishing to be the Imaginary phallus for the mother then the child begins a Symbolic relationship via the Symbolic phallus. Giving up this wish is castration. Through castration the child gives up what it never had in the first place for something that it can have. The Symbolic phallus represents the male and the female child alike. There is no negative for the female child since she lacks a Real penis. This presents a dissymmetry in the sexual relationship and is the reason Lacan says the woman does not exist. (See Appendix B)

In *Seminar IV*, Lacan also speaks of three kinds of lack that correspond to certain registers in relation to the phallus-object. This is a further explanation by Lacan on his theory that there is a 'lack of being' (manque-à-être) that creates desire. Without a lack desire cannot exist. In 1955, Lacan suggests that the primary desire is that of being – existence. (Lacan [1955], p. 223) In 1958, Lacan furthers this idea in relation to his discussion of the case of 'Little Hans' and object relations. Lacan says that desire is a

metonymy of the lack of being. (Lacan [2006], p. 514) In *Seminar IV* Lacan's table of lack in relation to the object is as follows: Castration, which is a Symbolic function, is related to the Imaginary phallus. This means that through the Imaginary phallus castration is achieved bringing the subject into the Symbolic. Frustration is an Imaginary function and is related to the Real breast. This means that dyadic relationship of the Real mother and child leaves the child with frustration in the Imaginary. And lastly privation, a function of the Real, is related to the Symbolic phallus. This means that realisation and knowledge of sexual difference produces a lack which is Real and anxiety provoking. Castration, frustration, and privation are forms of lack that corresponds to certain agents (the Real father, Symbolic mother, and the Imaginary Father). This finished portion of Lacan's table of lack shows the agent who is in relation to the object for the subject. (See Figure 4)

**Figure 4**

Lack In Relation To The Object

<b>AGENT</b>	<b>MANQUE (LACK)</b>	<b>OBJET (OBJECT)</b>
Père Réel (Real Father)	Castration Symbolique (Symbolic Castration)	Phallus Imaginaire (Imaginary Phallus)
Mère Symbolique (Symbolic Mother)	Frustration Imaginaire (Imaginary Frustration)	Sein Réel (Real Breast)
Père Imaginaire (Imaginary Father)	Privation Réelle (Real Privation)	Phallus Symbolique (Symbolic Phallus)

(Lacan [1957], p. 215 & 269)

Hans' encounter with the Real is brought on via his masturbatory activity. It produces in him a real fear that he must bind in order to progress. Through the Imaginary he is able to produce something for the mother to desire. The phallus signifies lack for Hans and eventually results in his realisation of sexual difference in the Symbolic. Hans' phobia was a way for him to produce what was not perceived as being produced in order to achieve the full use of the Symbolic order.

### The Drive

Also at play are the drives, which are not to be confused with instincts. Instincts indicate the needs, biologically speaking, of the subject. Lacan stated aptly that:

The drive, as it is constructed by Freud on the basis of the experience of the unconscious, prohibits psychologising thought from resorting to "instinct" by which it masks its ignorance through the supposition of morals in nature. It can never be often enough repeated, given the obstinacy of psychologists who, on the whole and per se, are in the service of technocratic exploitation, that the drive - the Freudian drive - has nothing to do with instinct (none of Freud's expressions allows for confusion).

(Lacan [2006], p. 722)

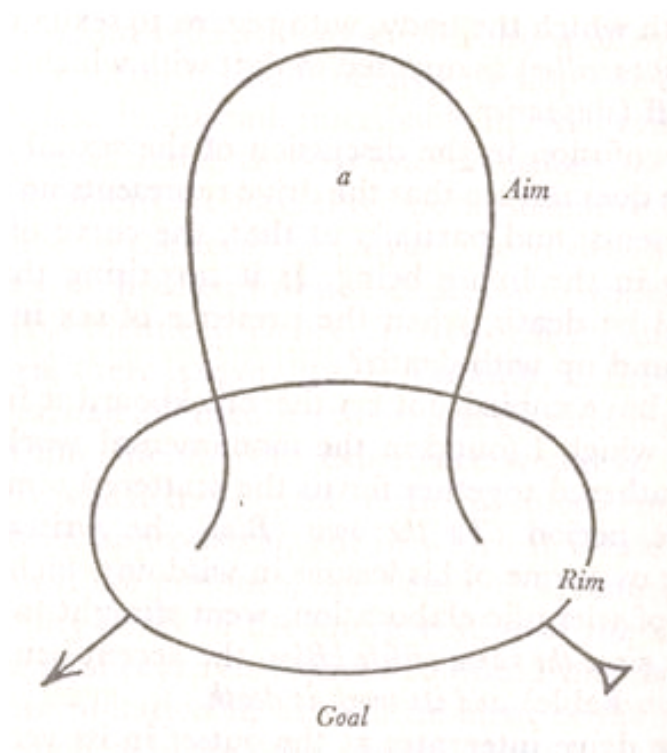
Drives are only partial aspects of desire that function in association with a particular object. Lacan distinguishes the oral, anal, scopic, and invocatory as drives that the child can become fixated upon. They are not drives that can become whole, like desire can never be satisfied, so they are considered partial drives. These drives have no end goal instead the goal is to perpetually circle around the object that it is aimed at without obtaining it. The pleasure is in this circling motion that never gains the object it desires.

The drive is composed of four elements: The pressure, the end, the object, and the source. These elements describe how the drive orients itself in this perpetual motion of circulation around what it seemingly wishes to obtain, but does not. So there is a circuit that the drive circles around that originates in an erogenous zone. It follows its path by exiting from this zone, going around the object, and then returning to the zone without obtaining the object. Within this Lacan suggests that there are three voices that are present: The active, reflexive, and passive. At the level of the drive it is purely grammatical, but structures the circuit. (See Figure 5)



Figure 5

Pulsion (Drive)



(Lacan [1964], p. 178)

The active voice is the first portion of the circuit of the drive that leads the libido out from the erogenous zone towards the object. This voice is autoerotic meaning that there is a lack of a subject involved in this enjoyment. The reflexive voice is the second portion of the drive that leads the libido around the object of its aim. This voice is also autoerotic. The passive voice is the third and final leg of the circuit's journey. It takes the libidinal energy from the track that went around the object to its return to the erogenous zone of its origin. This is the only voice that is not autoerotic. Lacan says that this final voice the subject must give itself or make an action in order to receive

enjoyment from the movement of the circuit. Though this voice is called 'passive' Lacan says that the drives are always active. (Lacan [1964], p. 178)

This circuit would be for the enjoyment of the erogenous zones and it would allow the subject to go beyond the pleasure principle. An example of such a circuit in the erogenous zone of the anus would be to shit (active), to shit oneself (reflexive), and to make one's self shit. Though the 'active' and 'reflexive voices' both have no subject's outside effect on the respective action, the 'passive voice' causes the subject to be effected by the action and is therefore not really passive, but active in nature.

The drives produce the possibility for the subject to overcome the Symbolic law that is presented by the pleasure principle. This principle creates a limit and a boundary that prevents the subject from crossing over into pure Real jouissance – which would be the death of the subject. Therefore all drives are a death drive according to Lacan. "The function of the pleasure principle is to make man always search for what he has to find again, but which he will never attain." (Lacan [1964], p. 68) This search creates a perpetual looping which one finds in the form of desire.

First let us express what constitutes our idea of desire. Freud first termed what Lacan called "desire" as a "wish" ("Wunsch"). By exploring the unconscious instead of the actual elements of the dream Freud uncovered a wish that attempts to gain fulfilment only in the dream. This wish is lost satisfaction that the person suffered as a child. A satisfaction that never really existed, but still holds a place within the gap of the psyche. This lost satisfaction is what is called jouissance and is of a sexual nature. Specifically it is an "animal like" sexuality based on drives and directed to the primary love object - the mother. These drives however are subject to social laws that prohibit

certain sexual acts with certain individuals in that society - namely the parents. This forms what is known as the Oedipus complex. So this law imposes structure and the wish to have complete satisfaction is never attained or even possible. This complete satisfaction never existed for the subject it was only imagined. The child cries out, vocalises, in order for someone else to fill the need. The need such as hunger or an undesirable feeling gets a reaction from the mother or caretaker. This person then tells the child what he or she needs and wants. The cry now latches onto a meaning — like hunger or change of a dirty diaper. So what the child cries for the mother imposes a meaning onto it. Because another gives the object of need the child then associates this with the love of the other. Now this crying is not only for a need, but also for love and attention. This is a Symbolic demand for love. This Symbolic demand for love can never be satiated. So this, which cannot be satisfied or even articulated, begins to constitute the desire not only of the, but for the Other as well.

The fact that the little subject cannot fulfil his/her own needs, both Real and Symbolic, leaves him/her in a very uncomfortable position of helplessness. This helplessness is a position that continues to cause the phobic subject unease whereas the perverted subject will use this position to prolong his/her enjoyment without fully accessing the Symbolic. So for the subject there is a need that demands to be filled and there is love that is wanted, but can never be given to a satisfactory amount. Which leaves a remainder of something, a lack of satisfaction, which is desire. The subject, who is raised by another subject is not only experiencing this desire, but also is subject to the experience of the Other and his/her own desires. So there is a unified desire for the love and a unified desire that is not satisfactory. This lack in satisfaction is not in

sync and can feel both intoxicating and intrusive to the subject as he/she progresses through life. This is of course a general neurotic usage of desire - specifically the use hysteria has for it.

Desire is situated in such a way that it produces a dependence on demand. What is left over from the signifiers that attempt to quench the desire of the little child through the demand of the other are absolute and cannot find signification leaving a lacking in the other for the subject. This is what is called desire. Lacan says, "The function of desire is the last residuum of the effect of the signifier in the subject." (Lacan [1964], p. 154) He furthers by saying that, "It is this [desire] that makes the junction with the field defined by Freud as that of the sexual agency at the level of the primary process." (Lacan [1964], p. 154) This desire is what pins down the options the little child has regarding sex.

### Sexual Structure

There are two possibilities; having the phallus and not having the phallus. Sex is always signified by the phallus so that one has it or one doesn't. Having said this, it is necessary for the child to have established the law in relation to the father function meaning that the child is either neurotic or perverse. Psychotic structures have no primary signifier in place to produce this junction between the space of the sexes therefore he or she will have to use a delusion or mimic in order to find a suitable sexual

orientation. This is what Jean-Gerrard Burstein calls the "third sex". (CFAR Lecture 7<sup>th</sup> June 2008)

## Father Function

So what do we mean when we say 'father function', 'paternal metaphor', or 'le-nom-du-pere'? When we speak of the father we speak of him on three different levels. The best way to imagine how the father acts as law is to think of him as an idea. Like when you were a child and your mother says to you "just wait till your father comes home." The father isn't there, as of yet, but he acts as a law, a deterrent of sorts, from going against (or even too much into) the desire of the Other or, for the child, the mOther. The 'father' functions through the three registers to create the structure of the subject depending on the extent to which this function is symbolised in an individual subject. (symbolisation begins in the mirror stage and carries on at the stage in which the subject is in the process of alienation and separation.) Lacan tells us in his *Ecrits* (1970):

To speak of the Name of the Father is by no means the same thing as invoking paternal deficiency (which is often done). We know today that an Oedipus complex can be constituted perfectly well even if the father is not there, while originally it was the excessive presence of the father which was held responsible for all dramas. But it is not in

an environmental perspective that the answer to these questions can be found. So to make the link between the Name of the Father, in so far as he can at times be missing, and the father whose effective presence is not always necessary for him not to be missing, I will introduce the expression paternal metaphor.

(Lacan, [1982], p. 39)

This is to say that the father that is there all the time may not function as the "father" in the sense we are speaking about. In fact the father that is never there may function better than one who is. Gender does not play a part in who is or is not the "father". Women, especially those being hysterics, tend to be what they think a man is when necessary. Often the "name of the father" (le-nom-du-pere) is instated by a woman acting as she would expect a father would or as she would wish a father to. This is not to say that there is only one father of no particular sex. This is dependent on what register the father is predominantly functioning in and what progress that father has come to in sexualization (where sex is dependent on the type of jouissance enjoyed by the subject regardless of the genetic or physical sex).

The father function is meant to split the child from the mother's desire and the child's desire from the mother. The paternal function is a metaphor which means it is a function of language where one signifier can be substituted for another. Lacan's formulation of this shows why the father function is a metaphor. (See Figure 6)

Figure 6

Formula for Metaphor & The Name-of-the-Father

$$\frac{S}{\$} * \frac{\$}{x} \rightarrow S \left( \frac{I}{s} \right)$$

$$\frac{\text{Name-of-the-Father}}{\text{Desire-of-the-Mother}} * \frac{\text{Desire-of-the-Mother}}{\text{Signified to the subject}} \rightarrow \text{Name-of-the-Father} \left( \frac{O}{\text{Phallus}} \right)$$

(Palomera [1993], p. 51)

This formula shows that the 'Desire-of-the-Mother' is cancelled out by the addition of the 'Name-of-the-Father' creating an ability for the subject to produce signification. This produces a kind of answer to the question of the mother's desire in the form of the father function. Palomera says that:

This formula, known as the 'Paternal Metaphor', is what guarantees the metaphorical substitution of one signifier for another signifier. The signifier of the mother's desire, enigmatic for the child, is replaced by the signifier of the name of the father which responds, so to speak, to this enigma with the mediation of the phallic signification.

(Palomera [1993], p. 51)

The symbolic father is the agent of castration and this is a signifying function and so the name of the father is also a signifier. A successful father function will have separated the child's desire from that of the mother's and kept the child from becoming a

“semblant of the phallus.” (Palomera [1993], p. 54) If this function is effective enough then the child will be structured as neurotic. This child will live in meaning and being and be a master of language. The Symbolic is fully in tact and due to the child’s progression from once being in its own world (as the psychotic is), then knowing desire, and finally naming the lack.

In all substructures of neurosis the father function is in tact. The father function is there to keep the child from becoming psychotic no matter how the subject deals with that function. The way that each subject deals with the father function decides the structuring of that subject.

#### Return To Freud

Lacan revised Freud’s idea of diagnosis by creating three structures of the psychical apparatus. His structures are as follows: The neurotic, the psychotic, and the pervers. The neurotic is characterized by the mechanism of repression (*Verdrängung*); perversion by disavowal (*Verleugnung*); and psychosis by foreclosure (*Verwerfung*). Once a certain structuring always a certain structuring.

That is why it is always essential to take up again the question of structure in psychoanalysis at the level of the subject. It is what constitutes real progress. It is of course, the only thing that can make what is improperly called the clinical progress.



(Lacan, [1969], p. XX2)

Each structure reacts in a different way and the mechanism describes how each particular structure takes the paternal metaphor in relation to triangulation, and or a quaternary relation, as well as how the structure relates to the Other or the world around it.

Triangulation, and in certain cases the quaternary relationship, creates the structure through the imaginary register. The child's and mother's desire cause a dangerous possibility of overtaking each other. Without the paternal function there would be no way to draw a boundary between the extent to which that desire can be acted upon. Each party has a desire for the other but the function of the father has the power to protect the child and the mother from themselves. Otherwise the child will both want to be enveloped by the Other and fear not being its own being. Being part of what Lacanians call 'the Other' is psychosis. Neurosis is where the father function successfully separates the mother and the child with its "no" and its "name"; or the 'nom-du-pere' as it is known in French, this is what begins the quaternary relationship that produces a neurosis.

