

*American Handbook of Psychiatry*

---

# **SADISM AND MASOCHISM**

Phenomenology and Psychodynamics

---

**IRVING BIEBER**

**SADISM AND MASOCHISM:**

**PHENOMENOLOGY AND PSYCHODYNAMICS**

**Irving Bieber**

e-Book 2016 International Psychotherapy Institute

From *American Handbook of Psychiatry: Volume 3* Silvano Arieti

Copyright © 1974 by Silvano Arieti and Eugene B. Brody

All Rights Reserved

Created in the United States of America

## Table of Contents

### SADISM AND MASOCHISM: PHENOMENOLOGY AND PSYCHODYNAMICS

[Sadism](#)

[Masochism](#)

[Bibliography](#)

# SADISM AND MASOCHISM: PHENOMENOLOGY AND PSYCHODYNAMICS

**Irving Bieber**

Sadism and masochism were introduced as syndromes into the psychiatric literature by Krafft-Ebing in 1882 in his now classic work, *Psychopathia Sexualis*. This volume contains the most extensive and probably best collection of illustrative clinical cases. The author derived some of his data from his consultation practice, some from the reports of physicians, but most were obtained from prostitutes who had first-hand experience with sadomasochistic clients.

## Sadism

Krafft-Ebing borrowed the term “sadism” from the French novelists of his time who had come to use it to describe the association of sex and cruelty, a theme made prominent by the Marquis de Sade in his autobiographical writings on the subject. Krafft-Ebing defines sadism as,

The experience of sexually pleasurable sensations (including orgasm) produced by acts of cruelty, bodily punishment, inflicted by one’s own person, or when witnessed in others, be they animals or human beings. It may also consist of an innate desire to humiliate, hurt, wound, or even destroy others in order thereby to create sexual pleasure in oneself.

He identified three categories: (a) sadistic acts following coitus that gave inadequate gratification; (b) sadistic acts by individuals with diminished virility in attempts to enhance sexual desire; (c) sadistic acts calculated to induce orgasm without intercourse in cases of total impotence.

The spectrum of described sadistic behaviors ranged from the infliction of pain and injury during the height of sexual excitation to cases where victims were mutilated and murdered. Only men participated in sadistic violence; they derived sexual pleasure through strangling their victims, disemboweling them, hacking them to pieces, and cutting off breasts and genitals. In several instances, the sadists reached a high pitch of excitement by the odor of the body and by the odor and taste of blood. In most, though not all, instances, the victims were women; ages varied from young children to old people; appearances varied from the beautiful to the ugly. A particularly gruesome case was that of Maréchal Gilles de Rez who was executed in 1440 “on account of mutilation and murder which he had practiced for eight years on more than 800 children. . . . This inhuman wretch confessed that in the commission of these acts he enjoyed inexpressible pleasure.” Krafft-Ebing noted that sexual sadism occurred far less frequently in women and he described only two such cases.

In a subcategory, “Injury to Women (Stabbing, Flagellation, etc.)” the author noted a special group of cases where the erotic cue was the blood of

the victim. As to the Marquis de Sade, "Coitus only excited him when he could prick the object of his desire until blood came. His greatest pleasure was to injure naked prostitutes and dress their wounds." In another subcategory, "Defilement of Women," cases of men are described who have the need to defecate or urinate on women or in other ways to defile their persons. Of special interest, because of Freud's well-known paper, "A Child Is Being Beaten," are Krafft-Ebing's cases under the heading, "Sadism with Any Other Object—the Whipping of Boys." One case is of a twenty-five-year-old man. "At the age of eight while at school, he saw the teacher punish the boys by taking their heads between his thighs and spanking them with a ferule." The sight promoted lustful excitement in the boy. "From that time on until the age of twenty, this man masturbated with a fantasy of a boy being punished." In a second case, there was a history of sexual excitation from the age of six on, when the subject saw his father whip the other children and later when his teacher whipped his classmates. He masturbated from then on with the fantasy of seeing children whipped. When he was twelve, he convinced a companion to permit himself to be whipped by the patient who reported sexual excitement during the incident.

Krafft-Ebing explained sadism in two ways; the first applied to both sexes.

At the moment of most intense lust, very excitable individuals who are otherwise normal, commit such acts as biting and scratching which are

usually due to anger. It must further be remembered that love and anger are not only the most intense emotion but also they are the only two forms of robust emotion.

The idea that sex and anger are the only two forms of “robust emotion” is original and prophetic; it is a forerunner of Freud’s theory that there are two basic instincts, sex and aggression. The concept that one excitatory organization—sexuality—can lock into and use behavioral components of another excitatory organization—anger and rage— gains support from the observations of ethologists who demonstrated that components of the attack constellation of behavior are incorporated into the sexual organization.

Krafft-Ebing’s second explanation centered around the concept of power, specifically, masculine power.

In the intercourse of the sexes, the active or aggressive role belongs to the man; woman remains passive-defensive. It affords a man great pleasure to win a woman, to conquer her; and in the art of love making the modesty of a woman who keeps herself on the defensive until the moment of surrender, is an element of great psychological significance and importance. Under normal conditions, man meets obstacles which it is his part to overcome, and for which his nature has given him an aggressive character. This aggressive character, however, under pathological conditions may likewise be excessively developed, and express itself in an impulse to subdue absolutely the object of desire, either to destroy it or kill it.

Power was the central idea in Krafft-Ebing’s view of sadism and masochism. It was conceived to be a biological component of sexuality. In



sadism, power was biologically rooted and masculine; its function was to overcome feminine resistance in the service of propagation. Masochism was conceptualized as feminine, since the masochist was acted upon and submitted to the power of the other; the male masochist was thought to have feminine traits. Krafft-Ebing's explanation of sadism reappeared in Freud's discussion of it:

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

Freud equated sadism with aggression, activity, masculinity; masochism with passivity and femininity. When he expanded his concepts of sexuality to include the pregenital phases—oral and anal (genetic theory)—he assigned active and passive components to each phase. The oral active component included all activities in which the mouth acted on objects, as in eating, biting, and so forth. This active component was termed the sadistic component where he again equated action and sadism. The receptive component was conceived of as the oral passive one. In the anal phase, the rectal and perianal musculature was thought to mediate the activities of the active phase, such as in the expulsion of feces. The erotogenic anal mucosa, which was eroticized

by objects, including feces acting on it, was the passive component. Note that again the active component was identified with sadism, a formulation that became the basis for theorizing an anal sadistic libidinal phase. It must be remembered that Freud's formulations on sadism and libidinal phases were highly speculative; they had no foundation in observed behavior nor any relation to the syndrome of sadism described by Krafft-Ebing.

