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Sex and the Emergence of Sexuality

Arnold I. Davidson

Some years ago a collection of historical and philosophical essays on sex was advertised under the slogan: Philosophers are interested in sex again. Since that time the history of sexuality has become an almost unexceptionable topic, occasioning as many books and articles as anyone would ever care to read. Yet there are still fundamental conceptual problems that get passed over imperceptibly when this topic is discussed, passed over, at least in part, because they seem so basic or obvious that it would be time badly spent to worry too much about them. However, without backtracking toward this set of problems, one will quite literally not know what one is writing the history of when one writes a history of sexuality.

An excellent example of some of the most sophisticated current writing in this field can be found in *Western Sexuality*, a collection of essays that resulted from a seminar conducted by Philippe Ariès at the Ecole des Hautes Etudes en Sciences Sociales in 1979–80.¹ As one would expect, *Western Sexuality* is characterized by a diversity of methodological and historiographical approaches—social history, intellectual history, cultural history (which one historian I know refers to as the history of bad ideas), historical sociology, the analysis of literary texts, and that distinctive kind of history practiced by Michel Foucault and also in evidence in the short essay by Paul Veyne. One perspective virtually absent from this collection

I am indebted to Stanley Cavell, Lorraine Daston, Peter Galison, Ian Hacking, Erin Kelly, John McNees, and Joel Snyder for conversations on the topics of this paper.

1. Philippe Ariès and André Béjin, eds., *Western Sexuality: Practice and Precept in Past and Present Times* (Oxford, 1985).

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is the history of science, and since I believe that the history of science has a decisive and irreducible contribution to make to the history of sexuality, it is no accident that I am going to focus on that connection. But the history of sexuality is also an area in which one's historiography or implicit epistemology will stamp, virtually irrevocably, one's first-order historical writing. It is an arena in which philosophical and historical concerns inevitably run into one another.

In his 1979 Tanner lectures, Foucault writes that he is concerned with the problem of "the relations between experiences (like madness, illness, transgression of laws, sexuality, self-identity), knowledge (like psychiatry, medicine, criminology, sexology, psychology), and power (such as the power which is wielded in psychiatric and penal institutions, and in all other institutions which deal with individual control)."² The question that he places at the center of his work is, "In what way are those fundamental experiences of madness, suffering, death, crime, desire, individuality connected, even if we are not aware of it, with knowledge and power?"³ In the preface to the second volume of his *History of Sexuality*, attempting to explain the chronological displacement from the eighteenth and nineteenth centuries (the focus of the first volume) to the period of antiquity (in the second and third volumes), Foucault emphasizes that the period around the nineteenth century "when this singular form of experience, sexuality, took shape is particularly complex."⁴ In particular, the formation of domains of knowledge and the role of various normative systems had a determining effect on the constitution of this experience. For a number of reasons, Foucault decided to address himself "to periods when the effect of scientific knowledge and the complexity of normative systems were less, . . . in order eventually to make out forms of relation to the self different from those characterizing the experience of sexuality. . . . Rather than placing myself at the threshold of the formation

2. Michel Foucault, "Omnes et Singulatum: Towards a Criticism of 'Political Reason,'" in *The Tanner Lectures on Human Values*, ed. Sterling M. McMurrin (Salt Lake City, Utah, 1981), p. 239.

3. *Ibid.*, p. 240.

4. Foucault wrote several different prefaces or introductions to the second volume of *The History of Sexuality*. This one appears in *The Foucault Reader*, ed. Paul Rabinow (New York, 1984), p. 338.