In triangulation the paternal function is not always as it seems. The paternal function is not just a man being a father; It is beyond the traditional roles. A mother can be a mother without being a woman, and a father can be a father without being a man or either individual can be both mother and father. These are merely roles, but the functioning of the mother and father, especially the father as a function, is based on signifiers that come about through the imaginary function. Through the symbolic the father is understood by the subject as a threefold symbol. The real father is the father

of the child who is partnered with the mother, the imaginary father is the father figure, and the symbolic father is the father that breaks the love bonds of the mother- child, child-mother relationship (triangulation).

#### Lacan's Return To Freud

Each structure views, or not at all in some cases, the father function differently. In psychosis the father function is non-existent, in neurosis the father function is existent and functioning, in perversion the father function is admitted (Bejahung), but is to some extent imaginary. In all cases the father function is what the structure is created around.

Psychosis is characterized by a lack of the 'name-of-the-father'. The father role is a protector of the child from the desires it has for its mother and the desires its mother has for it. If the father function were absent the Other would devour her child by making it apart of her. The child would lose its identity as an individual, or see itself as part of the mother, and would become a mere appendage of her. The child dislikes this split for affection that the father figure creates, but in the same turn appreciates that the father is protecting it from the mother's desire to satisfy her insatiable needs through it. This absence of the father function may occur because there is no role of father being played out at all or that the mother denies the authority of the father to the child.

Also, words from others that evoke reminders of the father function might also be effective in instating the paternal metaphor. And so a father function can be a man or a woman, or even a word. Every structure orientates itself to the Other who gives the law or part of the function of the Father and this indicates the structure of the subject.

Even if the father is dead or merely absent the idea that the father is present, in an omniscient sense, is enough to instate the name-of-the-father. The mere symbolization of the father role with words creates the function of the father. For example, If the father is dead the mother may remind her child that "Your father would not have approved of this." A child without a traditional father does not however mean the child will become psychotically structured and there is a point at which the structuring can theoretically be reversed, but this is dependent on age and the substitution for the missing role of the father function. With the absence of the name of the father past a specific age the psychical structure is permanently and unchangeably that of a psychotic. Psychotics may seem very normal and then at one point break into a psychotic episode. Though, once the episode is over the psychotic is not healed of his or her psychosis. The psychotic structure still remains and can again collapse causing another episode. Some characteristics of psychosis include hallucinations<sup>17</sup>, language

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<sup>17</sup> Hallucinations are not a character trait of the psychotic structure. They are not at all due to the lack of the name-of-the-father which characterizes the psychotic's mental structure. Rather, it is an imaginary form of satisfaction that the infant once used to self-satisfy. It is actually a form of daydreaming, fantasizing, and dreaming which is found in all three structures of diagnosis. Hallucinations, or daydreams that are indistinguishable from reality, are also present in hysteria and so are not necessarily a characteristic of the psychotic. The difference is that in psychotics there is no form of doubt about the hallucination whereas in neurotics doubt is a point trait. Hallucinations may or may not be present in psychotics, but this is not a characteristic to base a diagnosis on.

disturbances<sup>18</sup>, imaginary relations<sup>19</sup>, invasion of jouissance<sup>20</sup>, no control over the drives<sup>21</sup>, possible feminization<sup>22</sup>, and the lack of a question<sup>23</sup>.

The perverse structure is predominantly a male diagnosis that is characterised by denial of the law of the father. Freud saw the perverse category as originating from castration anxiety where the child fights against the belief that the mother is castrated. Dor says that, "It essentially amounts to the disavowal or denial of reality, the refusal to acknowledge the reality of a traumatic perception—the absence of a penis in the mother and in all women". (Dor [1999], p. 35) Since the subject refuses to let go of this fantasy, the subject contains it in his unconscious and it affects him later in his sexual ideation. One who is of the category of perversion would deny that the mother does not have a penis, due to the maternal fallacy, and can do one of two things. The person can seek the phallic in a man becoming homosexual or the person can seek the phallic in an object avoiding homosexual behaviour and still continuing the fantasy that the woman has the phallus. The latter is a unique structuring which allows two different ideas to be housed in the same psychic structure, "on one hand the acknowledgement of the absence of the penis in women, and on the other hand the disavowal of the

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<sup>18</sup> Failure for the symbolic to overwrite the imaginary, inability to create new metaphors, and broken sentences.

<sup>19</sup> Issues about people trying to take their place in the world. Paranoia about persecution is a prime example.

<sup>20</sup> Unchannelled libido which has not been overwritten by the imaginary due to the lack of *le-nom-du-pere*. It is often covered by imitation, but once that breaks down the psychotic is overtaken with feelings and drives. Sometimes sheer ecstasy of the body as a gigantic overtaking erogenous zone is described.

<sup>21</sup> Lack of the paternal function which creates the symbolic causing no form of morality or conscience.

<sup>22</sup> Return to the original state in the oedipal process – female.

<sup>23</sup> Both referring to desire, but also and most importantly referring to certainty of mind and what is real.

reality of this acknowledgement". (Dor [1999], p. 36) Two entirely different beliefs create the pervert's behaviour—which is termed as splitting of the ego.

Lacan elaborates on Freud's theory in order to make clear that disavowal (*verleugnung*) and repression (*verdrangung*) are two different mechanisms. Freud tried to make it clear that repression is of an idea or thought whereas disavowal is of the Real. The father function plays a very important part in this because the fantasy is oriented to becoming the lacking in the mother. The mother is meant to possess a phallus (the father) and so the child wishes to take that place in the mother's life as a way of making the father exist.

Neurosis is the opposite of psychosis in that the paternal function is accepted and working. It is made up of two definite sub-structures (obsessional & hysteric) and a third that Lacan was not clear on the placement of (phobic). The subject, the object, and the Other are used to formulate how neurotic structures work. The subject is the person in question, the object is part of the Other, and the Other is the partner to the subject. Obsessional and hysteric structures used to be the main sub categorizations of neurosis, but later phobia was incorporated as a subcategory. Lacan says that, "Hysteria and obsession can be defined as radically different subject positions implying opposing relations to the other and to the object". (Fink [2000], p. 121) One wishes to be the object for the Other and the other wishes to deny the existence of the Other as more than a mere possession of the subject. With that said, "The obsessive reduces his partner to an object, neutralizing his partner's otherness, and the hysteric does not so much desire her partner as desire via her partner and wish to be the object he is lacking". (Fink [2000], p. 166)

## The Arguments of Seminar IV

*The lack of availability of an English version of the arguments of Lacan in his Seminar IV has hindered the ability of psychoanalysts and psychotherapists in the Anglo-Saxon world to take up the clinical recommendations of the problem of phobia. Because of this I participated in a study group in 2005-2006 devoted to translating a series of chapters from this seminar into English. Twelve Chapters were translated in total, and I refer to them collectively in the bibliography. They have helped substantially to formulate the arguments that follow and to provide an apparatus for the clinical approach to phobia, that was previously inaccessible in the Anglo-Saxon world.*

Lacan speaks about phobia in his Seminar IV. He uses the case of Freud's Little Hans to make clear what is going on in the child's development. Where phobia is placed in regards to structure is clearly on the side of Neurosis in Lacan's later work, but earlier on in his work it is unclear. Lacan says that phobia is not a clinical entity per say, but is like a revolving plate that goes between the two main fundamental fantasies. Those two fundamental fantasies are neurosis (obsessional & hysterical) and perversion. Later on in his work he calls phobia a neurosis. This has created confusion in the diagnostic use of the term phobia. In the progression of Lacan's theories phobia is spoken about as

sometimes being only a holding place for the child to produce a structure (infantile phobia), it can be merely a symptom found in all structures, and lastly it can be considered one of the most radical forms of neurosis. I will continue with the latter theory.

Lacan's Seminar IV took place in the years of 1956 to 1957. He considered the phobia to be a defensive formation that Hans uses to produce a livable and even thinkable situation in the organisation of this life. Lacan suggests that anxiety turns into fear once it is focused on an object. Freud had also suggested this in his comments on the Hans case. He noted that the initial onset of the phobia resulted only in anxiety and was not directed at a specific object whereas once fear developed it had named an object; In Hans' case it was horses.

Lacan says that infantile masturbation resulted in Hans immersing sexuality. This changed the location of Hans' enjoyment in relation to his mother. Prior to this Hans was in a 'pre-Oedipal triangulation'. This consists of the mother, the child, and the Imaginary phallus. This triangulation was a very enjoyable place for Hans, but once his modality of enjoyment shifted his position in that triangulation resulted in anxiety. In this shift he was in the position of enjoying his mother without restriction. There was no agent of castration or separation from the enjoyment of his own mother and therefore Hans was faced with an absence of the father as a function of separation.

For Freud the phobic object represented the father and in his opinion enlightening Hans about this and the reasons behind his father frightening him would relieve the phobia. Freud did this by having the father sexually enlighten Hans and by Freud himself making a direct interpretation to Hans that his father was the horse he

feared and that he feared his father due to loving his mother too much.

Lacan, on the other hand, does not think that the phobic object represents only one person for Hans. He suggests that the phobic object not only represents Hans' father, but also different people in Hans' life at different times as he needs. (Lacan, [1956], pp. 283-8, 307) Lacan says, "The horse thus functions not as the equivalent of a sole signified, but as a signifier which has no univocal sense and is displaced onto different signifieds in turn." (Lacan, [1956], p. 288) In his seminar Lacan goes into detail about the diversity of ways that Hans fears the horse and all the elements that are attached to the signifier 'horse' for Hans are interesting. (Lacan [1956], pp. 305-6) The horse does at times represent the father and perhaps, more importantly, that lack of Hans' father's function in separating him from his mother's desire.

This separating function is very important in the structuring of Hans. Lacan had mentioned in a previous seminar (Lacan [1956], p. 96) that the father functions on three different registers. Those registers are the Real, Imaginary, and Symbolic. As mentioned previously, Lacan suggests that Hans develops his horse phobia because his father fails to occupy the Real register and as a result also fails to be the agent of castration for Hans in the Oedipus complex. (Lacan [1956], p. 212) Intervention of the Real father would have produced the Symbolic order for Hans, but since this didn't happen Hans resorts to producing an Imaginary object that functions enough as the Real father to result in Hans developing the Symbolic in his thinking. The absence of the Real father causes Hans to use the phobic object as a separator to produce a limit on his desire for his own mother. This helps him proceed from the Imaginary to the Symbolic register. (Lacan [1956], pp. 230, 245-6, 284)



The phobia, both for Hans and for those who are structured in this way as adults, is not a completely negative construction. It makes what was not livable or even conceivable all the sudden organised in a way in which the phobic can use the Symbolic and reduce the trauma of his or her own reality. Lacan considered this a provisional solution in his earlier works, but there have been adult cases of phobia documented. (Lacan [1956], p. 82) In this way phobia has a particular reason for continuing to exist rather than dissipating in childhood.

The phobic object functions as a signifier by representing elements in the subject's world that require a solution. The phobic object itself exists in the Imaginary, but brings these elements into the Symbolic for the subject. Hans uses the signifier 'horse' to represent different places in his life. He represents his father, mother, sister, friends, self, other family, etc. (Lacan [1956], p. 307) "The signifying crystal of his phobia is represented in all possible forms producing solutions to the blockage Hans has in the Imaginary leading to the Symbolic. These impossibilities were worked out through the use of this phobic signifier. Hans is able to find a solution to the impossibilities he faces by way of a sort of signifying equation or formulation that he can use to gain a pathway or answer to the issue he faces. (Lacan [2006], p. 519)

The phobia is used much the same as Claude Levi-Strauss uses his idea of the personal myth. Levi-Strauss says that there is not a natural or archetypal meaning of the isolated elements that make up the myth. The way these elements are combined and recombined in story form change the position and even the relationship between the elements. The positions are immutable. (Levi-Strauss [1955]) This compares to the phobia in that the repeated combinations, or recombinations, of elements, or in our

case signifiers, will allow an impossible situation to be articulated and solved. By solved we can assume that this is not a whole solution, but one that allows the subject to proceed past this particular problem in order to reach the next set of signifiers in the chain. This articulation of the elements produces all the different possibilities of the issue and in this the subject can prepare his or her self to cope with facing it. (Lacan [1956], p. 330)

As mentioned Freud's treatment was to specify to Hans that his father was the horse, but for Lacan the treatment involves working through all the permutations involved in the phobic signifier. This is to say, Lacan's theory is to help the subject develop an individual myth and in accordance with that produce laws and explore impossibilities and combinations in order to exhaust the link. This in his opinion would dissolve the phobia. (Lacan [1956], p. 402) Lacan, of course is only speaking of childhood phobia, as was the case with Freud's work with Hans. Both Lacan and Freud leave this question of phobia as a diagnostic category open to debate.

Hans had not previously been diagnosed with any psychological disorder prior to his phobia. Once Hans developed his phobia Freud and his father began the treatment. Because of this Freud wanted to make clear that his diagnosis was not phobia as a separate diagnostic category. For Freud phobias are found in both neurosis and psychosis and therefore were considered symptoms. Freud said that phobia was an "independent pathological process." (Freud [1909] / Lacan [1962], p. 115) After saying this Freud also developed a diagnostic category called 'anxiety hysteria' which had a primary symptom of phobia. He produced this in order to distinguish it from 'conversion hysteria' or neurotic hysteria. So for Freud phobia can be both a symptom

and a clinical entity.

Lacan repeats this in his work. He views the phobia in three different ways at different times in his theory. The phobia can either be a symptom, a holding place, or a structure. Lacan usually only mentions two forms of the structure of neurosis. Those are hysteria and obsessiveness. Phobia can exist in both and in other structures as a symptom, yet not be classed as a diagnosis. (Lacan [1956], p. 285) This means that the phobia is not central to the strategy that the structure uses to cope with reality. However, at times Lacan called phobia the third neurosis. (Lacan [1977], p. 320) In 1961's seminar he called phobia "the most radical form of neurosis" suggesting that it was in fact one of the structures of neurosis. (Lacan [1961], p. 425) He also said, regarding Freud's case of infantile phobia, that "Little Hans, from the age of four and a half, has what is called a phobia, that is to say a neurosis." (Lacan [1956], p. 221) This indicates that Lacan viewed phobia not only as a symptom to be found across the board in all structures, and/or an infantile holding place for a structure to come into being, but also a structure in neurosis. Here Lacan specifically states that Hans had a neurosis whose main complaint was both anxiety and phobia.

Infantile phobia's best psychoanalytic documentation is the above mentioned famous Freudian case of 'Little Hans', which in Lacanian terms shows the relation of the phobia to the paternal metaphor and to a specific kind of desire from the Other.

After having it underlined for you, that is, the relationship of the subject to its environment, which matter in the course of analysis, we learn incidentally that this is particularly significant in the observation of little Hans,

where his parents can appear, we are told, 'without clear-cut personalities.'

(Lacan [1956], p. 7)

Hans is placed in a position in relation to his parents that produces a block in his development. His father is all too often absent, and it seems that his father and mother were not happy together due to their later divorce, as well as the fact that Hans was allowed, with no interference, to be very close to his mother. This is the exact point that caused Hans to have to produce a phobia to reorganise his Symbolic universe. This phobia allowed him to produce what was seen as lacking – the function of the father.