The term "sadistic" has come to be used to describe various types of cruel and destructive behavior, particularly where the perpetrator derives pleasure from it. In a literal sense, the term should be restricted to acts of cruelty that are sexually arousing. In my view, sadism is a maladaptive response to threat; it is a paranoid constellation in which the victim is a personified representative of a variety of irrationally perceived threats. The victims may represent a parent, or an authority who threatens to punish or prohibit sexual activity; or the person who arouses dangerous sexual feelings; or one who personifies submission, masochism, or other unacceptable attitudes. The victim must then be dominated, injured, neutralized, or destroyed. The affect operant in sadistic sexual behavior is a complex of rage, anxiety, relief, vengeance, and frenetic ecstasy accompanying a sense of triumph in subjugating an enemy or otherwise extinguishing a threat. The sexual sadist confuses this affect complex with sexual arousal, most particularly because sexual excitation is actually a component part of the complex.

Cases of sexual sadism are rarely encountered in psychiatric practice today. The actual frequency of such behavior is not known. Most of the reported case material has been anecdotal and derived largely from prostitutes. An index listing under sadism for either men or women is even absent from Kinsey's studies.

## Masochism

Krafft-Ebing introduced the term "masochism" to define a syndrome described in the writings of Sacher-Masoch, a nineteenth-century novelist who was himself a masochist. Krafft-Ebing defined masochism as the opposite of sadism:

While the latter is the desire to cause pain and use force, the former is the wish to suffer pain and to be subjected to force. By masochism, I understand a peculiar perversion of the psychical sexual life in which the individual affected in sexual feeling and thought is controlled by the idea of being completely and unconditionally subject to the will of a person of the opposite sex; of being treated by this person as by a master, humiliated and abused. This idea is colored by lustful feelings . . . from the psychopathological point of view, the essential and common element in all these cases is *the fact that the sexual instinct is directed to ideas of subjugation and abuse by the opposite sex.*

In defining and describing masochism, Krafft-Ebing repeatedly stressed power rather than the pain motif. The emphasis was on subjugation and abuse, not on being physically pained, whereas in sadism he stressed both the subjugation of the victim and the infliction of pain and injury. In some

instances, the masochistic activity was a prerequisite for coitus; in others, it replaced coitus and resulted in orgasm without intercourse. Krafft-Ebing's case material still has heuristic value and remains didactically useful as the following cases illustrate:

Case #50. A twenty-nine-year-old male from the age of five became sexually aroused by whipping himself or fantasizing other boys being whipped. He masturbated with fantasies of whipping. On the first occasion that he visited a prostitute, he was flagellated by a pretty girl but this did not produce arousal. The second time, he fantasied the idea of subjection to the woman's will and he became sexually aroused. He would also derive pleasure from the fantasy that he was a page to a beautiful girl. The patient was also fetishistic and was aroused by women wearing high heels and short jackets.

Case #51. A twenty-six-year-old male whose masochistic pattern first surfaced at the age of seven when he took part in a fight between the pupils of his school. "[Afterwards] the victors rode on the backs of the vanquished. He thought the position of the prostrate boys a pleasant one, wanted to put himself in their place, imagining how by repeated efforts he could move the boy on his back near his face so that he might inhale the odor of the boy's genitals.<sup>1</sup> When he reached puberty, he began to fantasy being straddled by young women who would ruinate on his face and in his mouth. He never activated his masochistic fantasies and remained totally impotent and

abstinent.

Case #52. A male aged twenty-eight who at the age of six had dreams of being whipped on the buttocks by women. When he became sexually active, coitus was possible only if his partner told him how she had flagellated other impotent men and threatened to give him the same treatment. At times, it was necessary for him to either fantasy himself bound or to be, in fact, bound. "The only thing in women that interested him were the hands. Powerful women with big fists were his preference."

Case #55. A thirty-four-year-old male had strong homosexual impulses but never acted them out. "Occasionally he would obtain a prostitute, undress himself completely (while she did not), and have her tread upon, whip and beat him. He was filled with the greatest pleasure while this was being done, and would lick the woman's foot which was the only thing that could increase his passion and he then achieved ejaculation."

Case #56. A twenty-eight-year-old male who visited a brothel once a month, "would always announce his coming with a note reading thus: 'Dear Peggy, I shall be with you tomorrow evening between eight and nine o'clock ---Whip and Knout! Kindest regards.' He always arrived at the appointed hour carrying a whip, a knout and a leather strap. After undressing, he had himself bound hand and foot and was then flogged by the girl on the soles of

his feet, calves and buttocks until ejaculation ensued.”

Case #57. This case of a thirty-five-year-old man most clearly illuminates the psychodynamics of masochism. “Even in my early childhood I loved to revel in the ideas about the absolute mastery of one man over others. The thought of slavery had something exciting in it for me, alike whether from the standpoint of master or servant. That one man could possess, sell, or whip another caused in me intense excitement and in reading *Uncle Tom’s Cabin* which I read about the beginning of puberty, I had erections. Particularly exciting for me was the thought of a man being hitched to a wagon in which another man sat with a whip driving and whipping him.” After the age of twenty-one, the fantasy of a powerful figure became exclusively that of a woman. “From this time I was always in my fantasies the subject; the mistress was a rough woman who made use of me in every way, also sexually, who harnessed me to a carriage and made me take her for a drive, whom I must follow like a dog, at whose feet I must lie naked and be punished, that is, be whipped, by her.”

Krafft-Ebing’s emphasis on a feeling of being subjugated as the primary motif in masochism, rather than the experience of pain, is well illustrated in the above case. The power interplay initially took place between males. It was only after the patient reached the age of twenty-one that a woman who seemed powerful became a stand-in for the feared and admired powerful

man. The substitutive role of the woman is further substantiated by the patient's remarks, "I remember that when I was a boy it affected me intensely when an older boy addressed me in the second person (*du*) while I spoke to him in the third (*sie*). I would keep up a conversation with him and have this change of address (*du* and *sie*) take place as often as possible. Later, when I became more mature sexually, such things affected me only when they occurred in a woman, and one relatively older than myself."

In all, Krafft-Ebing described thirty-three cases of masochism in men. Among them were those whose initial masochistic pattern could be traced to an actual spanking on the buttocks administered more often than not by a woman, though in some instances by a man. Several of the cases were examples of what was termed "ideal" masochism, by which the author meant that fantasies of masochism were indulged in but never acted out.

These cases of ideal masochism plainly demonstrate that the persons afflicted with this anomaly do not aim at actually suffering pain. The term *algolagnia*, therefore, as applied by Schrenk-Notzing and by v. Eulenburg to this anomaly, does not signify the essence, that is, the psychical nucleus of the element of masochistic sentiment and imagination. This essence consists rather of the lustfully colored consciousness of being subject to the power of another person. The ideal of even actual enactment of violence on the part of the controlling person is only the means to the end, that is, the realization of the feeling.

Clearly, the power motif was put forward as the primary theme in both sadism and masochism.

In another group of cases, fantasies about masochistic behavior were associated with foot and shoe fetishism. In some individuals, smelling and licking sweaty or dirty feet or soiled shoes were the central fetishistic elements; in others, sexual excitement occurred when a woman urinated or defecated on the subjects' bodies.

