

# THE SEXUAL DRIVE AND ITS VISCISSITUDES



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# **The Sexual Drive and Its Vicissitudes**

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## Table of Contents

### [The Sexual Drive and Its Vicissitudes](#)

[The Early Years](#)

[Areas for the Displaced Discharge of the Sexual Drive](#)

[The Toddler Years](#)

[The Latency Years](#)

[Adolescence](#)

[Summary](#)

## The Sexual Drive and Its Vicissitudes

The sexual drive undergoes a remarkable degree of maturation and development from birth to about 15 years of age. In the first years of life, drive energies are involved in a search for pleasurable discharge, centered all in self. In early childhood and latency, drives find outlet through channels dominated by fantasy. At puberty, an organ system specific for the drive matures, providing an outlet channel to conduct libidinal energies toward love objects, which are beyond the limits of the self. Finally, in late adolescence, there is a chance to establish an articulation of the drive and organ system with the needs of the object.

The capacity for object love is not the product of the birth process, but rather of years of development. The therapist who works with children and younger adolescents requires a background in normal child development against which to compare the child, so that pathology can be identified and progress gauged.

What follows is a theoretical schema based upon clinical observations and a patchwork of theoretical concepts derived or adapted from the literature. The primary thrust will be the developmental explication of the vicissitudes experienced by the sexual drive in the developing child. Material relating to the latency period may be found in more extensive form in my book *Latency* (Sarnoff 1976). Guiding the detection of such vicissitudes is the concept that maturation of the drive discharge apparatus precedes and forecasts the form that object relations (libidinal drive discharge) can take at a given age. This principle leads to the following cognate clinical aphorisms: (1) clinical states of sexual object relatedness reflect the level of function and maturation of the sexual drive discharge apparatus, and (2) clinical progress can be identified as structural maturation of the drive discharge apparatus. This maturation is reflected in changes in superficial clinical manifestations.

### The Early Years

All drive energies are present as concomitants of a mature physical apparatus or organ for discharge at birth (e.g., hunger drive has the mouth, respiratory drive, the lungs). Syncretism involving

drive and organ is mandatory. Failure to achieve this is incompatible with survival.

Aggressive, sexual, and neutral drive energies (those energies reserved for the maintenance of the promised psychic structures of maturity) must each await the maturation of specific organs for discharge. In this, they differ from all other drives. Each is capable of delay in discharge, and each may be displaced to organs, and purposes, foreign to their eventual place in the healthy adjustment of the individual. Of all the instincts, the one that can be displaced most far afield is the sexual drive. Temporally, its potential for protean manifestations is set in the longest delay of any drive for the maturation of an effector organ capable of mutative involvement with the object world.

All the while that the neutral and aggressive drive energies are involved in keeping objects at bay or seeking objects as liaisons in the service of nutritive needs, comfort, and growing cognition, sexuality and the sexual drives must undertake the peregrinations to be expected of the unrequired and unrequited. The primary tasks of the earliest years of life are survival and physical and mental growth. Before puberty, procreation is not merely low on the horizon; rather, it is not even in sight.

### **Areas for the Displaced Discharge of the Sexual Drive**

During the earliest years, the sexual drive lacks a primary organ for its discharge. Sexual energies are involved more in exploration and development of means and tools for discharge than in seeking, finding, and holding objects. As the means and tools are mastered, they become the accessways to finding objects for drive discharge in ongoing social contexts during growth. Among these means and tools are thumb sucking, fantasy activity, humming, rocking, and latency play activity. They will influence the expression of the sexual drive in maturity. When appropriately processed for retention in memory, these immature forms may intrude into and shape adult object relations. In this way, they serve as templates for regressive sexual behavior during adult life; and thus, for the therapy of adults, as well as that of children, a knowledge of the developmental course traversed by sexuality in its search for a form and then an object is of importance.

It is postulated that immediately at birth there is no object in psychic representation; only the self exists as an object for the sexual drive. All libidinal energies are, thus, expressed through the organs and

experiences of the infant's own body. This state of total self-orientation is referred to as the stage of *primary narcissism*. Libidinal gratification is achieved through manipulation of body parts or participation in the function of an organ. This was illustrated by Freud (1905) with an example of the reconstruction of the experience of a child while nursing. Said he, "The child's lips . . . behave like an erotogenic zone, and no doubt stimulation by the warm flow of milk is the cause of the pleasurable sensation" (p. 181). He called the phenomenon *autoerotic*. This early manifestation of the sexual drive has an organ for expression. The absence of capacity for psychic representation of a libidinal object rules out the possibility that there is a true libidinal object. Like a burr caught in the hair of a horse, the libido is moving with no other goal or object save moving, and it takes its direction from the process on which it hitches a ride.