The issue is that Lacan speaks mainly of infantile phobia and therefore comes to the conclusion that it is a sort of holding place for the other two forms of neurosis or perversion to emerge. He says in *The Seminar on Transference* (1968-1969) that it is like a "revolving plate" or junction where something is worked out, but until then there is just the phobia. Because of this all phobias are not considered in children to be a clinical structure by Lacan. At least this is so in his very early work. What constitutes a phobia is very particular. Instead of considering infantile phobia as a structure it is generally a point at which the little subject orients his or her self towards one of the two neuroses or to perversion. Because of this link phobia seems to have certain similarities with perversion, specifically the fetishist, as well as the other two neurotic structures.

## Perversion

Phobia is like fetishism in the way that the object is used to produce an organisation in the symbolic order. The fetish object and the phobic object are both symbolic substitutions for an element that is missing. Both produce an organisation of the perceived world of the subject and both arise out of problems progressing from Imaginary to Symbolic. Both have roots in the transition between the preoedipal triangulation, which turns into the Oedipal quaternary, but both result in different solutions to the same problem.

Here we find that perversion has some similarities given that the pervert will use the object in relation to the Other's desire. The pervert locates himself as the object of the drive or the position where the Other has enjoyment. Again this is supposed enjoyment because what the pervert is sure is the locus of enjoyment for another may very well be a place that has been repressed due to its excess of enjoyableness by the Other. So the difference between the phobic and the pervert's desire is that the phobic subject does not take him or her self as the object of the Other, rather they pick an object and displace their own desires on to it in order to deflect the desire of the Other.

In perversion the child wishes to take the position of the mother's desired object and in that satisfying the mother's desire. He wishes to do so because the child's desire is also elicited by the mother. Lacan explains the need to be the mother's phallus in perversion:

The whole problem of the perversions consists in conceiving how the child, in its relationship with its mother, a relationship constituted in analysis not by his vital (biological) dependence on her, but by his dependence on her love, that is, by the desire for her desire, identifies with the imaginary object of this desire in so far as the mother herself symbolizes it in the phallus.

(Lacan [2006], p. 554)

And so becoming the phallus ensures that the child gains the mother's desire. Where there is no father function to separate the desires of both the mother and the child the child may have one of two defences.

The first is to give into her desire at that crucial age where the structure is formed and become psychotically structured; or the second is to become the phallus that represents both the father and the mother's desire killing two birds with one stone. Being perverse and having chosen the latter option the question of desire arises. The child does not respond only to the desire of the mother (Other), but to her demand. The demand is never spoken in words and until it is spoken can never be fulfilled. What is spoken is the lack of the Other and since it is not spoken it does not exist. If it does not exist then the child cannot mould his or her desire on the desire of the Other as a neurotic would do. Once the lack is spoken then the object *a* which the child tried to become no longer exists. Until this occurs the pervert continues to refuse giving up *jouissance* and, in that, refusing the law of the father in order to continually gain satisfaction.

The way that the pervert is symbolically structured is that the child is the object of the mother (Other). The child takes satisfaction out of being what the mother wants; which is believed by the child to be the phallus, but is never stated by the mother. This moves the focus of the pervert into the desire of the Other which since it is not verbalized becomes a demand to the object-subject.

Faced with possible loss of Jouissance, the pervert and the obsessive react in different ways – Obsessives submit to the loss, however reluctantly, however half heartedly, and even if he stops trying to get some of that Jouissance back later. He gives up Jouissance in the hope of gaining esteem, recognition, and approval – A symbolic equivalent. He loses one thing to gain another; We might say that he is induced to give up his narcissistic (imaginary) attachment to his penis – Which Lacan refers to as the imaginary phallus,  $\phi$ , the penis as invested narcissistically – and the autoerotic pleasure it gives him, to win something at the social, symbolic level. He gives up  $\phi$  for  $\Phi$ , the phallus signifier, as the socially recognized signifier of value and desire. The pervert, on the other hand, does not hand that pleasure over, does not surrender his pleasure to the Other. Freud insists again and again that the pervert refuses to give up his pleasure – that is, the

masturbatory pleasure related (in his fantasies) to his mother or mother substitute.

(Fink [2000], p. 172)

The reason for the pervert's refusal to give up Jouissance seems to be related to the mother-child, child-mother relationship where the father is not functioning due to interference of the mother.

Clinical work and everyday observation show that mothers are often dissatisfied with their husbands and look for satisfaction in their lives from their relationship with their children. It is also clinically attested that mothers are more inclined to take a male child as their all-encompassing compliment in life than a female child, and we can only assume it is due to the child's sex

(Fink [2000], p. 172)

In cases where the mother and child have a special bond it is hard for even an effective father to cause separation fulfilling the role of the paternal function. In that the child is not threatened into giving up jouissance and instead clings very strongly to it. This may be one reason that perversion occurs instead of neurosis. Disavowal is a defence mechanism against the father's demand that the child give up jouissance and to make the Other pronounce the law. Once the law or desire is pronounced then the subject is freed from the role of object  $a$ , but this won't occur because the father's law is not wholly accepted.



The structure of perversion is also an option for the little child if in the process of the Oedipus complex there is a denial of the castration of the mother who is lacking of a phallus. There is a splitting where the subject knows the mother doesn't have a penis (or fulfilment) and yet insists on giving her what she lacks - himself as the phallus. So there is an imaginary identification with the phallus for the perverse child subject and in that an acceptance of the desire in which the phobic seems to struggle against. The pervert locates his or her self as the object of the drive rather than using the object as a diversion of desire. Because of this there is no introduction of the quaternary element that produces a four-way relation between the mother, child, and father in perversion. Perversion is therefore an entrapment of desire where the subject's desire is not his or her own, but rather is controlled by the Other. It is an option when dealing with this kind of intense desire from the Other, but I argue that it is not the path in which the phobic child intends to go. In fact the question the phobic is dealing with is how to avoid this position. It is a plan to avoid being slave to the desire of the Other (perversion) and even to being obliterated as subject (psychosis). Therefore the subject uses anxiety and objects invested with anxiety to push his or her self away from the gravity of the desire of the Other.

### The Structural Aspects of Phobia

Phobia does however accept the father's law, although to the phobic it does not seem strong enough to separate from the mother (Other). Instead the phobic must use

something else in order to cancel out the desire of the mother. The use of the phobia becomes the object in order to strengthen the perceived lack in the mother (Other), specifically the father function. Where the pervert wishes to be the object the phobic struggles to supplement an object for the mother in order to free his or her self from the Other's complete desire. The pervert is unable to produce this separation and therefore the phobic has a more effective use of the Symbolic through the use of the phobia. Lacan says in the *Ecrits*, "The quaternary is evident: not that interesting transmutations of the object of phobia into a fetish do not occur, but if they are interesting it is precisely owing to their different places in the structure." (Lacan [2006], p. 687/577)

The Infantile phobia is the starting point from which an adult phobia would spring. This point in the child's development is what Lacan calls a turntable or revolving junction where the child makes a pause and a choice of orientation through fantasy. The child at this point can become hysteric, obsessive, phobic or perverse because there is some acceptance of the paternal function. If that function is perceived as lacking and a phobia has been used to supplement this lack in the Other then phobia will be the end result of the development. This position is taken because the mother's desire for the child is too much and there is no guarantee that the child will not be overtaken by desire. The desires of the mother are focused, and not spread out, on other things/people. So now the child presents the mother with something in order to take her attentions away from the sole object of her desire (the little child subject or phallus). This is the phobia and this phobia is not for the child, but presented to the mother, as object, in order to make a separation of attention. The mother focuses on

the child's problems rather than on the child being her everything. In adulthood this positioning remains and is not only for the mother, but changed through the Symbolic to relate to the big Other. This inscription of the symbolic order (which is the law and language) is particular to the subject. It may pop up in love relationships, work, friendships, or family relationships – wherever the Other is present via a repression of the primary trauma of the mother and child relationship, this phobic behaviour strengthens the father function by propping up the Symbolic to avoid the Real uncontrollable desire of the Other.

Adult cases of phobia do exist as well with symptomology basely related to fears and anxiety. This doesn't mean all fears and anxieties are phobic in structure, but through analytic investigation of the primary complaint one may find that the underlying structure is particular to that of phobia. As previously mentioned, Lacan wasn't exactly clear with his representation of phobia throughout the presentation of his theory. Sometimes he positioned phobia with the same mechanisms as those found in the neurotic structure. Whilst other times it seems phobia is a category that the subject undergoes in order to pause in the progression of the mental structure. The main thing to see when reading Lacan is that he was speaking mainly of an Infantile Phobia rather than an adult case in much of his work.

The phobias of the phobic subject are a supportive function to le-nom-du-pere (name/no of the father) and is not a fear of this function but rather a fear of the desire contained in this structure of existence (being) described previously. It is also a fear of the failure of this function and the collapse of the separation between the subject and

the Other. The phobic adds a great deal of Symbolic potency to le-nom-du-pere, but the phobic's real fear is that of desire. Lacan states in his seminar on Transference that:

The mainspring and the reason for phobia is not, as those who have but the word fear on their lips believe, a genital or even a narcissistic danger. What the subject is afraid of encountering is a certain sort of desire linked to certain privileged developments in the subject's position vis-à-vis the Other, as is the case in little Hans' relationship with his mother that would immediately make all signifying creation, the whole signifying system, fall back still further into nothingness.

(Lacan [1961], p. 305)

To avoid desire in the fantasy of the phobic subject is to avoid that which causes desire. 'Le petit a' (Object both desired and desiring) is forced on the subject by the Other which causes the subject to be reminded of the Other's powerful desire or ability to cause the death<sup>24</sup> of the subject. This object represents an ever-changing Symbolic key to which the subject places a great deal of interest in. For if this object fails to produce the separation needed then chaos will ensue from the signifying chain.

So let us talk more about this particular kind of desire that indicates to us that we are dealing with a phobic rather than a symptom of phobia. Desire in Phobia is a very particular relationship related to the parents in early childhood. The phobic adult

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<sup>24</sup> Death is meant here as a lack of existence as a subject not a corporeal death.

may not even realise this just as any normal person may not realise the work of desire in his or her own life. This desire influences many aspects of our being - from the unconscious to the conscious. One may very well become trapped in a path of desire or find that it pushes them forwards on a particular path.

For phobics the desire is oriented more specifically than that of hysteric or obsessive neurotics. The initial Oedipal set up for the phobic is perceived as not having a strong enough limitation on the desire of the Other. So the subject does not perceive the relationship between the mother (Other) and the child as separated enough by the real father and so as an additional support the child evoked the Symbolic law through the phobic object. The desire of the mother is perceived as far too strong and focused on the little subject. Therefore the subject needs something else to produce a protection from it. More than a protection it is a diversion of desire from the subject to an object.

Like the natural instincts of an animal the phobic avoids death by preparing the body to either run away from this desire or fight it. The real body of the subject will go through the process of preparing for the event, but there is no way to escape the Symbolic desire of the Other. Because the Other's intent is to engulf the subject with its desire the only option for the subject is death. When desire is filled in a subject it leaves the subject with nothing left but this death or lack of existence through its own desires. The pleasure of the desire of the Other mixed with the pain of no existence engulfs the subject leaving the phobic filled with aversion, yet a certain fascination, to this situation which through thought is repeated and altered in order to produce many situations or

options. Though the subject creates an Imaginary, which is the fear that signifies everything in being, in order to embrace the Symbolic order.

We must also look at the ego and the libidinal investment in the actual body. The ego is an agency that allows the subject through the imaginary register to capture an image that is complete and functioning. This captured image is something that is outside the subject. It forms the ego or what is known as the mental projection of the body image. What cannot be represented is libido or jouissance, which is invested into the physical body rather than into this false image. Otherwise if the agency of the ego did not form this veiled image the body would be in parts and lack co-ordination. To have this agency functioning is to have a mastery using a negative hallucination of the body. However, the agency of the ego is in fact false and is only there to conceal what is lacking (this fragmented body). For a failure to occur here is to plunge back into discord with the body and to lose control over it. Therefore issues with phobia often relate to the ideation of control.

### Adult Phobia

The Freudian case of 'Little Hans' shows the relation of the phobia to the paternal metaphor and to a specific kind of desire from the Other. DSM & ICD on the other hand have different ideas of what constitutes a "phobia." To the ICD & DSM phobia is nothing more than a symptom that can manifest in any number of diagnoses. It is diagnosed via the symptom of fear that we are trying to show in Lacanian diagnostics is

not the case. We recognise a phobia as a symptom, able to manifest itself in any structure, but we also recognise that there is a particular kind of neurosis whose major complaint is that of excessive anxiety. It can produce phobias, but the key issue is that the anxiety in this particular kind of neurosis is the way that the subject copes with his or her desire.

Though there is much debate over the issue of adult phobia as a structure of neurosis this may be due to widespread lack of Lacan's published works. Lacan himself has referred to it as such in his later theory. I will continue to take up the later position of Lacan to say that the roots of the symptom for the phobic neurotic are based in the Imaginary register. The fear here is that the Other is so much that it will overtake the subject. The phobic object represents a signifier that is signified by many things. The object itself functions as a signifier to represent the primary relation to fear. This primary relation goes back into infantile positioning to the mother as Other. The phobic uses thought, and permutations of thought, in order to restrict the desire of the Other (mother) and uses the phobic object in order to have use of desire in being. The desire of 'being' is too much for the phobic so thinking is used as a restrictor. The phobic will throw anything it can in between his or her self and the question of desire. This is where the phobic object becomes a very important tool. It is an Imaginary and Symbolic object that is used to access and control the Real.

To go back to the problem of structure, Lacan diagnoses via mechanism. Symptoms are not used as a basis for diagnosis using Lacan's method. If we assume that phobia is a structure of neurosis then the structure of neurosis will provide the same mechanism for the phobic neurosis as it does for obsessional and hysteric

neurosis. In neurosis repression is the primary mechanism of defense. The mechanism of repression is the pushing out of consciousness of a thought for which affect is then displaced by the ego or super ego due to potential pain in admission or remembrance. In Miller's article on the ego-ideal Lacan discusses the central argument of repression:

Repression, he says and this is an essential point of the argument, proceeds from the ego, from its ethical and cultural requirements. The same impressions, experiences, impulses, and desires that one man indulges or at least works over consciously will be rejected with the utmost indignation by another, or even shifted before they enter consciousness... Repression, which has, in the end, a normalizing function.

(Miller [2004], p. 132)

Repression is used to protect the ego from pain and depending on what one finds painful explains what one represses. In the case of the phobic it is the existence as a being who desires and being is desired in turn. Lacan says that "what is repressed is neither perception nor affect, but the thoughts pertaining to perceptions, the thoughts to which affect is attached". (Fink [2000], p. 113) Most importantly to be able to dislocate the affect from perception, and the perception from the thought in order to push the thought away, the reality of that thought must be accepted into the psyche. In order for reality to be accepted into the psyche one must be able to function in the Imaginary. After the painful material is repressed it tends to resurface Symbolically



through slips of the tongue, dreams, associations, actions, anxiety, panic, and many other symptoms.