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of the *experience of sexuality*, I tried to analyze the formation of a certain mode of relation to the self in the *experience of the flesh*.⁵

Foucault's distinction between the experience of sexuality and the experience of the flesh is meant to mark the fact that our experience of sexuality has a specific and distinctive historical genesis. Although we take it to be a natural phenomenon, a phenomenon of nature not falling within the domain of historical emergence, our experience of sexuality is a product of systems of knowledge and modalities of power that bear no claim to ineluctability. And an analysis of late antiquity and early Christianity would reveal, according to Foucault, an experience of the flesh quite distinct from, and not to be confused with, our experience of sexuality. The conflation of these experiences is the result of a coarse epistemology whose consequence is a disfiguring, disabling anachronism. Much the same idea is expressed in Veyne's article, "Homosexuality in Ancient Rome," when he argues that the ancient Roman world did not view the experience of homosexuality as "a separate problem," that the question was never homosexuality per se, but being free and not being a passive agent. What we find is "a world in which one's behaviour was judged not by one's preference for girls or boys, but by whether one played an active or a passive role."⁶ If we want to isolate the problem of homosexuality, we must jump to the nineteenth century to find it.

I want to concentrate on the relation between forms of experience and systems of knowledge, on the way in which what we have come to call "sexuality" is the product of a system of psychiatric knowledge that has its own very particular style of reasoning and argumentation. No complete account of the genesis of sexuality can ignore modalities of nineteenth-century power, what Foucault calls biopower, that have detailed and precise relations to our experience of sexuality, a topic about which I shall have almost nothing to say. But the emergence of sexuality and the emergence of a new psychiatric style of reasoning bear such an intimate connection to one another that our experience must remain opaque until this connection is fully articulated.

In order to provide some understanding, even if only at an intuitive level, of how I understand the notion of a style of reasoning or argumentation, let me give an example of two radically different styles of reasoning about disease—what I call the anatomical and psychiatric styles of reasoning. Like Foucault, I am concerned with how systems of knowledge shape us as subjects, how these systems literally make us subjects. In modern times, categories of sexuality have partially determined how we think of ourselves, the shape of ourselves as subjects. If we take the example of sexual identity and its disorders, we can see two systems of knowledge, exhibiting two styles of reasoning, as they come to be in-

5. *Ibid.*, p. 339; my emphasis.

6. Paul Veyne, "Homosexuality in Ancient Rome," in *Western Sexuality*, p. 29.

stantiated in the nineteenth century. The particular case of the anatomical style of reasoning that I will consider is one that Foucault has made famous with his publication of the memoirs of the nineteenth-century French hermaphrodite, Herculine Barbin. Foucault claims in his introduction to the memoirs that in the Middle Ages both canon and civil law designated those people "hermaphrodites" in whom the two sexes were juxtaposed in variable proportions. In some of these cases the father or godfather determined the sex of the child at the time of baptism. However, later, when it was time for these hermaphrodites to marry, they could decide for themselves whether they wished to retain the sex that had been assigned them or whether to choose instead the opposite sex. The only constraint was that they could not change their minds again: they had to keep the sex that they had chosen until the end of their lives.⁷ Although Foucault's account applies to only one kind of medieval hermaphrodite (and because of its brevity simplifies the complex relations between the legal, religious, and medical treatment of hermaphroditism in the Middle Ages and Renaissance),⁸ his claim simply echoes that of, for example, Ambroise Paré's 1573 *Des Monstres et prodiges*.⁹

As Foucault emphasizes, in the eighteenth and into the nineteenth centuries, all apparent hermaphrodites came to be treated as pseudo-hermaphrodites, and it became the task of the medical expert to decipher "the true sex that was hidden beneath ambiguous appearances" (*HB*, p. viii), to find the one true sex of the so-called hermaphrodite. It is in this context that the case of Herculine Barbin must be placed. Adelaide Herculine Barbin, also known as Alexina or Abel Barbin, was raised as a woman but was eventually recognized as really being a man. Given this determination of his true sexual identity, Barbin's civil status was changed, and, unable to adapt to his new identity, he committed suicide. The details of the case are fascinating, but my concern is with how medical science determined Herculine's real sexual identity. Here are some remarks from the doctor who first examined Barbin, and who published a report in 1860 in the *Annales d'hygiène publique et de médecine légale*. After describing Barbin's genital area, Dr. Chesnet asks,