In autoerotic activity, the sexual drive is discharged through the use of a nonsexual body function (e.g., eating) carried out by a nonsexual body organ (the mouth). Manipulations of parts of the body, the skin, and the mucous membrane during later years represent attempts to recreate this experience of using one's own body for drive gratification. Piaget (see Woodward, 1965), who theorized in terms of unfolding cognitive maturation and mutual influences between cognitive growth and experience, offered a basis for conceptualizing the displacement of drive discharge from the use of one activity to another. He posited that organized motor patterns of activity could be linked to one another. He called this the *coordination of schemata*. This coordination could result in the following: If an activity that is used for autoerotic purposes is habitually associated with a second activity, then the second activity can become a pathway for the discharge of libidinal drive. This could well be the mechanism of the search for the ultimate means and tools by which libidinal discharge is accomplished. The coordination of motor activity schemes when permanent is called by Piaget a *primary circular reaction*, exemplified by the "reciprocal (and mutual influence) between grasping and sucking" (Woodward 1965, p. 62). The sexual drive energies initially linked with the sucking reflex, as described in Freud's concept of the autoerotic, find gratification through both grasping and sucking as a result of the coordination of these reflexes. When sucking is withdrawn at weaning, the other part of the paired reciprocal activities, rubbing with the hand or fingers, continues as an available activity through which to discharge sexual energies.

Upon differentiation of self and object, psychic representation of objects becomes possible. At that point, we say that the stage of *object libido* has been reached. Then the rubbing fingers are involved in

gratification of the sexual drive with the first external object. Those who watch nursing children will recognize this in the grasping of hair or mother's clothes during nursing. Thus hair twirling and rubbing fingers over velvet-fringed blankets also come to serve for expression of oral drives. Through the coordination of reflexes and schemes of activity, pathways for displacement are established, and thereby, with the withdrawal of the bottle or the nipple, the search for comfort takes forms other than closeness to mother as a differentiated object.

During the first months of life, autoerotic activity serves as a medium for drive discharge and comfort derived from the self. There is no alternative to this state of affairs until the second half of the first year of life, when self-object differentiation begins. Sources of pleasurable sensations are then resolved into two spheres: that of two-point sensations, consisting of feelings emanating from the sensing organ (mouth) and the part of the child's own body with which he comes into contact (thumb), and the sphere of single sensation, consisting of feelings emanating from the sensing organ (mouth) in contact with an object (breast) external to the child (that is, non-"I"). For the libidinal drive, which is discharged through motor activities involving both spheres, self-object differentiation first comes to the child's awareness through the differentiated sensations of the two spheres. Two-point sensation is missing with non-I objects. These sensations are less intense. In addition, they are not under the total control of the child, as are two-point sensations. As self-object differentiation develops, there is a continual shift between the two spheres as discharge pathways for the libidinal drive. The activity, it should be noted, remains the same—what changes is the cognitive capacity to apprehend the presence of an object.

When an object is perceived, the activity is called masturbation. There is only rhythmic motor activity at this early stage; there are no elaborated fantasies. From the onset of early object differentiation, during the second half of the first year of life to eighteen months, drive gratification is achieved through such activities as rhythmic touching, sucking, and rubbing soft parts of the body. This alternates with cuddling, snuggling, and warm interactions with differentiated parental figures, the last of which leads to a consistent object tie with an animate responding object. Subsequent losses of the object may be followed by a regression, often with the result that the child seeks a part of the self (thumbs-sucking, rocking), a body product (fecal play), or some external thing (for instance, a doll or other object to be handled) as a substitute object. In this preverbal and pre-fantasy world of the earliest years of childhood, a multitude of schemas of motor activity are coordinated with thumb sucking and hair twirling in the



service of the discharge of the libidinal drive. The search for and harnessing of rhythmic motor activity become patterned and structured. The first tool for the discharge of libidinal drive energies is produced.