Krafft-Ebing described only three cases of sexual masochism in women: the first became sexually excited by the fantasy of being beaten on the buttocks with a rattan cane by a man. The origin of the fantasy was traced to an experience at the age of five when a friend of her father's "took her for fun across his knee pretending to whip her." The second fantasied being whipped by another woman, the fantasy being accompanied by feelings of delight. The third involved a woman who would attend medical clinics so that a gynecologist would examine her against pretended resistance.

Krafft-Ebing's statements on masochism in women are especially noteworthy when compared to Freud's concepts which were identical in all major details. Krafft-Ebing stated:

In woman, voluntary subjection to the opposite sex is a physiological phenomenon. Owing to her passive role in procreation and long existent social conditions, ideas of subjection are, in woman, normally connected with the ideas of sexual relations. They form, so to speak, the harmonics which determine the tone quality of feminine feeling . . . thus, it is easy to regard masochism in general as a pathological growth of specific feminine elements—as an abnormal intensification of certain features of the psychosexual character of woman—and to seek its primary origin in this



sex. It may, however, be held to be established, that, in woman an inclination to subordination to man (which may be regarded as an acquired, purposeful arrangement, a phenomenon of adaptation to social requirements) is to a certain extent a normal manifestation.

In Freud's formulations, femininity was equated with passivity and the notion of submission as a normal concomitant of feminine sexuality on biological and social grounds reappeared.

Krafft-Ebing offered two theoretical explanations to account for sadism and masochism. Firstly, he conceptualized sadism as a pathological intensification of the masculine sexual character; masochism was seen as "a pathological degeneration of the distinctive psychical peculiarities of woman." Secondly, he thought that sexual stimuli emanating from the love object, including all that are ordinarily painful, such as being bitten, are perceived as excitatory and reinforcing. He further hypothesized that masochism resulted from an unusually intense dependence on the love object, which he termed "sexual bondage."<sup>2</sup> He accounted for excessive sexual dependence as a combination of strong love and weak character in individuals whose fear of loss of the love object drove them to submission. Yet, he did not consider sexual bondage to be pathological, despite the fact that masochism had its roots in it.

Krafft-Ebing did not provide an adequate explanation for the masochist's fear of power or for his subjection and self-injury, although he

pointed out that during flagellation the masochist did not experience pain as such.

The person in a state of masochistic ecstasy feels no pain, either because, by reason of his emotional state (like that of a soldier in battle) the physical effect on the cutaneous nerves is not apperceived or because (as with religious martyrs and enthusiasts) in the preoccupation or consciousness with lustful emotions, the idea of maltreatment remains merely a symbol without the quality of pain.

Kinsey described the same phenomenon:

Specific observation and experimental data indicate that the whole body of the individual who is sexually aroused becomes increasingly insensitive to tactile stimulation and even to sharp blows and severe injury. . . . Toward the peak of sexual arousal there may be considerable slapping and heavier blows, biting and scratching and other activities which the recipient never remembers and which appear to have a minimal, if any, effect upon him at the time they occur. Not only does the sense of touch diminish but the sense of pain is largely lost. If the blows begin mildly and do not become severe until there is a definite erotic response, the recipient in flagellation or other types of sadomasochistic behavior may receive extreme punishment without being aware that he is being subjected to more than mild tactile stimulation.

My own observations accord with those of Krafft-Ebing and Kinsey. The threshold for pain during sexual excitation rises markedly and masochists have reported to me that they do not experience pain. I have noted that should pain actually be experienced, sexual excitation rapidly terminates, as does the masochistic behavior.

Masochism appears to have been an enigma to Freud from the beginnings of his explorations. In his formulation of the pleasure principle, he viewed unlust (unpleasure or pain) as the psychological state that triggered release or discharge. That pain was associated with an increase of sexual excitation and could even be a goal in itself, was inconsistent with the pleasure principle.

The existence of the masochistic trend in the instinctual life of human beings may justly be described as mysterious from the economic point of view. For if mental processes are governed by the pleasure principle in such a way that their first aim is the avoidance of unpleasure and the obtaining of pleasure, masochism is incomprehensible. If pain and unpleasure can be, not simply warnings, but actually aims, the pleasure principle is paralyzed. It is as though the watchman over our mental life were put out of action by a drug.

In order to achieve consistency between his theory of masochism and the pleasure principle, Freud concluded that masochism was retroverted sadism; primary masochism did not exist.

In "Instincts and Their Vicissitudes" (1915), Freud revealed his continued struggle with the question of whether masochism was primary or secondary to sadism, or whether sadism was primary or secondary to masochism.

Once the transformation into masochism has taken place, the pains are fitted to provide a passive masochistic aim; for we have every reason to believe that sensations of pain, like other unpleasurable sensations trench

upon sexual excitation and produce a pleasurable condition for the sake of which the subject even willingly experiences the unpleasure of pain. Once feeling pain has become a masochistic aim, the sadistic aim of *causing* pain can arise also retrogressively; for while these pains are being inflicted on other people, they are enjoyed masochistically by the subject through his identification of himself with the suffering object. In both cases, of course, it is not the pain itself which is enjoyed but the accompanying sexual excitation—so that this can be done especially conveniently from the sadistic position. The enjoyment of pain would thus be an aim which was originally masochistic, but which can only become an instinctual aim in someone who was originally sadistic.

Note that the quotation also contains contradictory statements as to whether pain was or was not in itself an instinctual aim.

In his paper, “A Child Is Being Beaten,” Freud traced a woman’s fantasy of being beaten through several phases. The first involved her father beating a hated sibling and it gave her sadistic pleasure. Freud thought that because of her guilt about experiencing this pleasure, she converted sadism into masochism and then saw herself as the one who was being beaten. It was always guilt that transformed sadism into masochism. When the fantasy of being beaten by the father took over, her oedipal wishes then became integrated into the experience. Freud interpreted the beating fantasy as punishment for the oedipal wishes which, at the same time, made up the erotic component of her relationship with her father. Since the erotic component was not a direct genital experience but was transmitted through a beating, Freud theorized that the component represented a regression to the

anal sadistic level. Thus, the masochistic experience in the beating fantasy was at once a punishment and an erotic experience at the anal-sadistic libidinal level. Pressed by the oedipal component and the accompanying guilt, the fantasy was further disguised—the punishment was now meted out, not by the father, but by a father substitute, and the object being beaten was not a woman, but a boy. In this paper, Freud conceptualized the masochistic fantasy as a synthesis of forbidden sexual wishes, guilt, and punishment. At this point, he had not yet abandoned a theoretical reliance on direct, clinical observations; his later work was completely anchored in metapsychology.

In “The Economic Problems of Masochism,” Freud stated:

Masochism comes under our observation in three forms: as a condition imposed on sexual excitation; as in expression of the feminine nature and as a norm of behavior. We may accordingly distinguish an erotogenic, a feminine and a moral masochism. The first, the erotogenic masochism—pleasure in pain—lies at the bottom of the other two forms as well.

Despite Krafft-Ebing’s admonition and Freud’s own earlier ideas, in his final position, he viewed masochism as primary and pleasure in pain as an instinctual aim. As had Krafft-Ebing, Freud, too, explained masculine sexual masochism as a feminine situation.