Repression is the mechanism for phobia and this is why Lacan later classed phobia as a neurosis. Phobia also seems to be tied closely with the operation of hysteria in that both hysterics and phobia start out as the object of the mother's (Other's) desire. The phobic is the imaginary object of desire for the mother and the support for the name-of-the-father. The thought that the phobic is the mother's desire triggers a fear of the role of the father function failing, this is why the object that supports the father function often frightens the phobic. Without the paternal metaphor the subject could never gain freedom from the bonds of the desire of the Other and desire to be of the Other. One would be psychotic and totally without separation and full use of language.

The phobic uses a forced signifier to act in the place of a perceived lack in the father function. Perhaps this is the quest of the phobic – to prove that there was once in the Real this primary law that would have acted perfectly to ease the subject's anxiety even though it is only through the Symbolic that this function ever existed and was never in the real at all. Just like they hysteric and obsessional feel something is missing in the Other that must have once been there the phobic finds this lack specifically located at the point of the phallus/law/prohibition of the Other's desire.

To go back to the problem with the position of this clinical entity it must be noted that phobia in adult cases could be a sign that the symptom should remain untouched. Some phobias are symptoms, others are a clinical entity, and still others are only found in child development. The symptoms are there for a reason perhaps to bind

jouissance in the body in a way that it could not be handled otherwise like in the case of psychotic phobic symptoms. In this case they should be left alone. Phobia is closely tied to the sexual or the organ and is therefore closely knotted to the name of the father, which is something that should never be touched in psychosis. The sexual link is because of the desire that is both of and for the mother.

Of the three structures any can have the symptom of fear or phobia. The difference is that the phobia as a symptom isn't the main concern of the subject or a life altering ongoing experience when presented dialectically. For instance a psychotic's phobia may be oriented in a more paranoiac way than another structure. The obsessive may deal with the phobia in a more ritualistic way and the phobic may have fear and see it as a normal part of everyday life that is until he or she seeks analysis. The fear as a phobic structure of neurosis is a supportive function to le-nom-du-pere (name/no of the father) and is not a fear of this function but rather a fear of the desire contained in this structure. The phobic adds a great deal of symbolic potency to le-nom-du-pere, but the neurotic phobic's real fear is that of desire.

If we start with how the subject begins in life. The first love object for any subject is that of the mother. This relation becomes the basis and example for future loves via the fantasy function. This big Other holds an imagined power (by the subject) and incorporates the instatement of le-nom-du-pere or law in what ever way the child orients itself to this Other. As each structure forms, the desire of the subject differs depending on this orientation and the way the child accepts (or does not accept in the case of psychosis) the father function.

Desire to be what the mother lacks is a strong imaginary influence on a child. Le-nom-du-pere is meant to alter the desire for the mother. The result of this is signification that something lacks or is lost, but that something never existed in the first place. This seduction the child plays with its mother is what Lacan calls "desire." Even as adults this seduction continues to fill the lack. Instating le-nom-du-pere is meant to separate the child from the mother and substitute the unbound enjoyment the infant gets from her for something other - something within the bounds of society. Just like in the Oedipal process when the child reaches castration the male child can have any woman other than his own mother, she belongs to the father. This is just another way to get this idea of substitution of enjoyment across. You can't have this one, but you can have all the other ones. Or full enjoyment is forbidden here, but allowed partially with some constraints elsewhere. That is the law that the father puts across to the child.

The name or no of the father plays a major role in organising structure. It can be non-existent, denied, or repressed, but it is always in some way regulating the function of a "subject." In the end le-nom-du-pere either leaves the subject in a primarily Imaginary relationship or creates the ability for the subject to substitute with a Symbolic register. The name or no of the father is not necessarily a father, a man, or a person. The mother may in fact be the one who gives the symbolic to her child, as long as the child can create the first signifier the chain of signification can be infinite (this is indicative of neurosis). It all begins in the early stages of childhood in the mirror phase with the recognition of the self in relation to another. It is a self that cannot be everything for the Other by law of le-nom-du-pere.

Eventually in the development of the subject the Symbolic is used to produce this function and the child embraces the name of the father as the fourth element in triangulation making a quadrilateral relationship. This completes the Oedipus complex in the phobic child, but may not lead to a phobia persisting into adulthood. If the phobic symptom serves to produce the appropriate separation of desires needed then the child proceeds to structure itself as either obsessive or hysteric. Lacan uses a "revolving plate" scenario where the child at the point of phobia can become any neurotic structure or orient in the way of a perverse structure. If a particularity in desire sustains the inability to produce enough separation (in the view of the subject) then the phobic child will remain in this particular neurotic structure of phobia into adulthood. The phobia acts as a support to the father function to make it function as a stronger force in the separation of desires and this need for extra meaning will carry on into adulthood.

The particular desire that is produced by a phobic structure goes back to the perception that the child had and the failure of the parents to produce the clear lines between their own wants/wishes/desires and the desires of the subject. The need to continually combat the separation of his or her own desire from the desire of the Other becomes a life long struggle. It is a persistent desire from the Other and a poorly articulated desire from the "Father" that does not certainly (at least in the perception of the subject) leave him or her free from the subjection of the desire of the Other. In effect the desire of the subject is under attack from the Other who wants to make its desire that of the subject's. This produces a problem for the phobic in producing an adequate separation from the Other.

What do I mean by the desire of the father? In triangulation it is the desire formulated for the mother that produces the law. So the father possesses control over the mother to moderate the mother's possession and control over the child. If for some reason this desire is hinted at, but not made certain then the child must evoke the law. This law is produced only when the father has established that there is some kind of mutual desire between the mother and father. The law is that the mother belongs to the father and not to the child freeing the child from subjections to the desire of the mother. This introduces the fourth element for the child. This element is the law.

The mother introduced the third element for the child and that is the phallus. So now instead of looking at the "mother-child-father" scenario we can see that what really is happening is that "phallus-child-mother" scenario. The phallus is what the mother desires. So the question for the child is "Am I the phallus for mother?" The phallus is also a lacking place in the mother. A place she strongly desires to fill. If the father can take the place of attempting to fill this desire for the mother then it lessens the anxiety for the child. If, however, the father cannot take this place and the mother looks elsewhere then the child must use another means to separate his or her self. The phobic object is then an option created to be used as a buffer between the situations of being symbiotic and separated.

Now we have the dynamic to appease the desire of the mother partially. Mother – Phobic Object—Child: This schematic shows a method of distraction for the mother and a way to partially appease her lack, but mainly to cause the effect of diversion from the mother putting the child in the position of object. This positioning of desire and use of anxiety helps the subject to avoid being put into the position of object like that of the

perverted subject. If this continuation occurs then the desire of the phobic is re-symbolised throughout his/ her life. Now the desire of the mother becomes the desire of the Other, the desire of society, of work, of relationships, and of life itself. (See Appendix C) The symptoms that cause problems in the life of the phobic are remainders or Symbolic links to the original fear that the mother desired them more than what would be considered to be normal. So now society demands more, relationships want too much, and work now desires to cross all personal boundaries - panic and terror ensue on every level.

Anxiety becomes a defence against the change in position from a subject in a place where they are individual, but under some form of control to the frightful place of a subject stripped of his/her existence as in the case of psychosis or a subject stripped of his/her own desire such as in perversion. This last case for concern is only a fear, but the knowledge of the position and the knowledge of this desire from the Other creates the desire of the phobic subject to escape all situations. The experience of extreme anxiety signals the imagined danger of the situation. Anxiety becomes a direct path to the desire of the Other and therefore creates a warning boundary or a guideline for the phobic subject. The phobic will avoid the things that cause him/her anxiety and in effect avoiding this desire that the Other has. The reason these certain things cause the phobic anxiety is that it is exposing that desire that is hidden from view from other neurotics, accepted by perverts, and constantly tormenting the psychotics. The phobic does not realise this desire consciously, but it is on an unconscious level which is triggered by the preconscious alarm system of anxiety. It is therefore placed along an unconscious axis through anxiety in order to keep what knowledge about this particular

desire exists hidden. As a result the phobic will have symptoms with no real recollection as to why or sometimes even how the symptom began.

The phobic signifier is primarily linked to the perception of the relationship between the mother and child (desire). Like other signifying chains this signifier branches off into a loop to continually divert the conscious realisation of the desire of the Other. Therefore treating phobia as a symptom is not effective in clinical practice. Exposure to the fear only produces more reason for the phobic to avoid or dread the phobia. The best means of treatment is to expose the links related to this particular type of desire and reduce anxiety when possible by shortening sessions. Exploration of the personal "myth" and creation of options in relation to current situations are most effective in ridding the person of excessive anxiety. Once the father function is shown to be working correctly through these signifying chains the phobic will automatically begin to feel less and less anxiety in his or her life - though this modality of being is never going to disappear completely. A structure does not change in the Lacanian view, but can become adaptive to every day life reducing anxiety states. However, at times when the patient is most stressed or has a lot of social pressures the path of anxiety will again resume in order to act as a buffer. It is a structural diagnosis rather than a symptomatic one and the anxiety serves a function in relation to psychological organisation.

Lacanian treatment of the structure particular to the phobia of a child can be subsumed under two headings. The first is the child's difficulty instating the Symbolic, that is the child is inclined to continue on with the functioning of an object rather than to allow the structure of the Symbolic to lead it out of this initially more Imaginary relation to the world. The second is the existence within the child's phobia of the

misrepresentation of the father function. Clinical interventions, according to Lacan, need to be organised around this theme and not around more behavioural symptomatic variables currently proposed by Anglo-Saxon clinicians.

## Conclusion

The diagnosis and treatment of phobia remains problematic in our modern forms of working with this phenomenon. I have discussed a range of theories and treatments that have been used to treat what is currently known as phobia. Currently the use of CBT is preferred both in the US & UK. Pharmacology is also a treatment more often than not used. The problem with these treatments is that the phobia is seen as a symptom or a cluster of symptoms rather than having a definitive cause. These symptoms are an unorganised way to manage patient care due to the variety of underlying causes that can be responsible for such symptom(s). This in turn makes the differential diagnostic of a phobia difficult for therapists and doctors who would encounter it. Instead of guesswork and elimination of symptoms to find a cure I am advocating a new way of looking at phobia that in turn would change the way that therapists and physicians would diagnose phobia.

The history of phobia and its treatments are important for understanding the Lacanian diagnostic. A time line of the progression from hypnotherapy, neurasthenia, and neurological studies lead us to an understanding of Freud's concept of phobia and



its treatment. Freud discovered an interesting aspect of the treatment of human suffering; He worked with what he called the unconscious and at the time it was a new concept in treatment. Many had worked with what Freud called the unconscious, but none had named it and described it as he did. His work shows us that none of medicine, neurology, and hypnotherapy could explain the phenomena and treat them satisfactorily. Freud began to fully explain this process and the psychic apparatus creating a reorganisation of the diagnoses of the day. He explained why such symptoms would effect a patient and from this logic he developed mechanisms and structures that still influence modern modalities of psychotherapeutic treatment today.

Freud's new ideas allowed new ways of working with patients and produced many case studies. Freud's case of a five year old boy provided an example of childhood phobia in a way no other physician had. The documentation of Hans' development has proven invaluable to those studying, not only phobia, but childhood development as well. The documentation of the case and ideas which stem from it could lead others to approach what we now call psychology, psychotherapy, psychoanalysis, and psychiatry differently.

Lacan took up where Freud left off and further organised psychological diagnostics into a much more solid set of mechanisms. He did not change Freud's theories, but rather returned to the original work of Freud and clarified it. At the second world war many theories had developed from Freud's original work and many protégés of Freud pushed their adaptations of his theory forward into what we know now as ego-psychology. Lacan wanted to return to Freud and work in the ways of Freud.

Specific to this paper Lacan's work on the case of 'Little Hans' demonstrates this return to Freud. This work of Lacan's, which is as yet untranslated, is an essential tool for understanding phobia. Drawing out its implications as important consequences for the clinical work that has been developed in the Anglo-Saxon world quite separate from Lacan's work. By seeing and understanding Lacan's formulation of childhood phobia doctors and therapists in the Anglo-Saxon world can find formulations that radically alter –for the better— the forms of technique that they have been applying to both young and old patients.

This work also leaves some important variables for further research. Full translation of Seminar IV is still unavailable in any form in English. Lacan claims that phobia can be a symptom, holding place, or a structure depending on what point in the progression of his work you are reading. These options can be further explored to expand the understanding of phobia. This could be very helpful to not only English speaking Lacanians, but also to non-Lacanians therapists, doctors, and anyone concerned with the psychotherapeutic process.

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## Appendix A

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This is the account of Little Hans' analysis as written in Freud's 1909 paper entitled 'Analysis of a Phobia in a Five-Year-Old-Boy' ('Analyse Der Phobie Eines Funfjahrigen'). To give a background Hans was born in April of 1903. The first reports received by Freud were given in 1906 when Hans was three to three and a quarter years old. All of the following is an account presented to Freud by Hans' father.

### The Analysis of Little Hans

On January 5th 1908 Hans goes into his mother's bed and says to her "Do you know what Aunt M. said?" Referring to an earlier time in the day when Hans was being given a bath by his mother while his Aunt was watching. His Aunt had apparently made a comment to Hans' mother that "he's got a dear little thingummy" (Freud [1977], p. 186) Hans attempts to show his mother how great his 'thingummy' is by restating what his aunt had said.

On January 7th 1908 Hans' first signs of phobia appear. He is walking in Stadtpark with his nursemaid when Hans begins to cry in the middle of the street and begs to be taken home to 'coax with his mummy'. When he got home his mother asked him why he had gotten upset, but he only cried in response. Later on he had cheered up a bit, but by night he seemed fearful until his mother 'coaxed' with him. (Freud [1977], p. 186-187)

On the 8th of January 1908 Hans' mother decided this time she would take Hans on his walk to see if it would help. They go for a walk at Schönbrunn, but in the street Hans became frightened and his mother decided she would take him home. As they were walking home Hans tells her "[he] was afraid a horse would bite [him]" (Freud [1977], p. 187) That evening Hans had a panic attack over the idea that he knew he would have to go on another walk tomorrow. This fear then expanded to the idea that "the horse'll come into the room" and bite him. (Freud [1977], p. 187) Once calmed down Hans mother asks him if he puts his hand to his widdler. Hans answers, "Yes. Every evening when I'm in bed." (Freud [1977], p. 187)

On January 9th 1908 Hans gets a warning from his mother not to put his hand to his 'widdler' before his afternoon nap, but Hans couldn't resist and did it anyway. He says he did 'for a little bit'. (Freud [1977], p. 187)

Hans' father consults with Dr. Freud about his son's fear and Freud suggests that Hans' father sexually enlighten his son. Dr. Freud feels that Hans has an obsession with widdlers and that explaining the puzzling aspect of the widdler would help Hans to rid himself of his repressed sexual urges. After this consultation whenever Hans would enquire about widdlers his father was meant to explain. As a result from March 1st through the 17th Hans' father began to enlighten Hans (Freud [1977], p. 191) There was a quiet period, but Hans' obsession with widdlers now turned into a compulsion about horses. Hans now felt compelled to look at horses. "I have to look at horses, and then I'm frightened." (Freud [1977], p. 191) So Hans had to keep within his sight the thing that caused him the most distress. It was the point where the question about the widdler turns into a question about a horse.

Hans' phobia begins to increase from this point. He catches the flu and is bedbound for two weeks. Once he recovers his phobia had increased to the point that he couldn't go any further

out of the house than the balcony (Freud [1977], p. 191). He then spends another week indoors due to having his tonsils out. Having stayed indoors again makes it difficult for him and his phobia increases (Freud [1977], p. 192).