Early in the first half of the second year of life, an ego function begins burgeoning. The capacity for fantasy begins a march towards centrality, which will reach its peak in latency. The first stages in this march include the further development of primary process thinking that accompanies early stages in the maturation of symbols, concept formation, and speech. A very early use of these skills is the interpretation by the child of the substitute objects mentioned above as undifferentiated, concrete, conscious representations of lost objects for libidinal drive gratification. At this point in development, primitive concrete conceptualizations accompany, and are coordinated with, motor schemata bent toward libidinal discharge. These are the primordia of elaborated masturbation fantasies; they are tightly integrated with motor activity. The beginning of a new dimension in the means for libidinal drive discharge is found here.

Much grows from this small beginning. The fantasizing function as the organ for sexual discharge, so important in latency, originates as an appendage to rhythmic motor activity.

As the potentials of the fantasizing function increase, masturbatory fantasy participates in and harnesses maturation to the purpose of drive discharge development. Pertinent cognitive maturational events, such as the development of symbolic play (Piaget 1945) and physiognomic thinking (Werner 1940) enrich the wellsprings of a child's potential for masturbatory fantasy.

Symbolic play refers to the ability of the child to let a play object retain its original identity while representing something else in play. There is a move away from concreteness and the requirement that the substitute object have a direct connection with the original object in this situation.

Physiognomic thinking is the ability to consider things as "animate, even though actually lifeless." [Werner 1940, p. 69]

A zone of thought and activity interposed between drive and need-satisfying object develops. The child can now "pretend" while seeking physical outlets for his drives. The circumstances of sexual gratification can now be represented in the brain conceptually, and expressed verbally. Words, formerly used for naming alone, are now employed so that they represent and express drives through displacement. The child enhances his skills for the discharge of sexual drive in this way.

Once concepts can be involved in fantasy formation, and through primary symbolization and physiognomic thinking consciously changed, the way is open for prospective, expectant, future-selective fantasy contents. This is the point in ontogeny when fantasy and play can become operative, and when conscious mental acts can create a psychic reality independent of the reality that can be tested. As Huizinga (1950) has perceived, "Play only becomes possible, thinkable and understandable when an influx of *mind* [his italics] breaks down the absolute determinism of the Cosmos" (page 3). In this regard also, Hartmann (1958) has said: "... the sharper differentiation of the ego and the id ... in human adults makes for a superior, more flexible relation to the external world; [concomitantly it] increases the alienation of the id from reality. In the animal neither of these two institutions is so flexibly close to or so alienated from reality" (p. 49).

This point in development was also described by Winnicott (1953) who stated that "at some theoretical point early in the development of every human individual, an infant... is capable of conceiving of the idea of something which would meet the growing needs which arise out of instinctual tension" (p. 239).

At this stage, it is possible that masturbation fantasy contains distortions of the psychic image of reality that can be fitted to pre-established pathways, mostly motor- and oral-dependent, which have served for the gratification of drives. The contents of masturbation fantasies are products of the transmutation of objects and the world into instruments for the expression of drive energies. After this step, during the second year of life, ideas and objects can be distorted, through the malleability of their mental images, to fit designs suitable for sexual gratification.

### The Toddler Years

By the first half of the third year of life, an additional cognitive step provides for enrichment of the fantasy that accompanies masturbation. Prior to this, fantasies consist of conscious wish and metaphor, but now psychoanalytic symbolization becomes possible. Briefly, in the formation of such a symbol, the link between the signifier and the signified has been repressed. With this step, there is a major shift in the potential of fantasy to afford a pathway for gratification of libidinal drives. Fantasy content will be expressible in verbal rather than action or organ experiences once its full meaning can be cushioned by

symbolization associated with repression.

The richness newly imparted to fantasy by these emerging skills makes fantasy more attractive for masturbatory use. At first repression is thin, and masturbation fantasies—which are first reported in 3-year-olds to have form and syntax—tend to show little masking. Blanchard reported that children of that age masturbate with sadistic destructive fantasies about brothers and sisters as well as about parents. “Fantasies so often are concerned with injuring, torturing and killing people whom they love as well as hate” (1953, p. 30). Masturbation in the form of thumb sucking, rhythmic movement, and genital stimulation persists. When needed, masking fantasy is invoked. Then, with the intensification of the potential for repression that ushers in latency, fantasy formation becomes dominant. Therefore, although mechanisms for the production of masking fantasy are present in the prelatency child, the prelatency child tends to express drives directly in word and deed. “Mommy, when Daddy dies, I’m going to marry you” is the kind of expression often heard in, and common to, prelatency. It is rare in the latency-age child. For the prelatency and early-latency child, direct fantasy and genital play are the elements of expression for the sexual drives.

