The Oedipus complex in psychoanalysis: reflections on Freud’s clinical cases
Antonella Trotta¹*, Ivan Formica ²

¹ Social, Genetic and Developmental Psychiatry Centre, Institute of Psychiatry, Psychology and Neuroscience, King’s College London, London, UK
² Department of Cognitive Sciences, Education and Cultural Studies, University of Messina, Italy.
Email Corresponding author: antonella.a.trotta@kcl.ac.uk

Abstract

The Oedipus complex represents a key concept of psychoanalytic theory and is one of Freud’s most significant ideas. It constitutes a basic conflict in all humans’ psyche and it defines the structure of individual’s sexual identity. Despite Freud fully recognizing its crucial role in the organization of mental life, he never dedicated to it an entire writing. The Oedipus complex was, in fact, developed in multiple steps and its development cannot be disentangled from events in Freud’s personal and professional life. The aim of this paper is to describe the development of Freud’s concept of the Oedipus complex throughout his writings. Objectives of the study were, first, to provide a description of the theoretical mechanisms
and, second, to focus on the Oedipus complex on three of Freud’s clinical cases: Dora, Little Hans and the Wolf-Man.

Key words: psychic development, oedipal structure, projective identification, phallic phase, castration.

Introduction

The first step for the development of the Oedipus Complex was signed by what Freud defined as the most important event in a man’s life (Freud, 1900): the death of his father Jakob, the 23rd October 1896. In the letters he wrote to his dear friend Wilhelm Fliess, Freud described himself as feeling uprooted by this event, that painfully reawakened the past (Freud, 1896).

In the middle of his self-analysis, which started in July 1897, Freud acknowledged his resistance to something surprisingly new, an inner conflict that occurred during childhood: his love towards his mother and the jealousy towards his father. He described it using the Greek tragedy of Oedipus: “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 […]” (Freud, 1897, p. 272).

It was only three years later that Freud referred publicly to the Oedipus complex as the root of formation of neurosis, but still without naming it using this term. In The Interpretation of Dreams (1900), in fact, he highlighted the fundamental and universal role played by parents in the mental lives of all children who later become psychoneurotic: “Being in love with one parent and hating the other are among the essential constituents of the stock of psychical impulses which is formed at that time and which is of such importance in determining the symptoms of the later neurosis […]” (Freud, 1900, pp.260-261).

Despite the concept being long familiar to Freud, and the fact that in 1909 he referred to a nuclear complex in his Five Lectures (Freud, 1910a), the first published use of the term Oedipus complex appeared only one year later, in the
paper *A special type of choice of object by man* (Freud, 1910b). In this paper he described how the boy’s discovery of sexual relations between his parents, and consequently the fact that the mother belongs to the father, activates sexual impulses within the boy. He begins to desire to have sexual intercourse with his mother and hate the father as a rival third part that obstructs the way of this wish; “he comes, as we say, under the dominance of the Oedipus complex” (Freud, 1910b, p. 238). Only many years later, in the *Ego and the Id* (1923a) and in *The dissolution of Oedipus complex* (1924) Freud described two possibilities of satisfaction for the boy offered by the Oedipus complex: the active or positive form, where he could put himself in his father’s place and have intercourse with his mother, and the passive or negative form, taking the place of his mother and be loved by his father (Freud, 1923a; 1924). On both ways to obtain satisfaction the boy perceives father or mother respectively as hindrances.

In his paper *The infantile genital organization* Freud (1923b) stated that genitals, precisely the phallus, and their activities, assume a dominating significance in a boy’s development of sexuality. Despite the little boy perceiving a distinction between men and women, he assumes that all living and non-living beings, human, animals, and inanimate objects, possess an organ like his own and he tries to see it to compare to his own. With the discovery of a lack of penis in some people of different sexes, the little boy comes to the conclusion that it has been taken away, triggering anxieties linked to the possibility to be punished with castration. During the phase of phallic primacy the boy builds up complicated theories to explain the absence of a penis and it is characterized by the antithesis between having male genitalia and being castrated; this is the moment, Freud stated, when the Oedipus complex reaches its climax, between 3 and 5 years of age (Freud, 1923b).