On March 1st Hans' father attempted to explain to Hans that horses don't bite. Hans then tells his father: "But white horses bite. There's a white horse at Gmunden that bites if you hold your finger to it it bites." (Freud [1977], p. 192) Hans explains that Lizzie, who was a neighbour of his at Gmunden, went away a luggage cart with a white horse pulling it came to her house to get their bags. Lizzie's father warned her not to touch the white horse or it would bite. Hans imitates Lizzie's dad by saying, "Don't put your finger to the white horse or it'll bite you." (Freud [1977], p. 192) Hans' father then remarks that it's a widdler you shouldn't put your hand to. Hans then says to his father "But widdlers don't bite" and his father then leaves Hans with the thought that perhaps a widdler does bite. (Freud [1977], p. 192)

On March 3rd Hans' father tells him that his "nonsense" will get better the more he goes out on walks. (Freud [1977], p. 192) Hans then says "Oh no, it's so bad because I still put my hand to my widdler every night." (Freud [1977], p. 193) The new maid also lets Hans ride her while she cleans the floor. Hans called her "my horse" (Freud [1977], p. 193)

On March 10th Hans tells his nursemaid he's going to punish her by making her undress completely. The maid replies to him that it's not much of a punishment because there is no harm in that. Hans tells her "Why, it'd be shameful! People'd see your widdler." (Freud [1977], p. 193)

March 13th Hans' father told him that if he wouldn't touch his penis he would start to get better. Hans tells his father that he no longer touches his penis. Hans' father insists that Hans may not,

but that he wants to touch his penis at night. Hans agrees that he wishes to. On this night to prevent Hans from wanting to touch himself he was bundled in a bag in his bed. The bag seemed to give Hans hope that his 'nonsense' would go away and as a result his father reports he seemed less fearful. (Freud [1977], p. 193)

Hans is coaxed out by his father every Sunday to visit his Grandparents in Lainz. They would go on a Sunday because there was very little traffic. On March 15th Hans went to Lainz to see his grandparents. He resisted, but went in the end. There was no traffic on the street that day. Hans commented "How sensible! God's done away with horses now." (Freud [1977], p. 194) On the way to his grandparent's home Hans father explains to him that girls don't have widdlers. Hans asks again if his father has a widdler just as he had at a much younger age while watching him undress. His father asks him what he is thinking. Hans explains his thought: "But how do little girls widdle if they have no widdlers?" (Freud [1977], p. 194) His father then explains to him that little girls do have a widdler, but that their widdler is different from his widdler.

At this point Hans father says the phobia begins to diminish. Hans has another dream that wakes him up in the night. Hans recalls the dream: "I put my finger to my widdler just a very little. I saw mummy quite naked in her chemise, and she let me see her widdler. I showed Grete, my Grete, what mummy was doing, and showed her my widdler. Then I took my hand away from my widdler quick... She [mummy] was in her chemise, but the chemise was so short that I saw her widdler." (Freud [1977], p. 194)

March 22nd Hans went on his usual Sunday trip to Lainz, but also stopped by Schönbrunn. His mother tells him that if he feels afraid all he has to do is to turn his head away. His father confirms that he did this. At the zoo Hans has a fear of the larger animals and refused to see the Giraffe. He seemed to be entertained by the smaller animals excluding the pelicans. His father

interprets that Hans fears big animals because they have big widdlers. It would stand to reason given that when Hans was younger he had asked his father to draw him a Giraffe's widdler and there was some question as to how big a giraffe's widdler would be. Hans' father also insists that Hans must have seen a horse's penis and that he must have gone into the stables. Hans willingly admits that he had seen them often at Gmunden. (Freud [1977], p. 96). Hans' father suggests to Hans that he was frightened by the big widdlers. Hans replies that "And everyone has a widdler. And my widdler will get bigger; It's fixed in of course." (Freud [1977], p. 196)

On March 27-28th Hans has a bad dream and goes to sleep with his parents in their bed. He wouldn't say straight away what he dreamed, but said he would tell them tomorrow. The next morning Hans recounts his dream:

"In the night there was a big giraffe in the room and a crumpled one; and the big one called out because I took the crumpled one away from it. Then it stopped calling out; and then I sat down on top of the crumpled one." (Freud [1977], p. 199)

The big one just stood there so Hans hold the crumpled one in his hand until the big one stopped calling out. (Freud [1977], p. 200) Hans' mother 'pesters' him about his dream (Freud [1977], p. 201). Hans claims he was not afraid in the dream, but rather ashamed. He has no idea why he feels this way. His father notes that Hans has seen giraffes at Schönbrunn zoo and that he also has a picture of a giraffe and an elephant above his bed. (Freud [1977], p. 201) Hans' father has him start a free association exercise. Hans's thinks of raspberry syrup and guns for shooting. His father notes his syrup is for constipation and he often called shitting "shooting". (Freud [1977], p. 258)

Hans father then provides Freud with an interpretation to Hans' dream. His father suggests to Freud that:

"The whole thing is a reproduction of a scene which has been gone through almost every

morning for the last few days. Hans always comes into us in the early morning and my wife cannot resist taking him into bed with her for a few minutes. Thereupon I always begin to warn her not to take him into bed with her ('The big one called out because I had taken the crumpled one away from it'); And she answers now and then, rather irritated, no doubt, that its all nonsense, that after all one minute is of no importance, and so on. Then Hans stays with her a little while. ('Then the big giraffe stopped calling out; and then I sat down on top of the crumpled one.')

(Freud [1977], p. 201)

On the 29th of March Hans and his father visit the zoo at Schobrunn. Upon their visit a rope sectioned off the garden leading to the sheep and as a result they could not go to see the sheep. Hans was "astonished" by the fact that this simple, easy to get under, rope was stopping them from going to see the sheep. Hans could think of a very simple way to get around the rope. All that was needed was to crawl right under it and the problem as he saw it was solved. Hans' father however explained to Hans that the rope was meant to let them know not to go that way and that any violators would be caught by the policeman or upholders of the law. He also inserted that "respectable people" don't just disobey a law by crawling under the rope that was placed there. (Freud [1977], p. 202-203) So Hans is now aware that such a flimsy rule is upheld by a punishment that is greater than the rule itself.

On the following day, March 30th, Hans goes to his father in the morning to tell him something that had come to his mind. Hans tells his father that he had thought too things. The first thing he remembers, but the second he forgot. What Hans had thought was that "[He] was with [his father] at Schobrunn where the sheep [were]; and then [they] crawled through under the ropes, and then [they] told the policeman at the end of the garden, and he grabbed hold of [them]" (Freud [1977], p. 202) It was obviously related to the previous day's events at Schobrunn where his father explained to him that "decent people" didn't break the law. (Freud [1977], p. 202-203)



Hans fantasises about breaking the law and as a fulfillment of law being arrested for his having directly disobeyed the flimsy rule.

Despite the introduction of this idea of a symbolic rule that is upheld by punishment the dream of the evening of the 27th was still very important in the mind of his father. His father begins to place names to people in real life with the images he had in his dream. Hans' father takes Hans out to Lainz as usual to see his grandparents on the 30th. On the way out the door Hans' father calls his wife the 'big giraffe' that seems to leave Hans is puzzled. Then his father tells him that his mother is the big giraffe and Hans finishes the sentence by saying "and Hanna is the crumpled one." (Freud [1977], p. 202) Later on the train Hans' father explains his interpretation to Hans and Hans agreed with his father. His father then associates to him that the long neck on the giraffe reminds him of a penis. Hans then takes up this idea by saying, "Mummy has a neck like a giraffe, too. I saw, when she was washing her white neck." (Freud [1977], p. 202) Hans associates the penis, the neck, and the giraffe with his mother as his father earlier suggested to him.

After his visit to his grandparents Hans recalls the second thought that he had in the morning. His second thought also illustrates that Hans is thinking about these laws. He recalls the least obvious law, not crossing a roped off area, and forgets the most obvious law. His second thought is that he and his father went on a train and then smashed out a window. So then a policeman arrested them and took them away as punishment. (Freud [1977], p. 203) It is far more obvious that one does not smash windows and that anyone who did would get into trouble and less obvious that crawling under an obstacle would lead to arrest. Hans seems to be trying to make the connection logically through scenarios.

Later in the day on the 30th Hans and his father go to visit Dr. Freud. Freud tells Hans "He was

afraid of his father precisely because he was so fond of his mother." Freud continues to say that "it must be, I told him, that he thought his father was angry with him on that account; but this was not so, his father was fond of him in spite of it, and he [Hans] might admit everything to him [his father] without any fear." (Freud [1977], p. 204) Hans' father wants to know why Hans thinks he is mad at him and says to Hans, "Have I ever scolded you or hit you?" (Freud [1977], p. 204) Hans quickly replies "yes". His father denies it and asks when. So Hans recounts that it was "This morning when he head butted father" (Freud [1977], p. 204)

April 2nd is noted by Hans' father as the first real improvement of the phobia. Hans at this point still runs from horses, but will hesitate more than previously. (Freud [1977], p. 205)

On April 3rd Hans no longer runs when he sees a horse. Over a period of several weeks Hans had not been in the habit of getting into the bed with his parents in the mornings as he had previously done. On this morning, however, Hans gets into bed with his father and tells his father that he is frightened. When his father asks of what Hans tells him he is frightened to be without him, that is to say without his father. (Freud [1977], p. 205) Hans tells his father: "When you're away, I'm afraid you're not coming home." (Freud [1977], p. 206) He then recounts a time when his mother tells him she won't come back because he had been naughty. (206) Hans' father admitted that he had been absent a lot especially at Gmunden. (Freud [1977], p. 207)

At Gmunden Hans not only has a memory of his father being absent, but also of a white horse that bites. This horse also takes his little playmate's bags away from Gmunden to the station. It is a memory of both a horse that bites, but also a person leaving like his father may have. Later that morning at the breakfast table when his father stood up to leave Hans says to him "Daddy don't trot away from me!" (Freud [1977], p. 207). Hans suggests that his father trots as a horse trots. It is an unusual word to use when speaking about walking away or moving away from an

object. This word "trot" suggests that Hans links his father to the image of the word "horse". It would also make sense that what was said in bed that morning was within the thread of thought relating to his father being too absent. Hans does say "not all white horses bite" like the one that took Lizzie's bags. (Freud [1977], p. 208) His father had told him this earlier on March 1st.

Since had started to show progress he was not running when horses approach the house and he now believes that not all white horses bite. So when his father asks him why he's afraid of carts he says "I'm afraid the horses will fall down when the cart turns." (Freud [1977], p. 208) Hans' father lists the things that he knows Hans is afraid of. He's frightened by carts at the loading dock that are starting to take off, large dray horses, quick driving vehicles, buses and moving vans, and coal horses. (Freud [1977], p. 208, 211, 216) This is all because the horse might fall over in these situations.

On April 5th Hans again attempts to get into bed with his parents like he did before. This time he is sent back to his own bed and told by his parents that as long as he comes to sleep in their bed, and not his own, he will have his phobia. Hans replies, "I shall come in all the same, even if I am afraid" (Freud [1977], p. 209)

Later Hans wants to go to the courtyard where other boys play, but is too frightened. In front of Hans' house is a warehouse where horses are driven with carts. The carts are loaded at the dock and enter and exit through gates in front of his house. (Diagram: Freud [1977], p. 208) Between the loading docks and the street in front of Hans' house is a courtyard. Carts park here while being loaded at the dock. Boys climb the carts and boxes to get on the dock. Hans says, "I'm afraid of standing by the carts and the cart driving off quickly, and of my standing on it and wanting to get on to the board, and my driving off in the cart." (Freud [1977], p. 209) By the

board he means the loading dock. Hans explains he's not afraid of being taken away from his mom because he can make his way home in a cab and he knows his own house number. He doesn't consciously know why he is afraid of being driven off in the cart, but his father has overlooked the statement he made on April 3rd. On that date Hans says that he fears being without his father.

Hans wants to get over the board because he's "never been up there" and he would "so much like to be there". (Freud [1977], p. 210) He would like to be there because he wasn't to load and unload boxes and climb around on the boxes that are already there. (Freud [1977], p. 210) Hans tells his father "Do you know where I learned the climbing about from? Some boys climbed on the boxes, and I saw them, and I want to do it too." (Freud [1977], p. 210) The problem is Hans can't even make it to the boxes in order to climb on them due to his phobia.

In the afternoon of April 5th Hans is taken out again by his father. As they are walking his father asks him "Which horses are you actually most afraid of?" (Freud [1977], p. 210) Hans quickly replies all horses, but his father probes him for something more specific. Hans then tells his father "I'm most afraid of horses with a thing on their mouths. And I'm most afraid of furniture-vans, too" (Freud [1977], p. 210) Hans then explains the fear of furniture-van horses by telling his father that "I think when furniture horses are dragging a heavy van they'll fall down." (Freud [1977], p. 211) Hans then tells his father of a time when he actually sees a furniture horse fall down. "Once when I was out with mummy in spite of my 'nonsense', when I bought the waistcoat [a bus-horse fell down]" (Freud [1977], p. 211) Hans claims his 'nonsense' started when this bus-horse fell. Hans says, "When the horse in the bus fell down, it gave me such a fright really" (Freud [1977], p. 211) So Hans explains to his father that something so unexpected as a horse, so big and strong that it can pull a bus, falling down is what began his phobia or 'nonsense'.

Hans' father then questions Hans about why he felt the horse would bite him. So Hans explains that the idea that the horse might "fall down and bite" was the reason he feared a horse would bite him. (Freud [1977], p. 212) Hans then shows his father how it looked when the bus-horse fell. "Because it went like this with its feet. (Hans lies on the ground to show how the horse kicked about) It gave me a fright because it made a row with its feet." (Freud [1977], p. 212) Hans identifies this row or fuss with the horse's feet as something particular as if the horse was struggling. It may have been the first sign to Hans that something could fail. That the horses who drive the bus routes day in and day out could at any moment fail to be able to carry on. And Hans has already linked this horse to his Father. Soon after telling his father of how the horse made a row with his feet Hans tells his father that the bus-horse died, but then says quickly that it was a joke. (Freud [1977], p. 212) The bus-horse lived, but perhaps it was initially feared by Hans to have died. Not only is Hans afraid of his father's absence, but also of his father's death. And perhaps the fascination lies in the scenario. If the horse or his father died then what next? What changes for Hans?

Hans goes on to explain everything about the horse to his father. He says that the horse was big, fat, and black. (Freud [1977], p. 212-213) Hans' father then makes the link. He asks Hans if when the horse falls down that he had thought of him, his father. Hans answers "Perhaps, yes. It is possible." (Freud [1977], p. 213) Hans' father notes that Hans plays horse in his room. He trots, falls, and neighs. Hans also tied a bag around his mouth, like a feedbag, to pretend to feed. He also ran up to his father and bit him repeatedly. (Freud [1977], p. 213)

On April 6th Hans' father takes an interest in finding out what this black on the mouth is. In the front of the house Hans' father asks Hans about every horse that passes. Hans, however, could not see any black on the mouth of any horse that passed. (Freud [1977], p. 214) As they were

looking Hans becomes frightened at a cart that had pulled up. The horse pawed with its hoof so Hans' father imitates the horse. Hans tells his father "Don't make such a row with your feet." (Freud [1977], p. 214) Hans doesn't wish his father to move his legs so quickly upon the ground just like he didn't wish his father to trot away from him.