But if one has the opportunity of studying cases in which masochistic fantasies have been especially richly elaborated, one quickly discovers that they place the subject in a characteristically female situation. They signify that he is being castrated or copulated with or giving birth to a baby. For this reason, I have called this form of masochism the feminine form. This

feminine masochism which we have been describing is entirely based on primary erotogenic masochism or pleasure in pain.

When Freud integrated masochism into his reformulated instinctual theory of libido and the death instinct, the formulation became entirely speculative. He postulated that a portion of the death instinct remained within the organism and, when fused with libido, became the instinctual source of primary erotogenic masochism.

Erotogenic masochism accompanies the libido through all its developmental phases and derives from them its changing psychical coatings. The fear of being eaten up by the totem animal (the father) originates from the primitive oral organization. The wish to be beaten by the father comes from the sadistic anal phase which follows it; castration, although it is later disavowed, enters into the content of masochistic fantasies as a precipitate of the phallic stage of organization and from the final genital stage there arises, of course, the situation of being copulated with and of giving birth which are characteristic of femaleness.

In his initial statements, Freud noted the difference in Krafft-Ebing's position, which emphasized the power motif, and Schrenck-Notzing's, which emphasized the pleasure in pain. In "Three Essays on Sexuality," Freud stated:

The most common and most significant of all perversions—the desire to inflict pain upon the sexual object, and its reverse—received from Krafft-Ebing the names of 'sadism and masochism' for its active and passive forms respectively. Other writers, (Schrenck-Notzing, 1899), have preferred the narrower term 'algolagnia.' This emphasizes the pleasure in *pain*, the cruelty; whereas the names chosen by Krafft-Ebing bring into prominence the pleasure in any form of humiliation or subjection.

In explicating masochism, Freud followed the hypothesis of pleasure in pain and ultimately integrated it into his metapsychological, instinctual theories. In taking this direction, he ultimately lost the opportunity to solve the many varied problems raised by the interesting and complex phenomenon that is masochism.

Wilhelm Reich was the first theorist to propose that masochism was a defensive maneuver or adaptation. He saw masochism as a way of seeking a lesser injury when a greater one was anticipated; he cited the case of a boy who felt relieved when he was spanked by his father, since the child believed it forestalled his castration, the punishment he really feared. Reich also discussed masochism as a way of compelling love by producing guilt in the one from whom love was sought. He noted the inability of masochistic characters to accept praise and to be outstanding. Following Reich, other authors contributed to the literature on masochism—Horney, Reik, Bergler, Rado, and Thompson. Although each of these authors had an adaptational view of masochism, only Rado and Thompson completely abandoned the pleasure in pain hypothesis. I have detailed their views in a previous paper on sadism and masochism.

In my view, a theory of sexual masochism should be consistent with the following items of behavior: (i) the sexual masochist is either impotent or is unable to attain satisfactory arousal without masochistic maneuvers and

techniques; (ii) the masochist does not experience actual pain during sexual excitation; (iii) the individual inflicting the bondage, flagellation, or humiliation is perceived as one having much greater power than the masochist himself, or he pretends that this is so. His impotence or other sexual inadequacy indicates that he is sexually inhibited.

Sexual inhibition is based upon an expectation of injury for sexual behavior, especially with a valued love object. The masochistic constellation is a defense against an expectation of injury; it permits a circumvention of sexual inhibition and allows sexual arousal to develop. Flagellation or equated behaviors are substitutes for more severe, anticipated injury. But masochism is not only a lesser punishment than feared; it locates the punishment and establishes that it has already taken place; therefore, no further punishment need be feared for the time being. The punishing individual is the stand-in for the powerful figure from whom the subject actually expects injury. In the charades of masochistic men, this power figure is usually the father or father surrogate. The “powerful” woman is a substitute for the feared father. Many elements in masochistic play-acting represent attempts at establishing a picture of the woman’s power; however, the masochist does not actually fear her; he knows that the farce can be terminated at any point in the sexual encounter.

Several of Krafft-Ebing’s cases demonstrate that the original figure



involved in childhood masochistic experiences and fantasies is a male and that the transformation to a female occurs after puberty. The powerful female may also represent a mother figure who rejected and punished male sexuality. In many masochistic fantasies, such a woman is beautiful, powerful, and she compels the man to have sex—a type of male rape fantasy. In such instances, instead of rejecting and punishing the sexual behavior, the woman commands and demands it. A son's actual experience in childhood where his mother spanks him on the buttocks is a situation in which the mother's hand is brought into contact with the boy's perigenital area. The proximity to his genitals may be perceived as erotic and can condition sexual masochism. An erotic situation is concealed under the presumably nonsexual act of spanking. It may be compared to the childhood game of playing doctor, where the sexual behavior is concealed in the make-believe practice of medicine.

Sexual masochism may, in fact, include two different types of behavioral constellations, which share in common problems about power. In one type, the basic goal is sexual gratification. This type of masochist fears he will be punished for sexual gratification by power figures, such as parents; he incorporates the punishment by the threatening parent into the masochistic sexual constellation. By this maneuver, he locates the threatening figure and takes the punishment together with the pleasure in an inextricable combination. The second type consists of masochists who cope with a feared power figure by eroticizing that individual. In this instance, the goal of the

behavior is to neutralize threatening power through sexual channels. Krafft-Ebing stated that masochism is established as a perversion when the witnessing or experiencing of tyranny becomes an erotic stimulus. Some masochists are so responsive to power that they become stimulated simply by witnessing the exercise of authority. They eroticize power which they fear or wish to use in their own behalf. Among male homosexuals, power themes are readily delineated. The core of their fear is aggressive, masculine power and this they eroticize, a dynamic that constitutes a basic element in a homosexual adaptation. Sexual masochism occurs frequently among male homosexuals.

Individuals of both sexes who are pathologically dependent may eroticize power. Their aim is not primarily to achieve sexual gratification; it is, rather, to use or acquire power. Nonetheless, eroticizing power does produce sexual arousal and, if pursued, results in sexual gratification. Differentiation between these two types of sexual masochists may require the determination of the motivation for any specific sexual experience. In general, if an individual's sexual functioning is almost entirely dependent on masochistic techniques, he is likely to belong to the type whose goal is sexual gratification. Those who eroticize power are usually capable of sexual activity without masochistic techniques. This differentiation is not an absolute one, since some of the first type may go through periods of sexual activity free of masochism; or, sometimes, they may be able to have sexual activity with

individuals who have little value to them, such as prostitutes, without the need for masochistic defenses.

### **Nonsexual Masochism**

Krafft-Ebing defined a type of masochism, which he termed “moral masochism,” that presumably was not associated with sexual arousal, although he thought there was some gratification in the suffering. Freud adopted the term, but stated that this type, too, was sexual; it was only on cursory examination that moral masochism appeared to have no connection with sex. He hypothesized that the superego was established through the desexualization of the oedipal figure. Through this defusion, morality was desexualized. He speculated that in moral masochism there was a regression to the sexualized phase of the superego and to a sexualization of morality. He concluded that moral masochism was rooted in sexuality.