But the possibility of being castrated made an end of both possible ways of obtaining satisfaction from the Oedipus complex and the conflict between the boy’s narcissistic interest in his penis and the libidinal cathexis of his parental objects comes to an end with the triumph normally of the first of these forces.
This leads to the dissolution of the Oedipus complex, and the introjection of the authority of the father or the parents into the ego forms the nucleus of super-ego and states the entrance in the phallic stage (Freud, 1923a; 1924).

Freud seemed at this point quite confused by the female sexuality that he defined in his *Three essays on the Theory of Sexuality* (Freud, 1905a) as a “dark continent” and, despite the fact that he explained that the female sex develop an Oedipus complex, a super-ego and a latency period, he continued to use a phallocentric perspective to describe the castration complex and the phallic organization in girls, reducing any difference to the fact that “the girl accepts castration as an accomplished fact, whereas the boy fears the possibility of its occurrence” (Freud, 1905a, p. 178). In the case of the Oedipus complex within a female context, a double change is required: in her leading sexual organ and in her sexual object. A crucial moment is represented by the discovery of the penis of a brother or playmate that generates feelings of envy. As psychical consequence of the lack of penis the girl insists on being like a man, she develops a sense of inferiority and feelings of jealousy. As another consequence of penis-envy the girl starts to lose interest in her affectionate relationship with the mother, responsible for her lack of penis. In fact, with the recognition of anatomical distinctions between sexes the girl abandons the idea to compete with boys also in masturbatory practices and she substitutes her wish of a penis with a wish of a baby, and the father become her love-object, while the mother is the object of jealousy (Freud, 1925).

Therefore, in boys the motive for the demolition of the Oedipus complex is the fear of threat of castration; in girls the motive for its dissolution is the lack of penis. But conversely from the male, the girl’s Oedipus complex does not culminate with the renunciation of the penis, taking the mother’s place and adopting a feminine attitude towards her father. What is crucial is her wish to receive a baby from her father as a gift (Freud, 1925).
In October 1900, Freud began the analysis of Dora, an 18 years old girl of “intelligent and engaging look”. In Dora’s case, Freud identified the psychical trauma as indispensable prerequisite for the production of a hysterical disorder in the audacious proposal that Herr K., a married man, made to her during one of their walks at the lake. Herr K., taking Dora by surprise as she said to the analyst, took her in his arms and kissed her on her lips. Dora, shocked, slapped him and pushed him away. Dora and her parents met Herr K. and Frau K., a middle-class Viennese couple, in an Italian holiday resort and established an intimate friendship with them. Frau K. had nursed Dora’s father during his long illness and they soon began having an affair.

During the course of her analysis, Dora admitted that, at the moment of Herr K.’s kiss, feeling the pressure of his erected member against her body sexually aroused her, but at that moment she suddenly had a violent feeling of disgust. Freud explains this phenomenon as the result of the reversal of the unpleasurable feeling triggered by the sexual excitement and the displacement of the sensation in another innocent part of the body, the torax. Because, Freud stated, a symptom signifies the representation and the realization of a phantasy with a sexual content, he interpreted Dora’s symptoms as related to her father and as a way to separate him from Frau K.

Freud interpreted Dora’s revived love for her father as a reactive symptom: she summoned up her infantile affection for her father in order to suppress her love of Herr K., as well as to conceal her deep unconscious love for Frau K., which were pressing to come into her consciousness. In *Fragment of an Analysis of a Case of Hysteria* (1905b), Freud, for the first time, applied the concept of psychic bisexuality and recognized the role it played in Dora’s conflict, characterized by her attraction for men and the feelings she had towards other women (Quinodoz,
2005). Interpreting Dora’s dreams during her analysis, Freud linked her present symptoms to past events occurred during childhood. The first dream, as related by Dora, appeared four days after Herr K.’s proposal; according to his theory of wish fulfilment, Freud interpreted it (Freud, 1900) as an expression of her wish to be rescued from her father in a situation of danger, such as Herr K.’s proposal and, first of all, to protect her from the temptation she felt to yield to him, from which she was even more unconsciously afraid. Her father was himself partially responsible for her present danger, exposing Dora to a stranger in order to protect his own affair with Frau K. Another important Oedipal element of the dream is the role of the maternal figure as Dora’s rival in her father’s affection. Dora’s jealousy of her mother was inseparable from her infantile love for her father that she used for her protection.