On April 7th Hans explains to his father that the black he saw on the horses was called a "muzzle" (Freud [1977], p. 214-215) Hans' father is still very interested in knowing what this black bit on the horse is.

On April 9th Hans walks in on his father washing. His father is naked from the top to his waist. Hans tells his father "Daddy, you are lovely! You're so white!" So Hans' father quips back "Yes. Like a white horse." Hans then says, "The only black thing's your moustache. Or perhaps it's a black muzzle?" (Freud [1977], p. 215) So Hans finally presents to his father the thing his father had been wanting - His moustache is now the muzzle.

Later it is noted that Hans makes a row with his feet sometimes. Hans then explains why he does this behaviour. Hans tells his father he does this when he'd rather play than go potty, especially 'lumpf'. Hans uses the word to 'lumpf', which for him means to defecate, but the word 'lumpf' actually means 'stocking'. (Freud [1977], p. 215) He also throws a fit like this when he doesn't want to go urinate or 'widdle'. As he and his father discuss this Hans immediately says, "Oh, I must widdle." and leaves the room as if it is a reaction to anxiety. (Freud [1977], p. 216)

Hans father asks Hans if he is afraid of coal-carts. Hans replies "Yes; And because there's so heavily loaded, and the horses have so much to drag and might easily fall down. If a cart's empty, I'm not afraid." (Freud [1977], p. 216)

Later that evening Hans' father comes home and speaks to his wife about the yellow drawers she bought. As they spoke Hans became disgusted and spat and threw himself onto the ground. Hans' mother tells his father Hans had already behaved this way about two or three times already. Hans' father asks Hans why the mention of drawers makes him act this way. Hans isn't sure so his father suggests to him that the colour reminds Hans of widdle or lumpf. Hans replies "Lumpf isn't yellow. Its white or black." (Freud [1977], p. 217) This followed with many questions about lumpf from Hans. He asks his father, "I say, is it easy to do lumpf if you eat cheese?" and "Is it true that if you jump a lot you can do lumpf easily?" (Freud [1977], p. 217) His father notes that Hans had a lot of problems with his bowel movements from an early age. His primary physician suggested that Hans was overfed since Hans was constipated frequently.

Hans' father asks why the yellow drawers make him have a fit again. This time Hans replies "Because I saw the yellow drawers; and I did the same sort of thing with the black drawers too. The black ones are the same sort of drawers, only they were black." (Freud [1977], p. 217) So there were in fact yellow and black drawers. Yellow for widdle and black for lumpf. Both colours evoked the same reaction in Hans.

Hans' father asks if Hans was disgusted to which Hans replies "Yes, because I saw that. I thought I should have to do lumpf." (Freud [1977], p. 217) Apparently Hans saw the black drawers when the maid (Anna) and his mother were talking. His mother had just purchased them and was showing them to the maid. Hans was disgusted at that time too. Hans tells his father that he has never seen his mother in her drawers. He also makes up that his mother had taken her drawers off in the morning and put the same ones on again in the afternoon. These were the black ones that she just bought and therefore could not have been possible. However his mother was wearing the black ones so Hans must have seen her put the new underwear on.

(Freud [1977], p. 218) Hans' father also notes that Hans often goes to the toilet with his mother and will on most occasions demand to go in with her. (Freud [1977], p. 219) This confirms that Hans has had every opportunity to see his mother in and out of her drawers.

Later on Hans' father asks Hans "Who's the bus-horse?". Hans replies, "I am; I'm a young horse" (Freud [1977], p. 219) His father then recalls that he had once told Hans that young horses "frisk about like little boys." (Freud [1977], p. 219) His father then asks if Hans remembers if he played horse with the children at Gmunden. Hans tells his father of a time when Berta rode him like a horse. At that same time Fritzl fell and hurt himself "because of the horse". (Freud [1977], p. 219-220) At this point in time Hans was not afraid of horses, but the question of being a horse led him to this memory.

On April 10th Hans father brings Hans back to the statement he made about Fritzl hurting himself because of the horse. This "'cos of the horse" is what the children were yelling at the time. Hans then says he has remembered it wrong. (Freud [1977], p. 221) Hans then begins to speak about how much he likes playing with Berta and that he preferred her over the others. Berta was riding Hans when he pretended to be the horse.

Hans' father asks Hans if he saw her widdler. Hans said "No, but I saw the horses'; because I was always in the stable, and so I saw the horses' widdlers." (Freud [1977], p. 221) Hans admits being curious about both Berta's and his mom's widdlers. His father reminds him that the little girls at Gmunden wanted to see his widdler when he would urinate. (Freud [1977], p. 222) Hans father remembers that Berta would always watch Hans urinate and Hans was happy with this. Hans also was caught going to the toilet with her and was told to never do that again. Hans admitted that he wanted to see her urinate, but never managed to.



His father then reminds him of the forfeits dream he had (Freud [1977], p. 183) and asked Hans if he wanted Berta to make him urinate. Hans admits that he had thought it, but never said as much to Berta. (Freud [1977], p. 222) After more questioning from his father Hans admits that he not only wanted to watch Berta go to the toilet, but he also wanted Berta to touch his widdler. Hans claims he didn't put his hand to his widdler while at Gmunden with Berta. "I slept so well at Gmunden that I never thought of it at all. The only times I did was at \_\_\_\_ street and now." (Freud [1977], p. 223) His father gives no explanation as to what the significance of \_\_\_\_\_ street is and so this statement from Hans only confirms that he says he didn't put his hand to his widdler at that time. Hans was only three and a quarter to three and one-half when he visited Gmunden the first time.

Hans' father tries to rephrase the question of widdlers. Instead of getting Hans to explain that he wanted to see a girl's widdler he poses the idea that maybe Berta wanted to see a boy's widdler out of curiosity. Hans thinks she just wanted to see his widdler. His father asks him if he was only curious about Berta's widdler. Hans replies that he was also curious about Olga's and his mummy's. His father suggests to him that he is no longer curious because now he has seen Hanna's widdler. Hans replies, "It'll grow, though, won't it?" (Freud [1977], p. 223) So Hans' father tells him that when Hanna's widdler grows it will look nothing like his own.

Hans admits that at Gmunden he was curious when his mummy undressed and when Hanna was in the bath. He says that he saw Hanna's widdler, but not his mum's. This brings his father back to the question of the drawers. When Hans was asked if he was disgusted he replied "Only when I saw the black ones - when she bought them - then I spat. But I don't spit when she puts her drawers on or takes them off. I spit because the black drawers are black like a lumpf and the yellow ones like a widdle, and then I think I've got to widdle. When mummy has her drawers on I don't see them; She's got her clothes on over them (Freud [1977], p. 223-224) Hans further

explains that when the drawers are new they remind him of lumpf and widdle, but once they are old the colours fade and get dirty. (Freud [1977], p. 224) "When they're old they are much blacker than a lumpf, aren't they? They're just a bit blacker." (Freud [1977], p. 224)

Hans' father asks if Hans has seen his mother use the toilet and if this disgusts him too. As his father had mentioned before, Hans had been to the bathroom many times with his mother. Hans replies to his father uncertainly "Yes... No." He's sure he likes to be with his mum when she widdles, but he is also unsure about this. Hans' father asks Hans if he thinks when his mum widdles he might catch a glimpse of her widdler. Hans replies yes.

Hans' father then asks Hans "But why won't you ever go into the W.C. at Lainz?" and Hans replies "Perhaps its because it makes a row when you pull the plug." His father recalls that Hans was once frightened of the flush at the W.C. in Lainz. His father then asks him if he's afraid of the W.C. at home. Hans replies, "Here I'm not. At Lainz it gives me a fright when you pull the plug. And when I'm inside and the water rushes down, then it gives me a fright too." (Freud [1977], p. 225) Hans then brings his father into the W.C. to prove to him that he wasn't scared of the one in the flat. Hans flushed the toilet and then explained: "First there's a loud row, and then a loose one. When there's a loud row I'd rather stay inside, and when there's a soft one I'd rather go out... because if there's a loud row I always so much like to see it--hear it; so I'd rather stay inside and hear it properly." (Freud [1977], p. 225) Hans explains that the "loud row" of the flushing toilet reminds him of doing lumpf. The "loud row", to him, sounds like lumpf and the "loose row" reminds him of widdle. He likens these things to the black and yellow drawers of his mother. (Freud [1977], p. 225) Hans' father then notes that the bus-horse was black, just like lumpf, and Hans seemed taken aback by this. (Freud [1977], p. 225)

On April 11th Hans attempts to go into the bedroom with his parents, but is sent away again.

He says "Daddy, I thought something: I was in the bath, and then the plumber came and unscrewed it: then he took a big borer and stuck it into my stomach." (Freud [1977], p. 226)

Hans' father thought that the dream meant that Hans was in bed with his mummy. Then his daddy came and drove him away with his big penis. He was pushed out of his place with his mummy.

Hans has another thought that he presents to his father. He tells him "We were travelling in the train to Gmunden. In the station we put on our clothes; but we couldn't get it done on time, and the train carted us on." (Freud [1977], p. 226) [[This is much like the idea of being caught on the carts in front of his house. Its curious that he uses the verb "to cart" in the place where he could have used the verb carry or took. But instead he uses "cart" much like the thing he is afraid that the horses will not be able to pull.]] Hans' father then asks Hans if he has ever seen a horse do lumpf. Hans says often. His father then wants to know if Hans thinks it makes a loud row. Hans says "yes". And then it reminds Hans that it is much like lumpf falling into a chamber pot. His father then interprets this by saying that the bus-horse that falls down and makes a row with its feet is a lumpf falling and making a noise. Hans' fear of defecation and his fear of heavily loaded carts are equivalent to the fear of a loaded stomach (or rather bowel). (Freud [1977], p. 226)

At lunchtime Hans says to his father that he wished that in Gmunden they had their own bath so that he didn't have to use the public baths. His father notes that Hans always protests against these baths and also against the large bath they have at home. In order for Hans to be bathed he either stands or kneels down in their large tub. (Freud [1977], p. 227) Hans' reason for this is that he's afraid of falling into the large bath and the small bath is far too small for Hans to lie down in. In the small bath he can only sit. His father then reminds Hans of the boat at Gmunden, but Hans insists that he held on so he was not afraid at that time. Hans also notes

that in the bath he relies heavily on his mummy to keep his head above water. (Freud [1977], p. 227) [[This is significant in that Hans does not have control and must fight against the desire of his own mother. There is also a demand on Hans in the bath one in which he must find options to escape from. One option is to position himself where he can control his head going into the water as he has chosen to do.]]

Hans' father suggests two things: One is that Hans felt naughty and that his mummy would punish him and the second is that he wished that his mummy would dunk Hanna in the water. Hans agreed with both statements. (Freud [1977], p. 227)

On April 12th Hans' father and Hans ride back from Lainz in a second-class carriage. Hans becomes disgusted at the black leather upholstery. Hans' father suggests that he saw something of his mummy's that was black and that it frightened him. Hans agreed, but suggested that that something must be her black blouse or stockings. His father then suggests that perhaps it was his mother's pubic hair that was frightening. Hans denies having seen his mother's widdler.

Hans became frightened by a cart driving out of the yard so his father asks him if he thinks the carts look like a bum. Hans joins in the game and says that the horses are lumpfs. He now refers to the horses as 'lumpfy' - like a silly pet name. (Freud [1977], p. 228)

On April 13th, while Hans was on the balcony, he told his mother that he had a thought. He said, "I thought to myself Hanna was on the balcony and fell down off it." His mother asked him if he wished Hanna wasn't there and he replied yes. (Freud [1977], p. 228-229)

On April 14th Hans becomes overly affectionate to Hanna. He later tells his parents that they

should play the stork money not to bring any more babies "out of the big box". His father notes that Hanna screams too much for Hans liking. (Freud [1977], p. 229)

Today Hans is less fearful of carts. He is even able to point out to his father a horse with a "black muzzle" and is very excited to be able to do so. (Freud [1977], p. 229) Later Hans knocks the pavement with a stick and asks if someone is buried under there or if that is only the case in cemeteries. (Freud [1977], p. 229)

A box was in the front hall and Hans makes an association to the box. He tells his father "Hanna travelled with us to Gmunden in a box like that. Whenever we travelled to Gmunden she travelled with us in a box... we've got a big box and it was full of babies; they sat in the bath (a small bath had been packed inside of the box). I put them in it. Really and truly. I can remember quite well... That Hanna travelled in the box; because I haven't forgotten about it my word of honour. (Freud [1977], p. 230)

Hans' father then said that last year Hanna travelled on the railway with them and Hans insists that previous to that Hanna travelled in a box that mummy had, but didn't carry around with her. Hans hopes that Hanna will be put back into the box on this years trip to Gmunden. Hans' father asks him how Hanna got out of the box and Hans replies by "mummy and me". (Freud [1977], p. 230) Then Hans says, "Then we got into the carriage, and Hanna rode on the horse, and the coachman said 'gee-up'. The coachman sat up in front." (Freud [1977], p. 230) His father asks him "Were you there too?" Hans then says, "Mummy knows all about it. Mummy doesn't know; she's forgotten about it already, but don't tell her anything!" (Freud [1977], p. 230) His father then makes him repeat his story. He questions how Hanna got out since at this time she couldn't walk. So Hans claims that he and his mother lifted her down. Then his father questions how Hanna could have sat on a horse by herself. Hans then insists: "Oh, yes, she sat up all right

and called out 'gee-up', and whipped with her whip -- 'gee-up! gee-up' -- The whip I used to have. The horse hasn't any stirrups, but Hanna rode it. I'm not joking, you know, daddy." (Freud [1977], p. 231)

Later Hans' father asks Hans how Hanna got into bed with his mother after she was born. Hans says, "Hanna just came. Frau Kraus (the midwife) put her into bed. She couldn't walk of course. But the stork carted her in his beak. Of course she couldn't walk. The stork came up the stairs up to the landing, and then he knocked and everybody was asleep, and he had the right key and unlocked the door and put Hanna in your bed and mummy was asleep - no. The stork put her in her bed. It was the middle of the night, and then the stork put her in the bed very quietly; He didn't trample about at all, and then he took his hat and went away again. No, he hadn't got a hat." (Freud [1977], p. 231-232) [[Again Hans mentions carting. The stork carted Hanna in his beak. The stork also went away again with his hat. It may have been something that Hans had seen his father do - being carted away again with his hat in hand. Hans may have also wished that Hanna could be carted away again as she was carted to his mother and father.]]