### **The Latency Years**

The state of latency occurs when mechanisms of defense such as reaction formation and obsessional behavior are used to control the anal-sadistic activities and fantasies that are activated by defensive regressions, which in turn are responses to the dangers of oedipal sexual fantasies in the 6-year-old. Should stimulation cause oedipal sexual fantasies to increase, another safety valve, the structure of latency, is available in addition to regression. It is a group of defenses that produce a characteristic cognitive style. Among its characteristics are the development of masking symbols, which aid in the establishment of distortion-filled fantasies. Such fantasies are then used as the conduit for the discharge of drives during a time when drives are strong and sexual expression is forbidden by custom and limited by organ immaturity.

For the child aged 7 or above, latency-state cognitive styles mold the motor and fantasy components that express sexuality into forms in which latent meaning and original intent are lost to conscious awareness. The child’s fantasy activity undergoes a transformation through the masking of meanings and

distortions which produce manifest fantasies without detectable relationship to latent fantasy.

Motor activity, such as direct genital stimulation, is inhibited and displaced into diffuse whole-body activity, which may or may not be correlated with fantasy activity. Thus, the link between fantasy and masturbation is broken during the latency state. Either motor activity or highly masked and symbolized fantasy—or both combined, as in “cops-and-robbers” play—can serve as the vehicle for the relief of tension and the discharge of drives in the latency state. Extensive use of masking fantasy and fantasy play is available to the child as an independent pathway for the masked discharge of sexual drives. The sort of ego equipment that produces this state is quite appropriate for a group expected to live up to the social myth that they are devoid of sexuality, or at any rate have very little sexuality. It is utterly incompatible with the adult goal of procreating the next generation. Therefore, fantasy as the sexual organ of the person in a state of latency is only a waystation for the sexual drive. There is a whole stage of development still to be traversed in gaining the tools and techniques of the sexual drive on the way to maturity. There are biological and cognitive underpinnings to be discovered in understanding this final phase of the maturation of the sexual instincts.

### **Overt Sexuality in Latency**

From the biological standpoint, there is something to be gained from a study of genital stimulation in latency-age children. This includes masturbation as well as activities with older peers and adults. According to Sorensen (1973), 7 percent of all adolescents have had sexual intercourse at the age of 12 or younger; that is, 10 percent of all boys and 3 percent of all girls. During the latency years, boys are capable of erection (Sarnoff 1976). Orgastic sensations are frequent, but ejaculation is rare (Kinsey 1948). In Kinsey’s study, sexual relations in latency were rare in college-bound youngsters. On the other hand, for those who were not going to college, or for that matter not going to finish high school, the percentage of participants in coitus was large. The number of different episodes and partners for this group was also greater.

The categorization of individuals involved in prepubertal coitus into two statistically significant groups (college bound and noncollege bound) is roughly congruent with the two groups that one encounters clinically. Youngsters who are involved in frequent coitus with a number of partners

continue this pattern with the onset of puberty and in adolescence. They appear to be comfortable with their physical needs, and capable of finding partners with whom to express them. Usually they are not high academic achievers. Youngsters whose prepubertal coital experience is limited in frequency and involves but a single partner tend to withdraw from coital activity at puberty, and pass through the same transitional period of orientation to the expression of their bodily needs in society that is experienced in age-mates who have not yet engaged in overt expressions of genital sexuality.

In technical terms, one would say that the group that experiences coitus at high frequency has had no latency, or at least a frequently interrupted one, whereas those with the occasional experiences suffered breaks in their state of latency followed by immediate reconstitution. With the coming of adolescence, the latter share with the majority of their peers the experience of the transition from latency defenses in dealing with sexual drives to the set of mechanisms used by adults in finding sexual expression. This transitional experience characterizes the sexuality of adolescence. Before one can achieve this, however, one must undergo some physical maturation. The 7 percent who engaged in coitus in the latency years still had immature organs and poor access to orgasm. Often, soothing and calming aspects of stroking were what was sought. There is, indeed, little physiological or biological readiness of the organ system destined to become the organs for the sexual drives.