Dora’s symptomatic acts, such as the bed-wetting after her sixth year and the subsequent dyspnoea, gave Freud good reasons for supposing that during her childhood she used to practice masturbation as well as she had overheard her parents breathing hard while they had sexual intercourse. Later, when her father was away and she wished for him to come back, she reproduced in the form of asthma the impression she received. Dora’s cough, which originated from a slight genital catarrh, was an imitation of her father’s illness that she attributed to sexual practice and he blamed him for having transmitted to her as well as her mum, and it came to represent sexual intercourse with him identifying herself with Frau K., the woman he had an affair at that moment. The second dream was rich of elements that remind one of an Oedipal conflict; Freud interpreted this dream as an expression of Dora’s craving for revenge against her father, her revolt against her parent’s constraint, as well as the images of the station and cemetery represented clearly the female genitals. Dora ended the analysis unexpectedly on the 31st of December, after just 3 months; Freud considered her rejection as her wish to castrate him and to take revenge against Herr K.

Little Hans (Analysis of a Phobia in a five-year old boy, 1909)
The clinical history of Little Hans represents the first psychoanalytical treatment of a little boy. At the age of 3 years old Little Hans was already showing a lively interest in his penis, which he called his widdler. It became soon an object of curiosity, evidenced by Hans continuous questioning of his parents as to whether they had a widdler too. One day, his mother found him touching his penis and threatened to call the doctor to cut it off, so he could not pee; Freud affirmed that in this occasion the castration complex appeared, underlying its fundamental role in the life of a boy as well as in the emergence of neurosis.

An important event when Hans was three and half years old was the birth of his little sister Hanna. This event stirred up feelings of jealousy and he developed a particular aversion to the new-born because she was depriving him from his parent’s love; several times he expressed the wish she might die at the same time overcompensating this by an exaggerated affection. His first attitude towards his sister was hostility, suppressed and represented by a fear of the bath. In his unconscious, both his father and his sister were treated in the same way, because both deprived him from his mother’s love and interfered with him being alone with her. Moreover, with his sister’s birth Hans was faced with the distinction between male and female genitals and with the question: Where do babies come from? He immediately refused the solution of the stork proposed by his father and noticed that she had been inside his mother’s body, and then come out like a lumf and that his father must have had something to do with this.

Freud recognized the source of the Oedipal conflict in the contrast between hate of the father who prevented Hans being in bed with his mother and who detected the knowledge about babies birth, and love directed to him as model, as first playmate as well as someone who took care of him. The suppression of hostile and jealous feelings toward his father and sadistic impulses towards his mother may have gone to form the predisposition for Hans’ illness. With the sense of privation due to his sister’s birth as well as the intensification of sexual excitement, the repressed contents forced their way into consciousness. His libido turned into anxiety and attached to the specific fear that a white horse would bite
him. He began to refuse to leave his home because he was afraid a horse will bite him in the street and this fear, as his father wrote in the notes, seemed connected with him having been frightened by a large penis. The restrictions due to his phobia allowed him to stay at home with his mother and to achieve his aim. His anxiety, stated Freud, corresponded to a repressed longing. A few days earlier, in fact, Hans woke from an anxious dream thinking that his mother had gone away.

Hans’ fear that the horse will come into his room betrayed the fact that he was afraid of his father because he himself had hostile and jealous wishes against him. Moreover Freud recognised in certain details which Hans was afraid of – the black on horses’ mouths and the things in front of their eyes –some characteristics of his father, the moustaches and the glasses respectively, which had been directly transposed onto the horses. Freud’s interpretation of the equation horse-father represented a crucial moment during the treatment course, leading to Hans’ complete cure.