Occurring much more frequently than sexual masochism is a category of behavior in which the individual self inflicts or invites injury, the goal being the extinction of threat, or the evocation of positive feelings in others. I mean by the term “injury” any condition or situation deemed inimical to one’s integrity or safety. This may include physical injury, or such other items as humiliation, rejection, neglect, and so forth. Masochistic patterns can be identified in almost everyone, but individuals in whom they are salient are

referred to as masochistic characters.

## **Masochistic Goals**

A major goal of masochistic behavior is the prevention or extinction of hostile aggression in others, in particular, powerful others. Elsewhere, I have defined power as the capability to influence, direct, or control matters of value in another's life. If this capability extends to matters of life and death, then the power is supreme. The wielder of power and the target may be an individual, group, institution, or government.

Psychoanalysis has made much of the fear of one's own aggressive impulses and acts. The fear of aggression of others has been very much underemphasized. Yet, in general, people are far more afraid of the aggression of others than of their own. When masochism is directed toward controlling the aggression of others, the behavior is a masochistic defense.

A child's first experience with power occurs within the family. The parents are all-powerful, and perceived parental power is proportional to the child's helplessness. First exposure to aggression is from parents and siblings; masochistic defenses develop and become prominent when protection is needed against their hostile aggression. I observed well established masochistic defense patterns in a three-and-a-half-year-old girl, in whom self-injury had already been obvious for one year. Since both parents were

present when I examined the child, I could witness the interactions among the three. During the preceding year, whenever one parent, especially the mother, punished the girl physically, the child would inflict or threaten to inflict self-injury. She would strike her hands or head on solid objects with sufficient force to produce hematomata; or she would burn her hand on a radiator, or over an open gas flame, if she could get to it. By these maneuvers, she was largely successful in preventing physical punishment. The mother was noticeably hostile, over-controlling, and resentful about the child's seeming victory in their power struggle; corporal punishment was not entirely renounced, despite the disturbing consequences. The child learned to extend her defensive tactics. When a physician inadvertently gagged her with a tongue depressor during pharyngeal examination, the child tore at her buccal mucosa, drawing blood and successfully discouraging further examination. On another occasion, during aural examination, the physician apparently hurt her. She then tore at the skin of her external auditory canal, this time also drawing blood. During my interview with the child, she became playfully and affectionately related to me; the mother's irritation and displeasure were overt. In this case, a masochistic technique was discovered that partially controlled attack, particularly from the mother. It demonstrates a basic principle of masochism: self-inflicted injury wards off threats believed to be even more dangerous. The child's masochism was her defense against external threat. For the masochistic pattern to become established, it must

have had adaptive value at some time, even though it is essentially maladaptive.

Physical aggression is the most primitive and obvious manifestation of the abuse of parental power. Parents may also aggress in less obvious ways. They may exploit their children in pursuit of their own needs and desires; they may compete with them; they may constrict and extinguish those areas of functioning and development that are felt to be strange, dissonant, and/or threatening. Such areas may include sexuality, creativeness, and other behavior reflecting successful enterprise. Parental aggression in such instances may be characterized by explicit negative responses or failure to relate appropriately and enthusiastically to their child's achievements.

When children are given non-ambivalent parental affection only when ill, injured, or failing in some respect, it would appear quite certain that the parents are hostile and destructive, and that the victim will likely evolve masochistic coping behavior. Although the psychopathology of masochism is in most cases traceable to destructive family influences, nonetheless, the family is usually felt as a haven from the cruelties of strangers and the outside world. The family, nuclear and extended, among its many other institutionalized functions, is a human unit from which the individual draws strength for coping with life's vicissitudes, including aggression from others. Fear that the envy of others has the potential of destructive, aggressive

predation, has been expressed in the culturally rooted and paranoid idea of the evil eye, a myth defended against by masochistic techniques. Valued possessions may be concealed, denied, and minimized; riches may be hidden behind a façade of poverty. In Oriental cultures, children, possessions, and self are often minimized, presumably out of humility and good manners, but actually out of an institutionalized expression of masochism.

Minority groups continue to be targets for aggression, but these days they usually fight back. Up until recently, however, masochistic stereotypes were common. Stepin Fetchit, a movie actor of a past era, was a stereotypical black masochist. He looked defective, was slow-moving, and always submissively addressed his white master as "Yassuh, boss." In the period before the Black Power movement, especially in the South, black parents inculcated submissive patterns, particularly in their sons, as life-saving devices. To what extent masochistic behavior is explicitly taught or acquired through identification with masochistic parents has yet to be determined. Among the upwardly mobile, particularly among minorities, masochistic behavior may be quite prominent. More often than not, they are a target for attack by an established power hierarchy although members of their own group may attack out of competitive resentment or fear of losing one of their number to the majority. The function of the masochistic adaptation is to permit the achievement of desired goals, sexual and other, while neutralizing or extinguishing anticipated aggression for the achievement of these goals.

## Masochism and Love

In pursuit of love, acceptance, affection, a kind look, or because of a fear or reluctance to hurt the feelings of others, some individuals may injure themselves or their best interests. If one believes he is better looking, more accomplished, more successful, or more desirable than the individual whose acceptance is sought and who therefore will turn away in envy or become aggressive, then those resources thought to incite envy will be sabotaged. When one sabotages efforts, constricts maximum potential, or renounces constructive goals, on the assumption that fulfillment and gratification will alienate sought-for positive feelings in another, the motivation may be love-preserving but the behavior is masochistic and maladaptive. As noted previously, such patterns develop as a consequence of parental aggression. In these cases, one or both parents were jealous of their child, or were made anxious by his achievements. Such parents subtly communicate their displeasure, or show a lack of interest or enthusiasm. Children soon discern the parents' meaning and submissively renounce gratifications. Older siblings who are jealous and competitive may also promote masochistic behavior, especially if they are admired and respected. Peer-mates and significant others outside the family may set off masochistically inspired inhibitions in academic work or in occupational interests, out of fear of group rejection. Gifted students sometimes relinquish high-level performance, because peer-mates disparage it by such epithets as bookworm, egghead, sissy, and so



forth. In adult life, beliefs about the prerequisites for love, affection, and acceptance may be derived, on the one hand, from beliefs about what others desire or demand, and, on the other, from the projections of personal responses to those situations that either evoke or inhibit positive effects in oneself. An individual may feel threatened by another who is believed to be superior in some way and whose acceptance is valued and desired. Because of fear of superseding that individual, the tendency will be to sabotage those personal attributes believed to be a threat to the power figure who then might withhold goods, services, or wished-for affection; or, worse, turn into an attacking, fearsome rival.

Masochistic techniques to evoke positive effects in others or as responses to affection by valued others constitute a psychological trap. Masochistic characters become very fearful of acceptance, much as they may wish to have it, for they hate their own masochism which they cannot control, yet fear they may act it out and lose the personal assets they wish to retain. Hence, such people fear affection and avoid closeness to others lest they become enslaved. In treatment, these patients lose such fears when they develop confidence in their ability to control masochistic, submissive behavior in situations where affection is being given or withheld.