## Adolescence

### Biological Factors in Puberty

Before one can pursue the cognitive maturation that provides the basis for the shift from fantasy to objects as the targets of sexual release, it is necessary to bring into focus the biological developmental events that create the organic background that propels, limits, and directs the psychological maturation of sexuality during adolescence. The most prominent factor in this area is the appearance of secondary sexual characteristics, with enlargement and maturation of the genitalia and increase in the sexual drives to the point that the mechanisms of defense of latency cannot cope with them. The most important factor in this process, but by no means the only one, is the appearance of increased levels of testosterone and estradiol in the years immediately preceding puberty. Faima and Winter (1972) stated that in boys "between the ages of six and ten years . . . there is a gradual but significant rise in the mean level (of

testosterone)" (p. 34). "Between 10 and 17 years there (is) approximately a twentyfold increase in plasma testosterone" (p. 36). "The most marked testosterone increments occur between ages 12 and 14" (p. 38).

"Estradiol is undetectable in the serum of most . . . prepubertal girls" (Faima and Winter 1972, p. 40). Its cyclical appearance in the blood stream accompanies the appearance at about 11 years of labial hair and subareolar breast buds. This phenomenon precedes the onset of menses by from 12 to 30 months. We may conclude that in boys and girls there is a period of years before sexual maturation becomes apparent when preadolescent children must deal on the psychological level with sexual physiological stresses that approach the adult level. The psychology of adolescence and adolescent sexuality begins before puberty, if puberty is defined by the appearance of menarche and the first ejaculation. This is consonant with the clinical observation that precocious puberty is usually preceded by increased sexual interest or even sexual acting out on the part of the child. Through the period of rapid growth in latency and adolescence, the growth hormone, in addition, contributes to the level of sexual drive experienced (Nielson and Thompson 1947).

Besides changes of hormone level, increased sensitivity of target organs, increased body weight, and changes in the sensitivity of sensors in the hypothalamus, which detects levels of estradiol and testosterone in the blood stream, are all part of the network of factors that propel the child away from latency fantasy and toward sexual maturity. There is evidence that although the strength of the drives has some degree of correlation with the level of hormone that is released by the gonads, the "capacity to fall in love" (defined as the ability to articulate the expression of one's sexual drives through fantasies, planning, situations, and conditions that take into account the needs of the partner) is mediated through a hypothalamic mechanism independent of the pituitary gland and its hormones. Briefly, what is implied is that this cognitive maturation of the fantasizing and/or planning function of the ego matures independently of the maturation of the hormonal releasing mechanisms of the hypothalamus (Money 1972). Thus, when a patient with Kallman's syndrome (a condition in males marked by failure to produce the pituitary hormone that activates the testes to produce male hormone, coupled with a failure of development of a sense of smell) is given hormone injections, he does not develop a capacity to love, but rather develops aggressive and primitive styles of approach to sexual encounters. Such a finding militates against Piaget's concept of reversibility (defined in terms of the objective world becoming more

important than the ego at age 8) as the source of the object emphasis of the capacity to fall in love. Apparently the capacity to fall in love is linked to the maturational steps that produce hormone, but is not dependent upon the hormones, like, for example, breast development. There are changes, such as weight gain, sensitivity to low hormone levels in the hypothalamus, and cognitive shifts, that are part of the initial stages of sexual maturation. They may be independent of each other.

That cognitive developmental steps parallel to the maturational changes of puberty—such as hormonal flow—is not an isolated phenomenon. Witelson (1975) has clearly demonstrated, in a large population sample, that the localization of the central higher cortical process of spatial orientation to the right brain, which is operative in boys by age 6, in girls is delayed until puberty. This function is known not to improve in girls with untreated Turner's syndrome.

The physiological changes in early adolescence are accompanied by concurrent changes in cognition. This has far-reaching implications. For psychoanalysts and psychotherapists, it means that there is a whole developmental continuum to be watched for and compared against in evaluating the developing adolescent. We must be sure that cognitive growth which supports personality maturation in adolescence and is independent of hormonal manifestations is progressing appropriately. When there is a lag, the lag must be coped with, or the patient helped to mature.