The Wolf-Man (From the history of an infantile neurosis, 1918)

In February 1910, at the age of 23, this wealthy young Russian, who suffered from severe psychological problems considered incurable, came to Freud for analysis.

Freud identified the trigger point of the patient’s infantile neurosis in two episodes of seduction which occurred when he was a little boy of 3½, and he suddenly became discontented, irritable, and violent towards people close to him as well as towards small animals. The first seduction episode is linked to the arrival of an English governess and to her verbal threats of castration towards him; the second one is linked to his sister’s seduction into sexual practices, such as playing with his penis. Moreover, the problem of castration was stirred up by the failure of his attempt at seduction of his nanny, playing with his penis in her presence, followed by her threats of wound in the place, by the observation of girls while they were urinating, and by the memory of a snake beaten by his father into pieces with his stick.
Because of these episodes, the little boy’s sexuality, as Freud said, which was beginning to come under the dominance of the genital zone, regressed into an earlier phase of pre-genital organization, to a sadistic-anal stage. As consequence, his father, from object of identification of his active current, became the sexual object of a passive current; the seduction experiences leaded him to move from a passive attitude towards women to a passive attitude towards men, using his naughtiness to obtain the desired masochistic sexual satisfaction. This phase of perversity and seduction at the age of 3½ was followed by a longer phase where the signs of neurosis dominated the little boy’s life, triggered this time not by a real experience but by the famous wolves dream. Freud linked the dream-content with the fact that the boy was witness to a primal scene of sexual intercourse between his parents which occurred when he was only 18 months and the copulation probably consisted in a *coitus a tergo* (from behind), offering the boy the possibility to watch both his father and his mother’s genitals as well as their expression of satisfaction. Witnessing the primal scene convinced him of the reality of castration, the wound his nanny was previously threatening him, and to recognize it as a necessary condition of intercourse with his father. Therefore, the wolves of the dream clearly represented his father and Freud interpreted the fear of being eaten by the wolves as a repudiation of the wish for sexual satisfaction from his father, obtained in the same way as his mother; the anxiety originated from the repression of homosexual libido and from fear of castration that was subsequently bound into phobias. The primal scene activated by the dream at the age of 4, brought him back to genital organization, with the discovery of the vagina and the anatomical differences between men and women, with active sexual aim connected to masculine and the passive correspondent to the feminine. During the dream, the boy identified with the castrated wolf, which represented the castrated mother, stirring up the revolt on the part of his narcissistic masculinity and that was subsequently repressed.

The masochistic and ambivalent relationship between the love for his father and hostile impulses against him, found its expression into an obsessional neurosis
with a religious theme taken from the Bible stories, when he was the age of 4½ years old.

A positive identification with the father occurred during another seduction scene when he was 2 years old, when his first nanny, while she was kneeling on the floor to clean it, entered into a position that reminded him of the one adopted by his mother during the primal scene; the nanny threatened him with castration because he urinated in front of her. Adopting the same position of his father during sexual intercourse, the little boy identified in his mind with him and substituted the nanny with his mother, behaving in a masculine way towards her. Therefore, the primal scene became a model for his further relationships; his later love-objects were in fact his mother’s surrogate. Moreover, the patient’s phantasy of re-birth and the wish to be in the womb, represented an homosexual wishful phantasy to be in the woman’s place in order to have sexual intercourse with the father and give him a baby. On the other hand, the re-birth was a substitute of the phantasy to have intercourse with his mother as well. The two incestuous phantasies gave expression of the patient’s psychic bisexuality, of the feminine and masculine subject’s attitude.