His father then asks him "who took the stork's hat?" perhaps it was the doctor who took it. And Hans replies, "Then the stork went away; He went home, and then he wrung at the door, and everyone in the house stopped sleeping. But don't tell this to mummy or Tini (the cook). Its a secret." (Freud [1977], p. 232)

Hans father then asks him, "Are you fond of Hanna?" and Hans replies "Yes very fond". His father then asks, "Would you rather Hanna was or wasn't alive" and to this Hans replies, "Wasn't alive". So his father asks him why and Hans explains its because she screams and he can't stand it. He even says "She screams when she's whacked on the bottom by mummy". Hans' father asks him if he doesn't like it when his mummy spanks Hanna. Hans says no and explains after

being prompted by his father that it is "because she makes such a row with her screaming."  
(232) His father then questions again Hans' fondness of Hanna and now Hans has to think about this before he can answer for certain. (Freud [1977], p. 233)

His father tells him that once he's bigger he'll be more fond of Hanna because she will be able to speak. Hans maintains that he is fond of her now without her being able to speak. He says when she's older, in the autumn; he will take her to Stadtpark all by his self & explain everything to her. His father notes that he is like a "little father" in the sense that he wants to do what his father does for him - taking him to the park and 'enlightening' him. (Freud [1977], p. 233)

Hans' father explains more about the stork. He presents the possibility to Hans that Hanna wasn't with the stork. Hans questions his father and then says that the stork did have her. "The stork brought her from him, from the red stork-box." (Freud [1977], p. 233) Hans' father asks Hans who had told him this. Hans then says, "Mummy... I thought it to myself... Its in the book." (Freud [1977], p. 233) Hans father explains that Hans has a book with a picture of a stork nest with the storks on a red chimney and on the opposite page there is a horse being shod. He also notes that the word shod differs by one letter from the word beaten in German. (Freud [1977], p. 234) This is something they had previously been speaking about regarding Hanna and her unbearable screaming.

Hans furthers by telling his father "Then the stork brought Hanna in here. In his beak. You know, the stork that's at Schönbrunn, and that bit the umbrella." (Freud [1977], p. 234) Hans' father notes that Hans seems to think that the stork can only bring babies when no one else is looking. He was asleep when Hanna was born and he thinks it was a surprise to everyone as it was a surprise to him. To test this theory out Hans' father asks him what Hanna looked like when she was brought by the stork. Hans replied, "All white and lovely. So pretty." (Freud

[1977], p. 234) [[Hans uses the term white a lot. He speaks of a white horse, his mum being white, his dad's white neck, and his dad being white.]] Hans' father notes that when Hans actually saw Hanna for the first time he seemed not to like her, but Hans insists this isn't true and that he liked her very much. Hans says he was just surprised she was so small. (Freud [1977], p. 234) [[ Another term that Hans uses - small widdlers, small Hanna, small storks, small crumpled giraffes...]] Hans says, "She was small like a baby stork." (Freud [1977], p. 235) So Hans' father asks if Hanna was small like lumpf. Hans says "Oh no. A lumpf's much bigger... a bit smaller than Hanna really." (Freud [1977], p. 235)

On April 15th Hans' father asks Hans to recount the story of how Hanna travelled in the box. On the second telling of this story Hans notes that it was Hanna and the coachman who whipped the horse. On the repeat telling of this it was only Hanna who whipped the horse, but that both Hanna and the coachman had the reins. (Freud [1977], p. 235)

Hans' father now tells the true story. Hanna was only 8 months old when the family went to Gmunden the last time and the time before that Hans' mother was only 5 months pregnant with Hanna. (Hanna was born in October 1906) So Hans' father asks Hans if Hanna was around the first time they went to Gmunden. Hans gives a very unusual answer, "Yes. You were always there; You used always to go in the boat with me and Anna was our servant." (Freud [1977], p. 236) Hans' father tells him that this wasn't last year as he had asked about and that even if it was Hanna wasn't alive then. Hans insists that Hanna was alive then, but inside of the box. Inside of the box she could talk and walk with assistance. Hans says that she was with the stork and she was alive at that time. Hans then tells his father that in the autumn she will be two years old. Hans insists to his father "Hanna was there you know she was." (Freud [1977], p. 236)

So Hans' father asks when Hanna started to be able to walk. Hans says, "not last year, but other



times she could." (Freud [1977], p. 236) Hans insists to his father that Hanna has been to Gmunden twice and asks him to confirm with his mother that this is true. Hans then further explains in a very insistent manor that Hanna could walk and ride, but later had to be carried. He asked his father to write it down because he remembered this. His father calls Hans a "fraud" because he knows Hanna has only been to Gmunden once. Hans replies, "No, that isn't true. The first time she rode on the horse... and the second time... (She showed signs of evident uncertainty)" (Freud [1977], p. 236)

Hans' father asks Hans if the horse was mummy and Hans insists "No, a real horse in a fly." (Freud [1977], p. 237) So Hans' father tells Hans that they had a carriage with two horses so Hans corrects himself, but remains insistent that Hanna was there. Hans' father then asks Hans what Hanna had eaten while in the box. Hans tells him "bread and butter, herring, and radishes." (Freud [1977], p. 237) All the things they would normally eat at Gmunden. Hans tells his father that Hanna "ate fifty meals". (Freud [1977], p. 237) Hans says Hanna ate all the time and that "she gobbled everything up like a hare: one minute and it was all finished." (Freud [1977], p. 237) He did note that his sister didn't cry at this time. He then tells his father it was a joke because really she was with Hans the whole time and that "they travelled together in the box." (Freud [1977], p. 237) Hans says that his mother travelled in the railway carriage and then they were all in the carriage together where they all ate non-stop. Hans also says on the dual carriage Hanna and Hans rode alone in the carriage and that their mother and Karoline (the maid in 1907) rode the two horses. And as soon as he has told this tall tale Hans admits that none of it is true. (Freud [1977], p. 237)

Hans then suggests that he and Hanna go into a box where Hans will widdle in it or in his pants. When questioned he claimed he didn't mind because "There's nothing shameful in it." (Freud [1977], p. 238) [[Something that the maid had said to him when he wished to punish her by

asking her to strip down naked]]

Hans repeats his story about the stork bringing Hanna, but leaves out the details of the Stork's hat. (Freud [1977], p. 238) Hans' father asks, "where does the stork keep his latch key?" And Hans replies "In his beak" (Freud [1977], p. 238) Hans' father notes that Hans associated the beak with a pocket. His father then says that he has never seen a stork with a key in his beak before so Hans reorganises his story to make more sense. He now says that the maid let the stork in because it rang the bell with its beak. (Freud [1977], p. 238)

Hans' father asks Hans where the stork lives and Hans replies, "In the box where he keeps all the little girls" and then later he says the stork lives at Schobrunn. Hans tells his father the stork lives far away and proceeds to explain how the stork opens the box with his beak. (Freud [1977], p. 238)

Hans' father asks, "aren't little girls too heavy for [the stork]?" Hans says no. Hans' father then says, "doesn't a stork box look like a bus or a van?" Hans says "Yes and a scallywagon" (Freud [1977], p. 238-239)

On April 16th Hans goes into the opposite courtyard with no problems. The very next day, on the 17th of April, Hans would not go into the courtyard at all because a cart was at the dock opposite to the gate. Hans tells his father "When a cart stands there I'm afraid I shall tease the horse and they'll fall down and make a row with their feet." (Freud [1977], p. 239) Hans' father asks Hans how he would tease the horse and Hans replies that it has to do with being cross with it that you would tease it. He says, "When you're cross with them you tease them, and when you shout 'gee-up'". (Freud [1977], p. 239) So 'gee-up' seems to be attached to the whipping of a horse and you'd only do this, in Hans eyes, if you were cross with them. [[Hans may be

showing signs of being cross with the horses for frightening him.]]

Hans' father asks Hans "Have you ever teased horses?". (Freud [1977], p. 239) Hans replies, "Yes, quite often. I'm afraid I shall do it, but I don't really." (Freud [1977], p. 239) His father then asks "Have you ever teased horses at Gmunden?" (Freud [1977], p. 239) Hans tells his father no and his father then suggests that he likes to tease the horses. Hans replies, "Oh yes, very much." (Freud [1977], p. 239) Hans' father asks Hans if he would like to whip them and Hans affirms that he would. His father then interprets 'beating horses' as 'beating Hanna' and asks Hans if he would like to beat a horse like his mummy beats Hanna. Hans replies with a statement that his father had once told him to keep him from fearing horses getting beaten: "It doesn't do the horses any harm when they are beaten... Once I really did it. Once I had the whip, and whipped the horse, and it fell down and made a row with its feet." (Freud [1977], p. 239) His father asks where this took place and Hans tells him he had done this at Gmunden. Loisl the coachman was there. Hans claims he spoke nicely to the coachman and he let Hans walk it out of the stable. Hans then asked the coachman "Could I take the horse and whip it and shout at it? And he said 'yes.'" (Freud [1977], p. 239) So Hans takes the horse to the feeding trough and held it there to whip it. Hans then admits that this is completely untrue and that he only wished he could do this and that this idea was something that he had thought at home. He tells his father, "I thought it in the morning when I was quite undressed; no in the morning in bed." (Freud [1977], p. 240) So Hans links these thoughts with being naked or in bed.

Hans' father asks Hans which he would rather beat: His mum, Hanna, or his dad. Hans says he would rather beat his mum, but is unsure of why exactly he would prefer to do this. He even adds he would do this with a carpet beater since this is something she has threatened him with previously. (Freud [1977], p. 241)

On April 21st Hans has a thought, "There was a train at Lainz and I travelled with my Lainz grandmummy to the hauptzollamt station. You [father] hadn't got down from the bridge yet, and the second train was already at St. Veit. When you came down, the train was there already, and we got in. Both of us got away on the second train." (Freud [1977], p. 241-242) Hans father explains that Hans was at Lainz yesterday and had to cross a bridge in order to get to the departures platform. (Freud [1977], p. 241)

That afternoon Hans comes running inside the house frightened after seeing a two-horse carriage. Hans says, "The horses are so proud that I'm afraid they'll fall down!" (Freud [1977], p. 242) Hans father asks Hans "Who is really so proud?" and Hans tells him, "You are when I come into bed with mummy." (Freud [1977], p. 242) So Hans' father says, "So you want me to fall down?" (Freud [1977], p. 242) And Hans replies, "Yes. You've got to be naked and knock up against a stone and bleed, and then I'll be able to be alone with mummy for a little bit at all events. When you come up into our flat I'll be able to run away quickly so that you don't see." (Freud [1977], p. 242) Hans' father interprets 'naked' as Hans meaning barefooted rather than fully unclothed. This scenario sounded like something Hans had mentioned before. Fritzl had fallen down when they were playing horse so Hans' father asks Hans about what he thought. Hans replies, "That you should hit the stone and tumble down." (Freud [1977], p. 242)

On April 22nd Hans brought his father another thought in the morning. He thought that, "A street-boy was riding on a truck, and the guard came and undressed the boy quite naked and made him stand there till the next morning, and in the morning the boy gave the guard 50,000 Florins so that he could go on riding on the truck." (Freud [1977], p. 243) Hans' father says that Hans once saw a street-boy riding in the back of a truck and wanted to do it too, but he told Hans it wasn't allowed and that a guard would come and get him if he did. (Freud [1977], p. 243)

At lunch Hans played with an India-rubber doll that he had named Grete. He took a penknife and pushed it through the opening where the tin squeaker was attached then pulled the legs apart to make a hole and let the knife drop out. Hans told the nursemaid that this was its widdler. (Freud [1977], p. 244) Hans tells his father all about this. His father then asks if Hans tore apart the legs in order to see the doll's widdler. (Freud [1977], p. 244) He also questions Hans about the penknife he has. Hans tells him the knife belongs to his mummy. His father then asks why he put mummy's knife in the doll and Hans says he's not sure. So Hans' father asks Hans what the penknife looks like to him so Hans brings his father the knife. So his father asks Hans if the knife looks like a baby to him. Hans says no and that he doesn't think anything at all about the knife. (Freud [1977], p. 244)

Hans then tells his father "The stork got a baby once -- or some one." (Freud [1977], p. 244) His father asks him when this happened. Hans says, "Once I heard so -- or didn't I hear it at all? Or did I say it wrong?" (Freud [1977], p. 244) So his father wishes to know what exactly did Hans think he said wrong. Hans says that it means that it isn't true. Freud SE VIII, (245) So Hans agrees, "well yes, a little bit." (Freud [1977], p. 245)

His father asks Hans how chickens are born. Hans says that "The stork just makes them grow; The stork makes chickens grow -- no, God does." (Freud [1977], p. 245) So his father explains to him that chickens lay eggs and from the eggs grow chickens. Hans laughs and his father asks him why. Hans says, "because I like what you've told me." (Freud [1977], p. 245) Hans claims to have seen it happen already. So his father asks him where and Hans replies - "You did it!" (Freud [1977], p. 245) So his father asks him "Where did I lay an egg?" (Freud [1977], p. 245) Hans says:

"At Gmunden; you laid an egg in the grass, and all at once a chicken came hopping out. You laid an egg once; I know you did, I know it for certain. Because mummy said so." (Freud [1977], p. 245) So Hans' father threatens to ask his mummy if this is true. Hans says,

"It isn't true a bit. But I once laid an egg, and a chicken came hopping out." (Freud [1977], p. 245) So his father asks where he laid this egg. Hans says, "At Gmunden. I lay down in the grass - no, I knelt down - And the children didn't look on at me, and all at once in the morning I said: 'Look for it, Children; I laid an egg yesterday.' And all at once they looked, and all at once they saw an egg, and out of it there came a little Hans. Well, what are you laughing for? Mummy didn't know about it, and Karoline didn't know, because no one was looking on, and all at once I laid an egg, and all at once it was there. Really and truly daddy, where does a chicken grow out of an egg? When its left alone? Must it be eaten?" (Freud [1977], p. 245)

So Hans father explains to him and Hans says, "All right, lets leave it with the hen; then a chicken'll grow. Lets pack it up in the box and lets take it into Gmunden." (Freud [1977], p. 245)

Hans' father gets back to the original topic. He wants to know from Hans what he was doing with his doll. Hans replies to his father, "I said 'Grete' to her.", but Hans doesn't know why. So his father asks him how one goes about playing this game. Hans tells him he "just looks after her like a real baby." (Freud [1977], p. 246) So his father asks him if he would like to have a girl baby. Hans says "Oh yes. Why not? I should like to have one, but mummy mustn't have one; I don't like that." (Freud [1977], p. 246) So Hans' father tells him that only women have children. Hans insists that he is going to "have a little girl". (Freud [1977], p. 246) So his father asks where he'll get her from. And Hans replies, "Why from the stork. He takes the little girl out, and all at once the little girl lays an egg, and out of the egg there comes another Hanna - Another Hanna. Out of Hanna there comes another Hanna. No, one Hanna comes out." (Freud [1977], p. 246) In reply to his father asking him if he'd like to have a little girl Hans says, "Yes, next year I'm going to have one, and she'll be called Hanna too." (Freud [1977], p. 246) Father then asks him "why isn't mummy to have a little girl?" And Hans says, "Because I want to have a little girl for once." (Freud [1977], p. 246) Hans' father then tells him, "But you can't have a little girl." and Hans

replies "Oh yes, boys have girls and girls have boys." His father then tells him "Boys don't have children. Only women, only mummies have children." Hans then asks, "but why shouldn't I?" and his father says, "because God's arranged it like that." So Hans says, "But why don't you have one? Oh yes, you'll have one all right. Just you wait." (Freud [1977], p. 246-247)

Hans then tries to reason it out for himself - "But I belong to you." (Freud [1977], p. 247) His father corrects him and says that he belongs both to him and mummy. He also tells Hans that his mummy gave birth to him. This leaves Hans wondering whom Hanna belongs to "Me [Hans] or mummy". (Freud [1977], p. 247) Hans' father then tells Hans' mother what Hans thinks. Hans then wants to know why Hanna couldn't belong to him and his mother. His father then further confuses him by saying that Hanna belongs not only to him, his mother, but also his father. Hans then feels that this was exactly as he had thought. (Freud [1977], p. 247)

On April 24th Hans' parents tell him that babies grow inside of the mother and that they come out of the mother like a painful lumpf. (Freud [1977], p. 247) After this Hans is thought to have shown improvement. On this day he chased carts, but would not leave the yard. (Freud [1977], p. 247)

On April 25th Hans head-butts his father. So his father asks him if he's a goat and Hans says "Yes, a ram" (Freud [1977], p. 248) His father enquires as to where he might have seen a ram before. Hans says that Fritzl owned one at Gmunden. So his father asks Hans about the lamb and what sorts of things it did. Hans says "You know, Fraulein Mizzi (a school mistress that lived at the house) used always to put Hanna on the lamb, but it couldn't stand up then and it couldn't butt. If you went up to it it used to butt, because it had horns. Fritzl used to lead it on a string and tie it to a tree. He always tied it to a tree." (Freud [1977], p. 248) So Hans' father asks if the lamb ever butted Hans. Hans replies, "It jumped up at me." and then later says, "Fritzl

took me up to it once...I went up to it once and didn't know, and all at once it jumped at me. It was such fun. -- I wasn't frightened." (Freud [1977], p. 248)

Hans' father asks Hans if he is fond of him, his father. Hans tells his father, "Oh yes." and his father then adds a 'perhaps not' to the statement. At the time Hans was playing with a little toy house and "At that moment the house fell down, and Hans shouted: 'The horse has fallen down! Look what a row its making!'" (Freud [1977], p. 248) Hans' father interprets this as vexation with him because Hans' mother is so fond of him. Hans tells his father that this isn't the case. So his father asks him why he cries when ever his mother gives his father a kiss and tells him "Its because you're jealous." (Freud [1977], p. 248) Hans then agrees that he is jealous.