So far, I have listed two cognitive changes that could be involved in this process. These are a change in the nature of the object seeking and localization of spatial cognition in girls. This is offered as an indicator that cognitive maturation participates in the general growth surge associated with the onset of sexual maturity.

### **Adolescent Sexuality**

With the beginnings of adolescence, sexual fantasies rooted in memories of earlier experiences begin to reassert themselves through relatively undisguised forms similar to those seen in the prelatency years. Alterations in cognition mandate that there will be changes in emphasis, choice of symbols, and the organization of defenses brought to bear on the latent content of the fantasy. The earlier experiences are seen through more adult eyes and shaped into influential memories that propel the child toward fantasy

and behavior consonant with the cognition and expectation of the peer group. These fantasies are carried forth into the creativity, sexuality, and dreams of adult life. One should, therefore, be careful in reconstructing the events of early childhood from the associations of an adult; and one must keep constantly in mind the alterations that the verbal memory organization of adolescence work on the affectomotor experiential memories from early childhood, which are reasserted in adolescence when the power of the latency defense organizations begins to ebb.

Although the physical changes of maturation (orgasm readiness, genital enlargement, etc.) make satisfactory sexuality possible and provide the sexual drive with an organ for discharge to be used independently of other functions, mature sexuality is incomplete without the social contexts (and the fantasies and planning that go into their production) that provide the settings and conditions for acceptable sexual encounters with love objects. Mature sexuality is first seen in adolescence as a product of fantasy. The nature of the fantasy is different from that seen in latency, for the fantasies are frankly sexual and contain considerations for the needs of the loved object. Indeed, the symbols in these fantasies are so close to reality figures (the closer the better) that they might better be called future planning than fantasies. However, their roots in unconscious drives make their inclusion in the category of fantasy mandatory. What renders them close to reality planning is the extent to which the real world participates in it. The nature of the fantasy and the resulting behavior is in turn influenced by the nature of the cognitive changes and the degree to which success in achieving these changes occurs in the developing adolescent. Other cognitive changes that occur at this age and contribute to this process include:

1. The shift from evocative to communicative symbols in fantasy formation and creativity;
2. The appearance of tertiary elaboration; and
3. The assumption of dominance by communicative speech.

Common to these three is an impact on the shaping of latent fantasy into conscious fantasy. The shaping produced is dominated by a need to communicate to reality "objects." Awareness of the need to temper, change, and conform content to the point that it will be understandable to peers and partners dominates. Should the fantasy become the source of action, socially compatible behavior characterizes the resulting interactions.



4. The shift of the adaptive function of the mechanism of projection from persecutory nocturnal fantasies to sublimatory activity, exploration of social situations, and projective-introjective processes leading to modifications in the demands of the superego;
5. The impetus given to object seeking and reality orientation by the organizing influence of the first ejaculation and menarche, and
6. The final step in the use of symbols as objects. (This refers to the ultimate stage in a continuum which begins with the concrete symbolizations of early childhood and ends with the use of objects in reality as symbols of primary objects. It is achieved through the acting out of fantasies in life situations.<sup>1</sup>)

These cognitive changes are developed in temporal congruity with sexual maturation. They influence sexual behavior and related fantasy formation in adolescence.

### **The Work of Adolescence**

Let us develop a clinically oriented description of the transition into adolescence involving the sexual drive through which will be threaded references to the physical, cognitive, and psychological factors referred to before.

In the sexual sphere, the work of adolescence is the undoing of latency constraints, disengagement from latency fantasy activity as an organ for sexual discharge, and the integration of thought, action, a new organ, drive, and object into an acceptable pattern. One of the primary steps in this process is the rapprochement of sexual fantasy and genital masturbation so that both occur in concert. In addition, masking of intent through the use of symbols lessens.

With adolescence, there is not only the increase in sexual drive, but also a lessening of the restrictions associated with latency defense organizations. There is an increase in the reality orientation of the child. Fantasy becomes less effective as a means of discharge of sexual drive. Fantasy symbols normally complete the shift from amorphous beings to real beings conjured up in the mind. Direct sexual content replaces the distorted fantasies. Girls may write themselves letters from young men and even mail them to themselves. Boys begin to try on their mother's or sister's clothes. Fantasy gives way to behavior. Familiar objects are seized upon for sexual use. Letters and clothes give way to a search for