Discussion

Different authors underlined Freud’s attention only to the positive Oedipus complex both in Dora and Little Hans’ cases; omitting their regression to a negative Oedipal position. Dora’s symptoms, in fact, represented her attempt to identify with her father. Freud interpreted her homosexual trend simply as a regression to a longing for her mother, without any link with her hostility towards men based on her jealousy of those that can possess women phallically, like her father (Khron & Khron, 1982). Dora’s unconscious hostility and castrative wishes were played out in the transference by rejecting Freud’s interpretations. Freud failed to interpret Dora’s aggressive and rivalrous transference and her phallic competitive impulses toward men; he strictly connected this to her homosexual object love, and this probably contributed to her premature interruption of the treatment (Khron & Khron, 1982).
In his paper *The Analysis of Little Hans and the Theory of sexuality*, Horacio Etchegoyen (1988) reviewed Freud’s analysis of the case. Hans wish to have babies, his ideas of pregnancy and birth reactivated as well by his sister’s birth, were all expression of a negative Oedipus complex, whose analysis was omitted by Freud. Hans’ anxiety dream represented the desire to be with his mother and to possess her as much as the hostile desire to make her disappear. Moreover, for Etchegoyen (1988) Freud was satisfied with the discovery of castration anxiety and he did not go further with the investigation of Hans’ awareness about the existence of a vagina. Freud did not recognize that little Hans’ accepted the differences between sexes. He looked at women’s genitals (his mother’s, the servant’s, Berta’s and another little friend’s) because it excited him and not to deny castration, as Freud thought. “As a corollary to the Oedipus complex, castration anxiety can only be understood, I feel, as the risk of placing the penis in the vagina and being attacked by it” (Etchegoyen, 1988, p. 42).

Only the Wolf-Man case illustrated Freud’s acknowledgement of the complete form of the Oedipus complex, both positive and negative. In his analysis of the case, next to the patient’s homosexual tendencies lied his heterosexual tendencies: the identification of his father with the castrator as a source of hostility and death-wishes towards him and the sense of guilt as a reaction against them, were considered as expressions of a positive Oedipus complex. The prevalence of the masculine and feminine sexual disposition in boys or girls will determine whether the outcome of the Oedipus situation will be identification with the father or the mother (Freud, 1923a). Moreover, with the dissolution of the Oedipus complex the two identifications, with the father and with the mother, form a precipitate in the ego: the super-ego or ego ideal. The conflict between the ego, representative of the external world, and the ideal, representative of the internal world, reflects the contrast between what is real and what is psychical. The ego ideal has a link with the archaic heritage of the individual as well: religion, morality and social sense all originated from the father-complex (Freud 1913; 1923a).
Further developments of the Oedipus Complex

Freud’s “phallocentric” conception of sexuality, based on the idea that the difference between sexes is based on possessing a penis or not, has been later criticized (Birksted-Breen, 2005). Ernest Jones (1935) accused him of underestimating the importance of a primary femininity: little girls are aware of the existence of the vagina from early on and they have an innate heterosexual drive. The defensive denial of the vagina is an expression of anxieties concerning the inside of the body, associated to the girl’s wish to attack the inside of the mother’s body (Klein, 1945). Inspired by Klein’s idea, Janine Chasseguet-Smirgel (1981) stated that penis envy represents a revolt against the mother, the wish to escape from her control and power. The denial of the vagina is linked to what the author called “incorporation guilt”: in order to maintain the father ideal the girl needs to repress her aggressive instincts towards him (Chasseguet-Smirgel, 1981).

Moreover, Freud’s concept of Oedipus complex has been further developed by Kleinians. Melanie Klein (1945) focused on the early, pre-genital phases of development (Feldman, 2005). From the first year of life, the baby structures the world in terms of triangular relationships. In order to preserve a good relationship with the breast, the baby recurs to primitive defensive mechanisms that create an early prototype of an Oedipal situation: he splits off and projects the persecuting aspects of anxiety in a third space. Therefore, two objects populate the baby’s inner world: the loved and desired mother’s breast on one side and the hated and feared father’s penis on the other side, with the latter considered as treat for the possession of the mother’s breast.

Extending Klein’s perspective, Ronald Britton (1989) introduced the concept of triangular space, a space defined by the three people in the Oedipal situation where the baby feels as the participant and observer of all the potential relationships between them. The closure of the triangle with the acknowledgement of a link between the parents defines the boundaries of the baby’s psychic world. Oedipal illusions (Britton, 2007) or what John Steiner (1985) defined as turning a blind eye, the defensive distortion of the psychic
reality of the parental relationship, have as a consequence the inability to see ourselves in interaction with others and for entertaining another point of view without losing our own. Therefore, growth and learning from experience is not made possible.