Those who react masochistically in situations perceived as a choice between hurting themselves or others have a somewhat different problem.

They choose a masochistic route even when they do not care about or desire the affection and acceptance of the individual s) being “saved.” This type of masochist cannot bear to inflict discomfort or suffering on others. The background of some such patients often reveals a childhood saddened by a parent who had undergone considerable physical or psychological suffering. Others may have had parents who used real or simulated suffering as a way of provoking guilt and as a technique of control. If the parents’ suffering is perceived by the child to be the consequence of his own activities, he may then attempt to ease their distress by masochistic renunciation of his own normal wishes. The inability to tolerate the suffering of another is therefore not necessarily a reaction formation to one’s own sadistic instincts, as classical theory proposes. The repression of sadistic desires is but one parameter, and one which I have been able to delineate rather infrequently.

In treating patients who respond masochistically to the hurt feelings of others, they should be led to the realization that hurt feelings are hardly fatal. The point to be emphasized is that if intent and behavior are constructive, the patient is not then responsible for possible neurotic reactions in another. A good criterion for readiness for discharge from treatment is an immunity to masochistic responses when hurt feelings are manifested by others.

## **Masochistic Phenomena**

Masochistic maneuvers are as varied as man's inventiveness. Injury may be solicited or self-inflicted; it may be directed to one's person, to a function, to a valued possession—be it object or person. If one were to select any single type of dynamic constellation to exemplify the psychopathology of everyday life, masochism would be a good choice. Few, if any, are totally free of masochistic behavior. Accident-proneness, in and out of automobiles, is often masochistic. Car accidents, even of a trivial sort, are a way of acting out anxiety about achievement, since among its many uses, automobiles serve as symbols of achievement and luxury.

The fear of success, whether in work, romance, or other important spheres of life, may be defended against by a masochistically inspired disability. The realization of a meaningful aspiration or the start of an enterprise that promises success may be followed by an accident or illness. Certain behaviors are overtly masochistic and may directly promote accidents or illness, such as in the excessive use of alcohol, tobacco, drugs, and activities that result in getting the insufficient rest and sleep that promote exhaustion syndromes. Fending off a normal level of health and vigor compatible with the energy needed to sustain one's efforts indicates a masochistic drive to sabotage potential success. All drug abuse, be it with alcohol, marijuana, or heroin, has a masochistic motive—physical self-injury through the toxic effect; social damage through the opprobrium and degradation associated with the life of the addict.

Food abuse through overeating is similarly a masochistic syndrome. In most such cases, the masochistic orientation is toward impairing physical attractiveness, health, and vitality. There are, of course, motivational components other than masochism in drug abuse and obesity, as, for example, where the effects of intake are sought to alleviate intense anxiety and agitation.

Most patients who have developed a well-defined line of masochistic behaviors have also convinced themselves that they can control at will and reverse damaging consequences. They tend to discount the irreversible effects of long-term smoking, drinking, drug or food abuse, and they cling to the illusion that they will somehow be forgiven the injuries and destructiveness their masochistic activities cause others.

Major insults to one's security and prestige may be courted by illegal involvements where apprehension would lead to financial disaster and social disgrace. Risk-taking and brinkmanship are inspired by a masochistic orientation toward self and may include one's family.

Sometimes a child becomes the symbol of masochism, and the parents become excessively preoccupied with the masochistic focus he personifies. In such a family, the youngster's every illness, injury, or other vicissitude, no matter how minor, becomes a source of great travail. The parents believe and

create the impression that were it not for their child's difficulties, life would be an idyll. The victim almost always pursues his assigned masochistic role, in part as patterned behavior, in part as a way of obtaining and preserving parental interest and love.

The dissipation of financial resources is commonly acted out in a masochistic gambit. Despite an excellent income, debts may be accumulated, in some cases as a result of compulsive gambling. One such patient was excellent at cards, but when in masochistic gear, he would pile up huge losses. Like others in this category, he had fears of success, and was driven to lose, rather than gather up the evidence of successful play. It was quite predictable that he would lose large sums just when he had almost paid up his debts, or when he had accomplished something notable in his work. Among patients whose fortunes are in alternate phases of waxing and waning, rich one period and poor the next, I have always been able to observe self-sabotage.

A mechanism similar to the need to lose money is the masochistic loss or destruction of objects of value. In the repertoire of such lost objects, some are more frequently represented because of their symbolic value—wallets, handbags, briefcases containing important papers, and so forth. The lost and found departments are the repositories for acted-out masochism. During the great depression of the 1930s, I treated a patient whose masochism reflected the stringent times. One evening, when returning from work, the patient

discovered she had left her handbag on a subway train. She could ill afford to lose the twenty-dollar bill her purse contained. As she undressed later that night, she found the money in one of her shoes but had no memory of having put it there. She had a masochistic need to lose a symbol of value represented by her purse, yet she was too practical to lose her money as well.

Forgetfulness may be viewed as a variant of masochistic losing behavior. Blocking on the name of someone well known to one, particularly when performing a social introduction, forgetting information needed to pass an important examination, or forgetting theater and travel tickets—each may represent an item of forgetfulness in the psychopathology of everyday masochism. Some individuals “forget” what time it has gotten to be and manage to come late to an event they had looked forward to; sometimes, an event may be overlooked entirely, or attended a day or a week too late.

Some individuals are made anxious when they perceive that they are presenting themselves in a good light to others; they are then compelled to minimize themselves in some way. Such compulsive acts may include inappropriate remarks, socially unacceptable behavior, such as nose-picking, awkward manners at table, and so forth. A good clinical test for discerning a masochistic character is his response to a compliment; usually, a self-minimizing remark or act will follow.

## Masochism and Humor

Humor, especially masochistic humor, is an effective technique for coping with aggression. If one can manage to be a target for laughter, one is not likely to be a target for hostility. Laughter extinguishes anger, hostility, and allied affects, at least for the period during which the laughter continues. Many comedians use masochistic techniques to evoke laughter, particularly when an audience is being unresponsive. Arieti has clearly described masochistic wit in the following passage:

Granted that Jewish jokes originating by non-Jews are more offensive than those originating with Jews, the fact remains that even the latter may be offensive. Jews know that even mild jokes dealing with dirtiness and thriftiness may be used by anti-Semites as a disparaging weapon. I have the feeling that this habit of the Jews is paradoxically an unconscious defense against anti-Semitism. Aware as they have been in the course of centuries of the great hostility by which they were surrounded, the Jews have tried to make the Gentiles discharge their hostility by means of these not too harmful jokes. It is better to be accused of stinginess and dirtiness than of ritual murder. It is better to be laughed at than to be massacred.