sexual objects. At first, there is a heightened excitement in things visual. Sexually oriented photo-magazines become an object of attention. Girls stare at themselves in mirrors, boys delight in telescopes and binoculars whose focus often wanders from the stars to neighbors' windows. The mechanisms of restraint that held the regressed anal-sadistic messing urges at bay begin to weaken as the finely ordered rooms of latency-age children give way to rooms with desks so laden with random books, papers, and gadgets that its adolescent owner must do homework on that part of the floor from which the ever-present layers of dirty clothes can most easily be pushed aside. Sexuality in the child is recognized and responded to by the child. At times, the biological sexual assignment runs into uncertain acceptance. Confused about their identities, the children develop bisexual fantasies. Those in conflict may even develop impairments in abstract thinking. With menarche or the first ejaculation, the sexual die is cast on the physical level. For most, the question is answered and the conflict over; for others the rejection of the biological sexual assignment persists.

One lad played out a great variety of fantasies during latency. At the joint between latency and adolescence, he began to play out in his mother's clothes the role of a seductive girl.

Another boy controlled erections that resulted from seeing men in undershirts by cutting the skin of his back with a razor till he bled. After his first ejaculation, his masturbatory fantasies involved girls in sadomasochistic situations.

The first ejaculation, like the menarche, is an organizing experience that serves increased contact with reality and the object world. It is one of the maturational pressures that impels the individual toward a redissociation of adolescent masturbatory fantasy from masturbatory activity and into an increased articulation of the drives with objects in the surround. At this point the influence of society and the needs of the partner are brought to bear on the child. Syncretic with this process is the deployment of the group of related cognitive skills referred to above as communicative speech, communicative symbols, and tertiary elaboration. They produce an impact on latent fantasy that causes its shaping into conscious fantasy, whose form is dominated by an awareness of the need to temper, change, and conform content so that it will be understandable to people, peers, and partners. This is less in evidence in the discharge-oriented fantasies of latency play and of cryptic dreams.

Concomitant with this cognitive shift and the maturation of organ function is the burgeoning internal affect phenomena of sexuality. The newly dawning intense physical response is awesome and requires "getting used to." A period of orientation to these feelings is required. Masturbation ceases to be a soothing activity during periods of excitement, and becomes the arena in which the reorientation takes place. Alone and in sole command of the stimulation of feelings, the masturbating child masters the unknown world of intense orgasmic feelings at a pace commensurate with his or her own individual tolerance.

Once the "self" has been explored, the child is ready to carry this mastery into new areas. The march of sexuality in search of an object for gratification of drives proceeds through the self (through autoerotism) to masturbation, to fantasy, to latency fantasy play, to masturbation dominated by discharge gratification, through orgasm involving a primary sexual organ, to a final step found in the use of the sexual organ with a

loved partner. Planning and acting in the area of sexual drive discharge is still very much fantasy-dominated, with the fantasy itself strongly influenced by the needs of the partner. Where primitive fantasy components persist, the needs of the partner must be excluded, or very special partners with congruent fantasy-dominated sexuality sought. Libidinal cathexes are then said to be directed more toward one's inner fantasies than toward loved objects. This state of pathological narcissism in adult life parallels the distribution of cathexes of libidinal energies seen in the phase of secondary narcissism. Fixations and regressions anywhere within the developmental continuum that have been described here can contribute to pathological sexual adjustments in adult life.

## Summary

The evolution of sexuality from infancy to adolescence has been presented through a study of the transmutation of sexual drive derivatives from one manifestation to another with each unfolding developmental stage. Readiness of the body's drive discharge apparatus precedes and forecasts the form that object relations and libidinal drive discharge can take at a given age. In early childhood, motor activities serve such survival tasks as alimentation and excretion and only secondarily serve a simultaneous role in sexual drive discharge. During the latency years, the symbolizing function is enhanced and takes over primacy as an organ for sexual discharge. The manifest symbols used in this pursuit become more realistic as the child grows older. As a result sexual drive discharge becomes more involved with objects in reality. Concomitantly maturation of primary organs for sexual drive discharge, and the development of a cognition that permits the inclusion of another person in one's consideration and planning produces the ability to fall in love. Progress in reality testing, maturation of organs and cognitive growth in concert enable the establishment of a lasting sexual relationship.

## Notes

<sup>1</sup> This is covered extensively in the chapter on cognitive growth in *Latency* (Samoff 1976).