In 1938 Jacques Lacan, in his paper titled ‘Family complexes in the formation of the individual’, described the fixation of the child’s sexual desire on an imaginary object. The object is ‘the parent of the opposite sex’. However, the sexual drives are frustrated and repressed with the aim to obstacle their satisfaction. The parent represents therefore the agent of the sexual prohibition and, at the same time, the symbol of transgression. In Lacan’s view (1938), the resolution of the Oedipus Complex is represented by a two-fold process: the repression of the sexual wish, that will remain latent till the puberty, with the formation the Super-Ego, and the sublimation of the parental imago with the creation of an ideal image in the consciousness, the ego ideal. In this model, the oedipal triad is not represented by mother-child-father but a central role is occupied by the ‘phallus’ that represents the symbolic signifier of the desire of the other (Lacan, 1958). The phallus takes on the function of the ‘signifier of lack’ for the individual (Lacan, 1958) because it represents the unknowable nature of the desire of the Other, as a symbolic condition of desire, rather than as a particular object.

Further recent developments of the Oedipus complex have come from the French psychoanalytic movement. The Oedipus complex is the realization of an oedipal preconception constructed in the encounter between the parental Oedipus complex and the child's own capacities for cathectis and identification (Louppe, 2012). The Oedipus complex, according to Louppe, represents an encounter of psychic spaces in a group dimension, where the parents-infant relationship is characterised by their physical experiences and the capacity of integrate the absence, to let the ‘third’ to emerge (Louppe, 2012). The emergence of the ‘thirdness’ is therefore the expression of a transformative process of the parental psyches, that allows the infant to have the psychic space to experience. The primary identification of the child with the father, according to Freud, forms the
foundation for the structure of the Oedipus complex and psychic bisexuality. However, also the identification of the child by the father and its assignment of a gender, "girl or boy", seems to be a pivotal moment as the identification with the father. These two identificatory movements also include the mother's desire for the father (Abrevaya, 2012).

Based on Louppe's paper, Catherine Chabert (2012) opens two lines of discussion for understanding forms of incompleteness of the Oedipus complex. The first explores the oedipal configurations that can appear in the treatment of borderline patients. The prevalence of the problem of object loss in what Chabert defines ‘fonctionnements limites’ cannot be neglected and it is the loss of the object and the relationship with the mother that obstacles the development of mature sexuality. The author highlights a straight connection between sexuality and loss, between the re-experience of Oedipus Complex and the anxiety of the loss of the object’s love. Furthermore, in her paper ‘Incertitudes œdipiennes’, Chabert’s second line of discussion focuses on the female Oedipus complex: how it begins and unfolds and its dissolution. In 1932, Freud stated that masculine and feminine are mixed in the individual and they are subjected to fluctuations (Freud, 1933). The prevalence of the feminine part is characterised by the repression of aggression, with the development of the masochism, which exercises the important function of bounding self-destructive tendencies. The development of the femininity goes through a process of identification; the appropriation of a trait of the object from the subject. Therefore, the prevalence of the identification to the father or the mother produces the prevalence of the masculinity or the femininity, determined by the choice of the object of oedipal love. Chabert moves forward from Freud’s idea, that the girl's Oedipus complex inspires pathological forms of the complex, whereas the masculine model represents its natural, even ideal, destiny. The dissolution of Oedipus Complex in women seems to be characterised by a repetition of the object’s loss and by the attachment to the pain of the loss (Chabert, 2012).

The confrontation with sexual difference in anatomical terms has a determinant impact on the psychic life (Freud, 1925). It opens the path to the two outcomes of the oedipal dissolution, the feminine and masculine currents in emotional life.
The complexity of the process has a double valence: a positive one, which organises the psychic life and allows its sexual development and a negative one, that is responsible for destructive attacks on the ego. The working-through and the work of the psychoanalytic treatment, with the impact of the transference and of interpretations, represents a moment of re-foundation and re-experience of the conditions of decline of Oedipus Complex (Suchet, 2012).

References