## Masochism and Suicide

By definition, the techniques of masochism involve self-injury as this term has been defined; however, the goals of masochism are the *preservation* of life and the attainment of maximum integrity compatible with the threat against which the masochistic defense is being used. In suicide, the goal is the *extinction* of one's life. Suicide and masochism have in common self-

destructiveness, but here the similarity ends. Freud associated masochism with femininity, with passivity, with a desire to experience pain. He interpreted masochism, not as a defense against aggression, but as a manifestation of the aggressive instinct turned in against the self. Starting with this assumption, it was logical for him to conceptualize suicide as the ultimate point on a masochistic continuum. Yet, clinical observations reveal that a central motif in suicide is to relieve intolerable pain, and to escape irrevocably from a hopeless entrapment in suffering. According to Freud's concept of masochism, there is pleasure in experiencing pain; certainly not pleasure in the *relief* of pain. The confusion of suicide with masochism has resulted in theoretical and therapeutic errors. To be sure, some masochists may commit suicide because life has become too weighed down by psychopathology and too painful to tolerate. They do not commit suicide, however, to experience the ultimate in masochistic pleasure!

A dynamic known as "riddance" is closely related to masochism. A phylogenetic analogy to riddance may be seen in the capability of some reptiles to shed a limb or tail that has been trapped or injured. Humans may also attempt to eliminate a structure or function that has become a source of pain and distress. Transsexuals seek to have themselves castrated in order to eliminate a structure to which they attribute their profound suffering and whose malfunction seems beyond repair. Riddance phenomena may be observed in other types of obsessive, masochistic patients who also seek out



surgical intervention. A woman in her early thirties whom I treated some years ago was tormented by a conflict arising from an ardent desire to have a second child, yet she was prevented from becoming pregnant because of her overweening fears about it. While I was away on vacation, she located an obliging gynecologist who removed her uterus. In sum, riddance is concerned with destroying a part of oneself in order to preserve one's life, while the goal in suicide is to eliminate life itself.

### **Masochism and Psychiatric Syndromes**

Since masochism threatens to produce or produces self-injury, it activates basic security operations, both biological and psychological. Anxiety and inhibition are the most prominent biological defenses.

The term "anxiety" connotes a constellation of perceived physiological reactions that represent a hyper-mobilization of somatic resources preparatory to meeting a threat. Masochistic impulses and acts almost always evoke anxiety. The compulsive gambler referred to previously was an excellent poker player, but when in a masochistic mood he would gamble recklessly and for excessively high stakes. He would, at these times, experience severe anxiety, an affective state he had long interpreted as excitement of enthusiasm, expectation, pleasure, and so forth. Anxiety is often mistaken for these types of excitement. One patient who experienced extreme

anxiety during sexual activity, in a slip of the tongue coined the word, “anxirement,” a composite of anxiety, desire, and excitement. When masochists play a game of brinkmanship with dangerous situations, anxiety is triggered, although it may be experienced as excitement.

Inhibition is an automatic “braking” to prevent action perceived as potentially injurious. Undoubtedly, many masochistic impulses are inhibited, yet many masochistic situations are mediated through inhibition. Those who seek achievement but become inhibited because of their neurotic fears of success may masochistically have their opportunities destroyed through inhibition. This may occur among actors who forget lines when given an important role, speakers who develop stage fright, athletes who lose concentration during the crucial period of an important event, and so forth; avoidance behavior is a defense mechanism transitional between inhibition and a range of psychological defenses. Avoidance may be as automatic and unconscious as inhibition; it, too, is a way of preventing or avoiding actions or situations that threaten to be injurious. Avoidance linked to masochism manifests itself in essentially three types of situations: In the first, the individual is tempted to act out a masochistic impulse and, fearing he may arrange to humiliate or otherwise injure himself, he bypasses the situation; in the second, the individual finds himself in conflict over a wish to win, with its attendant anxieties, and a masochistic impulse to lose, also a frightening prospect. Either alternative is defended against by an avoidance maneuver.

The third type of masochistic avoidance, and the most destructive, may be observed among individuals who are bent upon acting out a self-destructive impulse; they will avoid anyone who they suspect might interfere with their masochistic acting out. It must be kept in mind that masochism is a defense mechanism; it is a way of avoiding a greater injury by inviting or sustaining a lesser one. Individuals who are on a compulsively masochistic course are actually trying to prevent a greater catastrophe from befalling them; hence, they avoid anyone who might prevent their masochistic behavior, however irrational it might appear. The avoidance of constructive figures not infrequently includes the analyst; it is during a masochistic period that patients tend to skip sessions or fail to discuss ongoing problems and decisions.

### **Masochism and Obsessive Symptoms**

Masochism is often a core element of obsessive reactions. For example, a man may become obsessed about turning off gas jets and faucets, impelling him to turn back after leaving his home just to check out his obsessive doubts. Such doubts arise because of an unconscious masochistic impulse to burn down his home or flood it. His masochistic defense is motivated by anxiety about possessing an object of great value to him. Individuals who masochistically run themselves down physically, may become obsessively concerned with matters of health. Obsessive dread of accidents, illness,

contagious diseases, and dying, may represent fears about masochistic self-injury. Such fears are sometimes projected to a loved one who becomes the focus of an overanxious parent, child, or spouse. Pregnant women may become obsessed with fear that there will be something seriously wrong with their newborn. In my clinical experience with such patients, most were expressing fears about their own masochistic impulse to injure their child in order to protect themselves from being attacked for having a wished-for baby. Homosexual obsessions may surface when an individual who fears success in work or in a relationship with a woman sabotages his efforts and brings on a masochistically inspired defeat. Psychologically, the defeat is a submission to a feared competitor (father or brother figure) who will then spare the vanquished. Whenever homosexual obsessions appear in heterosexuals, one can always identify a significant masochistic component. To reemphasize the essential point: Masochistic mechanisms are often identifiable in the dynamics of obsessions. The therapeutic gain in teasing out these mechanisms is obvious.

Phobias are closely similar to obsessions, so much so that where obsessiveness is a salient characteristic, phobias may be identified in childhood history and current functioning. As with all psychological defenses, there is no single explanation for a phobic defense; however, in acrophobia and the fear of falling, there appears to be a direct dynamic connection with masochism. Patients who are definitely not suicidal may, in a masochistic

period, develop fears of walking through a window during sleep, or become panicky about falling from a height. One patient who feared he would walk to his death during sleep, tied his foot to the bed to prevent himself from leaving it.

### **Masochism and Depression**

Some of the consequences of masochistic acting out are self-anger, self-hatred, loss of self-esteem and confidence, and a reactive depression. The depression may be consciously felt or repressed out of awareness; it may be visible or masked, evanescent or chronic. The psychodynamics of masochism may be identified in almost all depressive states. Where such dynamics are central and the patient is compulsively bent on destroying something of value to himself, the depression will be of an agitated type. The conflict between impulses toward destructive action and attempts to conserve valued objects and functions, despite fears about holding on, is often the crucial conflict in an agitated depression. When in a state of depression, patients may destroy their business or profession that took years to build; they may dissipate fortunes, break up a marriage with a beloved spouse, ruin valued friendships, and so forth. When masochism is acted out with such destructive consequences, the patient may become potentially or actually suicidal. Losses resulting from masochistic behavior are extremely painful, if only because they are self-inflicted and thus accompanied by enormous self-hatred and contempt.