Hans' father then asks Hans if he would like to be the daddy. Hans then says "Oh yes." (Freud [1977], p. 248) So his father asks him what he would do if he were the daddy. Hans finishes his sentence and says "And you were Hans? I'd like to take you to Lainz every Sunday -- No, every weekday too. If I were daddy I'd be ever so nice and good." (Freud [1977], p. 248) His father then asks him what he would like to do with his mummy if he is daddy. Hans says he would like to "Take her to Lainz too." (Freud [1977], p. 248) His father pushes him... "And besides that?" (Freud [1977], p. 248) Hans says there is nothing besides that which he'd like to do. So Hans' father then asks Hans "Then why were you jealous?" (Freud [1977], p. 249) Hans says he doesn't know. His father then asks him if he was jealous at Gmunden. Hans says, "Not at Gmunden. At Gmunden I had my own things. I had a garden at Gmunden and children too." (Freud [1977], p. 249)

His father then asks Hans if he recalls how the cow had the calf. Hans says, "Oh yes. It came in a cart and another cow passed it out of its behind." (Freud [1977], p. 249) His father then asks Hans if it is true that the calf came out of the cow and Hans at first disputes this fact, but later is



very uncertain as to what is true. He thinks maybe that the landlord of Berta told him that the calf came from a cart. He mentioned that the landlord was there at the time of the birth. Later he is unsure if anyone told him anything about the birth. (Freud [1977], p. 249) His father then asks Hans why he didn't think the stork brought the calf. Hans says, "I didn't want to think that." (Freud [1977], p. 249)

His father then reminds him that he thought that the stork brought Hanna and Hans says that he thought that it was true. He then asks if the Landlord was there when the calf was born. His father doesn't know, but then asks Hans if he thinks that he was there. Hans says, "I think so... Daddy, have you noticed now and then that horses have something black on their mouths?" (Freud [1977], p. 249) His father says that he had noticed on the street in Gmunden and then asks Hans if he used to think that the horses with black on their mouths were daddy. Hans says he did and then his father interprets this to Hans as Hans was afraid of daddy. Hans replies to this by saying, "You know everything; and I didn't know anything." (Freud [1977], p. 250)

Hans' father continues to interpret - When Fritzl fell Hans wished that his daddy would do the same and when the lamb butted Hans wished his father would be butted by the lamb. He then asks Hans if he can recall the funeral that took place at Gmunden. Hans says he does and his father furthers his interpretation by saying to Hans that he thought that if his daddy would die then Hans could become daddy. Hans agrees. (Freud [1977], p. 250)

Hans' father asks again what carts Hans is afraid of. At first Hans says all carts, but then his father tells him that isn't true. Hans then says, "I'm not afraid of carriage and pair or cabs with one horse. I'm afraid of busses and luggage-carts, but only when they're loaded up, not when they're empty. When there's one horse and the cart is loaded full up then I'm afraid; But when there are two horses and it's loaded full up. Then I'm not afraid." (Freud [1977], p. 250) Hans'

father then asks him if he is afraid of busses because there are people inside. Hans says its "Because there is so much luggage on top" (Freud [1977], p. 250) His father then compares being 'full-up' to being pregnant. Hans then says, "Mummy will be loaded full-up again when she has another one, When another one begins to grow, when another one's inside of her." (Freud [1977], p. 250) His father asks Hans if he likes this idea. Hans says yes and his father points out that Hans said that he didn't want mummy to have another baby. Hans then corrects himself, "Well then mummy won't be loaded up again. Mummy said if mummy doesn't want one, God didn't want one either. If mummy doesn't want one she won't have one. But if mummy told me if she didn't want it no more'd grow, and you say if God doesn't want it." (Freud [1977], p. 251) His father further confuses Hans by insisting that it is God who decides if Mummy is pregnant. [[Taking away her choice in the matter and making himself less impotent as a father]] Hans replies to this by saying, "You were there, though, weren't you? You know better for certain." (Freud [1977], p. 251) Hans then ask his mother again to get a more certain answer. She tells him that if she doesn't want a baby then God doesn't want a baby either. (Freud [1977], p. 251) [[Producing the idea of the big Other]]

Hans' father says to Hans that he thinks Hans does want his mummy to have another baby. Hans insists he doesn't. His father says to him, "But you wish for it?" Hans says he does, but only a wish. His father then tells him, "Do you know why you wish for it? To become daddy." Hans says, "Yes... How does it work? You say daddies don't have babies; so how does it work, my wanting to be daddy?" (Freud [1977], p. 251) His father then tells him that he would like to be the daddy and be married to mummy. (Freud [1977], p. 251) Hans says he would like to be big, and have a moustache, and have a baby with his mum. Hans tells his father, "And, daddy, when I'm married I'll only have one if I want to, when I'm married to mummy, and if I don't want a baby, God won't want it either, when I'm married." (Freud [1977], p. 252) Hans' father asks if he would like to be married to his mum and Hans says he would.

In the evening of April 25th Hans gets put to bed and tells his father he's going to stay up till 10pm and talk to Grete (his doll) and that he always keeps his children in bed with him. He asks his father why his children are always in bed with him.

On April 26th Hans' father asks him why he's always thinking of his children. Hans tells him, "Because I should so like to have children; but I don't even want it; I shouldn't like to have them." (Freud [1977], p. 252) His father asks Hans' if he has always imagined that Berta, Olga, and the rest of the children from Gmunden were his children. (Freud [1977], p. 253) Hans says, "Yes. Franzl, and Fritzl, and Paul too, and Lodi." (Freud [1977], p. 253) These were playmates of Hans' from Lainz. Hans father asks Hans who Lodi is and what she looks like. Hans replies to him, "Look like? Black eyes, black hair... I met her once with Mariedl as I was going into the town." (Freud [1977], p. 253) His father claims this is untrue and he asks if Hans thought he was their mother. He asks Hans what he did with the children as their mother. Hans tells him that he really was their mother and that he had them sleep with him, both the boys and the girls, every day. (Freud [1977], p. 253) His father ask Hans if he talked to his children. Hans says, "When I couldn't get all the children into the bed, I put some of the children on the sofa, and some in the pram, and if there were still some left over I took them up in the attic and put them in the box, and if there were any more I put them in the other box." (Freud [1977], p. 253) Hans' father asks him if the stork baby boxes were kept in the attic and Hans says they are. (Freud [1977], p. 253)

Hans' father asks Hans when he got his kids and if Hanna was alive at that point in time. Hans says she was alive and has been alive for a long time. His father asks who he got kids from and Hans says he got them from himself. Hans' father says that at this time Hans didn't know children came from anyone. He still believed that the stork brought them. Hans' father tells Hans, "You know quite well that boys can't have children." (Freud [1977], p. 254) Hans says,

"Well, yes. But I believe they can all the same." (Freud [1977], p. 254) Hans' father wants to know where Hans got the name 'Lodi' from. Hans says he doesn't know, but he thinks it's a beautiful name. Hans' father jokes, "Did you mean Schokolodi (Chocolate)?" and Hans says no, "Saffalodi" (Sausages) because he likes eating sausages. His father then asks Hans if Sausages look like lumpf? Hans says they do.

Hans' father wants to know what a lumpf looks like. Hans tells him, "Black. You know like this and this." (Freud [1977], p. 254) When Hans says "this and this" his father says he is pointing at his eyebrow and moustache. Hans' father points out that the shape of a lumpf is like a sausage and wants to know if Hans thinks he's having kids whenever he does a lumpf. Hans says he does. (Freud [1977], p. 254)

Hans' father says, "When the bus-horses fell the bus looked like a baby box and when the black horse fell down it was just like..." (Freud [1977], p. 255) Hans finishes his dad's sentence by saying "Like having a baby." (Freud [1977], p. 255) His father asks him what he thought when the horse made a row with its feet? Hans said it reminds him of when he'd rather play than go lumpf.

Hans had played all day at loading and unloading packing cases. He wishes he had a toy wagon to put boxes on. This used to both interest him and scare him at the customs house (Freud [1977], p. 255) Hans used to call the doors of the customs house shed "holes" and now he calls them "behind holes". (Freud [1977], p. 255)

Hans' anxiety is nearly gone except that he stays in the neighbourhood of the house to have a place to retreat in the event that he's frightened. (Freud [1977], p. 255)

On April 30th Hans plays with his children again. His father asks him if his children are still alive and that he knows men cannot have children. Hans says, "I know. I was their mummy before, now I'm their daddy." (Freud [1977], p. 256) His father enquires who the children's mother is and Hans says, "Mummy and you're Granddaddy." (Freud [1977], p. 256) His father says, "So you'd like to be as big as me and marry mum and have kids." Hans says, "Yes, that's what I'd like. And then my Lainz Grandmummy will be their grannie." (Freud [1977], p. 256)

On May 1st Hans came to his father and told him to write something to Dr. Freud. Hans says that this morning he was in the water closet with all his children. He made a lumpf then widdled as the children watched him. He then put each one onto the toilet so that they could do the same. He wiped their bottoms for them and says that he wants to do everything for his children. (Freud [1977], p. 256)

Hans and his father went to Stadtpark. Hans points out a stork-box cart. (Freud [1977], p. 257)

On May 2nd Hans had a dream. "The plumber came; and first he took away my behind with a pair of pincers, and then gave me another, and then the same with my widdler. He said 'Let me see your behind!' and I had to turn around, and he took it away; And then he said: 'Let me see your widdler!'" (Freud [1977], p. 257) Hans' father says, "He gave you a bigger widdler" and behind (Freud [1977], p. 257). Hans says he did and his father then says that the new parts are like his own because Hans wants to be like his father. (Freud [1977], p. 257) Hans then says he would "like to have a moustache like yours and hair like yours [chest hair]" (Freud [1977], p. 257)

The analysis ends when Hans turns 5.

## Appendix B

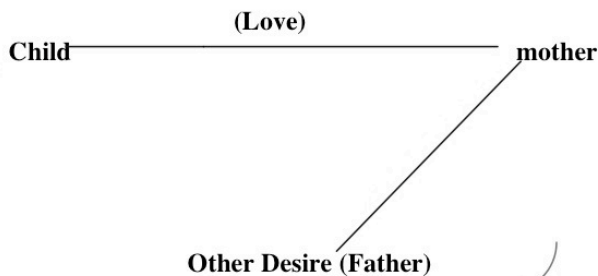
<u>MAN</u> (Symbolic)	<u>WOMAN</u> (Real)	<u>KEY</u>
— $\exists x \Phi x$	— — $\exists x \Phi x$	$\exists x$ $P(x)$ means $P(x)$ is true for all $x$ .
$\forall x \Phi x$	— $\forall x \Phi x$	$\forall x$ $P(x)$ means there is at least one $x$ such that $P(x)$ is true.
$\$$  $\Phi$	$S(A)$  $a$  $\La$	$\overline{x}$ Negates any function
		$\exists x \overline{\Phi x}$ $S_1$ (Father Function, Paternal Metaphor, Primary Signifier) Man is whole because the Phallic Function is limited
		$\overline{\exists x \Phi x}$ Woman has no limit; The phallic function does not serve to limit woman
		$\forall x \Phi x$ $S_2$ (Knowledge, Symbolic Castration, Secondary Signifier) The whole of man falls under the phallic function
		$\overline{\forall x \Phi x}$ Not the whole of woman falls under the phallic function
		$\$$ Barred Subject, Split Subject, Divided Subject; Castrated by language (Symbolic)
		$S(A)$ Signifier of the Lack of the Other (Real). = F or 1 <sup>st</sup> loss of the Other's desire (Primal Repression) <sup>1</sup>
		$a$ Jouissance, left over from the body, object cause of desire (Real)
		$\La$ Woman not whole; Woman does not Exist she ex-ists (Real)
		$\Phi$ Signifier of Desire (Symbolic)

### NOTES

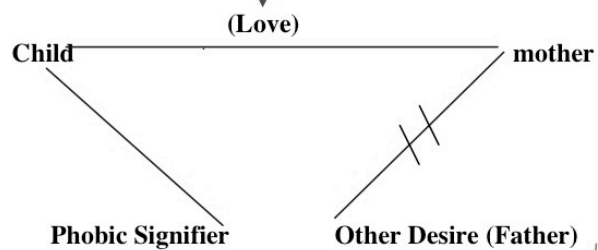
<sup>1</sup> [An exclusion occurs for something else to come into being] The signifier crosses out the Real & becomes Das Ding, but not only has an imaginary, but a Real satisfaction that goes beyond Neurosis. (Beyond Neurosis – subjectivising the cause/being your own cause)

## Appendix C

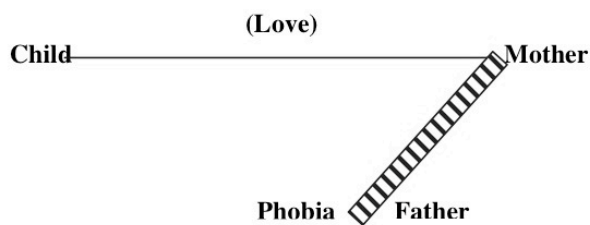
The mother's desire for the Other should be enough to guarantee the child subject that the mother's desire will not overtake him/her because she desires elsewhere.



The mother's desire for the Other is not enough to guarantee phobic child that the Mother's desire will not overtake him/her so the child presents the Mother with a phobia



The phobia guarantees that the child subject will have a distraction for the Mother's overpowering desire. The Phobia is for the Mother.



Adult construction of Phobia where the mother is replaced by an inscription on the Symbolic order that is both law & language but is particular to the subject. The Father function is strengthened by the Symbolic function of the phobia in defence of the desires placed on the subject by the Other.