## Masochism and Paranoid Mechanisms

Paranoia as a description of behavior basically refers to an irrational expectation of injury from others. A discussion in depth on paranoid mechanisms is not germane to this chapter, but since its relation to masochism has a significant bearing on our subject, three types will be briefly described. The first involves victimization; mistrust, suspicion, and hostility are experientially derived and then irrationally transferred to others who may even be constructively related. This type may be termed the “transferential paranoia.” The second involves being taught paranoid ideation by paranoid parents or surrogates. One who emerges from such influences might be termed the “indoctrinated paranoid.” The third is the psychiatrically familiar and classical type in which the paranoia involves the projection onto others of unacceptable feelings and impulses—“projectional paranoia.” In this type, sexual and aggressive wishes are usually recognized psychiatrically; however, the projection of masochistic impulses is generally overlooked or insufficiently emphasized, yet such projections are common features. The individual who masochistically loses in gambling may suspect others of cheating; a masochist who somehow destroys an opportunity for advancement may accuse his employer of keeping him down or unfairly preferring someone else. Individuals who sabotage their appearance through obesity or a bizarre style of dressing or makeup may believe that others are laughing at them, showing them contempt, deriding them, and so forth.

## **Masochism and Pathological Dependency**

In general, masochism is a psychodynamic component in pathological dependency. Where an individual is pathologically dependent upon another, he must be prepared to please and placate the object of his dependency. This may require submissiveness, or self-demeaning, minimizing, and noncompetitive behavior. Masochistic attitudes and behavior are almost always present in individuals whose adaptation is a significantly dependent one. A common dynamic in dependency is the inflation of the image of the person depended on. This enlargement effect is achieved through minimizing the self. The deflation of self is a masochistic process, since it involves damaging one's self-image and inhibiting one's own resourcefulness, in order to magically obtain hoped-for advantages from the enlarged other. These psychodynamics appear in exaggerated forms among psychotics. Their paranoid fears may derive, in part, from their irrational concept of inflated power which they ascribe to individuals seen as likely ones to be dependent upon. Because of the anxiety associated with the masochistic components inherent in pathological dependency, defensive maneuvers against becoming dependent on another may consist in avoiding those individuals with whom one would be tempted to form such a relationship, or responding to them with hostility, i.e., attempts to minimize or degrade them, or otherwise make them inaccessible for such a role.

## **Treatment of Masochism**

Masochistic behavior may be conceptualized as an aggregation of adaptational mechanisms. Based upon this formulation, therapy may be oriented toward working out the adaptational significance of every masochistic mechanism whenever it occurs. If, for example, it is oriented toward extinguishing another's aggression, the patient is made aware that inflicting self-injury in order to prevent injury from others is maladaptive. He must learn that fear of reprisal from others for fulfilling his wishes, is, in general, unfounded, but that even where actual aggression may eventuate, the injury anticipated is almost always grossly distorted. Where real aggression is a possibility, the patient must learn to recognize and reality-test effective techniques for coping with another's aggression, and that coping behavior does not include masochistic, maladaptive defenses. Where a patient is masochistic in order to evoke love or conserve it, he has to become convinced that those who demand masochistic behavior in exchange for affection are exacting an exorbitant price, hardly worth it.

As a general principle of therapeutic technique, I do not analyze defenses until the fears that have established and maintained them are understood. Thus, if a patient fears displacement by a preferred sibling, I engage this problem before approaching his competitiveness toward the sibling. After the patient has become familiar with his underlying fears, the



next phase may include the analysis of his desire to surpass or even annihilate the sibling or his transference representatives. Exceptions to this rule concern (a) the analysis of defenses that produce analytic resistances which may interfere with treatment or threaten its continuity, and (b) the analysis of masochistic defenses. When a patient prepares to act out a masochistic impulse, the therapist should endeavor to prevent it, especially if it threatens to be significantly harmful. Insight should be given into the meaning of the masochism and its injurious consequences; even directive techniques, if they can be effective, should be employed. Despite the traditional pessimism about successfully treating masochistic characters, I have found that the maladaptive processes inherent in masochism can be significantly altered in most cases, and actually extinguished in some.

## Bibliography

- Arieti, S. "New Views on the Psychology and Psychopathology of Wit and of the Comic," *Psychiatry*, 13 (1950), 43.
- Bieber, I. "The Meaning of Masochism," *American Journal of Psychotherapy*, 7 (1953), 29.
- . "Olfaction in Sexual Development and Adult Sexual Organization," *American Journal of Psychotherapy*, 13 (1959), 851.
- . "A Concept of Psychopathology," in P. H. Hoch, and J. Zubin, eds., *Current Approaches to Psychoanalysis*. New York: Grune & Stratton, 1960.
- . "Sadism and Masochism," in S. Arieti, ed., *American Handbook of Psychiatry*, Vol. 3. New York: Basic Books, 1965.

- . "Sex and Power," in J. Masserman, ed., *Science and Psychoanalysis*, Vol. 20. New York: Grune & Stratton, 1972.
- Freud, S. "Three Essays on the Theory of Sexuality" (1905), in Standard Edition, Vol. 7. London: Hogarth Press, 1953.
- . "Instincts and Their Vicissitudes" (1915), in Standard Edition, Vol. 14. London: Hogarth Press, 1955.
- . "A Child Is Being Beaten" (1919), in Standard Edition, London: Hogarth Press, 1955.
- . "Beyond the Pleasure Principle" (1920), in Standard Edition, Vol. 18. London: Hogarth Press, 1955.
- . "The Economic Problems of Masochism" (1924), in Standard Edition, Vol. 19. London: Hogarth Press, 1961.
- Kalogerakis, M. "The Rose of Olfaction in Sexual Development," *Psychosomatic Medicine*, 25 (1963), 420.
- Kinsey, A. C., W. B. Pomeroy, C. E. Martin, and P. H. Gebhard. *Sexual Behavior in the Human Male*. Philadelphia: W. R. Saunders, 1948.
- . *Sexual Behavior in the Human Female*, p. 614. Philadelphia: W. B. Saunders, 1953.
- Krafft-Ebing, R. von. *Psychopathia Sexualis*. (Translated from the 12th German Edition, by F. S. Klaf.) New York: Stein and Day, 1965.
- Reich, W. *Character Analysis*. New York: Orgone Institute, 1949.
- Thorpe, W. A., and O. L. Zangwill. *Current Problems in Animal Behavior*, p. 114. London: Cambridge University Press, 1961.

## Notes

1 In this sequence, a power figure, the victor, is eroticized—a dynamic commonly observed among male homosexuals. The emphasis on odor also illustrates the mediating role of olfaction in sexuality.

2 Somerset Maugham described a classic situation of sexual bondage in his novel, *Of Human Bondage*. It is likely that he drew inspiration from Krafft-Ebing's work.