What shall we conclude from the above facts? Is Alexina a woman? She has a vulva, labia majora, and a feminine urethra. . . . She has a vagina. True, it is very short, very narrow; but after all, what is

7. See Foucault, intro. to *Herculine Barbin, Being the Recently Discovered Memoirs of a Nineteenth-Century French Hermaphrodite*, trans. Richard McDougal (New York, 1980), pp. vii–viii; all further references to this work, abbreviated *HB*, will be included in the text.

8. For a critique of some of Foucault's claims, see Lorraine Daston and Katherine Park, "Hermaphrodites in Renaissance France," *Critical Matrix: Princeton Working Papers in Women's Studies*, vol. 1, no. 5 (1985).

9. See Ambroise Paré, *Des Monstres et prodiges*, ed. Jean Céard (Geneva, 1971), pp. 24–27.

it if not a vagina? These are completely feminine attributes. Yes, but Alexina has never menstruated; the whole outer part of her body is that of a man, and my explorations did not enable me to find a womb. . . . Finally, to sum up the matter, ovoid bodies and spermatic cords are found by touch in a divided scrotum. *These are the real proofs of sex.* We can now conclude and say: Alexina is a man, hermaphroditic, no doubt, but with an obvious predominance of masculine sexual characteristics. [*HB*, pp. 127–28; my emphasis]

Notice that the real proofs of sex are to be found in the anatomical structure of Barbin's sexual organs.

Writing nine years later in the *Journal de l'anatomie et de la physiologie de l'homme*, Dr. E. Goujon definitively confirms Chesnet's conclusions by using that great technique of pathological anatomy, the autopsy. After discussing Barbin's external genital organs, Goujon offers a detailed account of his internal genital organs:

Upon opening the body, one saw that only the epididymis of the left testicle had passed through the ring; it was smaller than the right one; the vasa deferentia drew near each other behind and slightly below the bladder, and had normal connections with the seminal vesicles. Two ejaculatory canals, one on each side of the vagina, protruded from beneath the mucous membrane of the vagina and traveled from the vesicles to the vulvar orifice. The seminal vesicles, the right one being a little larger than the left, were distended by sperm that had a normal consistency and color. [*HB*, pp. 135–36]

All of medical science, with its style of pathological anatomy, agreed with Auguste Tardieu when he claimed in his revealingly titled book, *Question médico-légale de l'identité dans ses rapports avec les vices de conformation des organes sexuels*, that "to be sure, the appearances that are typical of the feminine sex were carried very far in his case, but both science and the law were nevertheless obliged to recognize the error and to recognize the true sex of this young man" (*HB*, p. 123).¹⁰

10. Tardieu's book was published in 1874. Parts of it had previously appeared in the *Annales d'hygiène publique* in 1872.

Controversies concerning the identity of an individual's sex often revolved around questions of the person's reproductive capabilities and ultimate suitability for marriage. By the nineteenth century, these determinations subordinated physiological considerations to anatomical ones. To base classifications of hermaphroditism on physiological rather than anatomical facts was thought to be "completely inadmissible in the present state of science." See Isidore Geoffroy Saint-Hilaire, *Histoire générale et particulière des anomalies de l'organisation chez l'homme et les animaux*, 3 vols. (Paris, 1832–37), 3:34n. For a more general discussion of some of these issues, see Pierre Darmon, *Le Tribunal de l'impuissance: Virilité et défaillances conjugales dans l'ancienne France* (Paris, 1979). I am indebted to Joel Snyder for clarifications on this point.

Let me now bypass a number of decades. It is 1913, and the great psychologist of sex, Havelock Ellis, has written a paper called "Sexo-Aesthetic Inversion" that appears in *Alienist and Neurologist*. It begins as follows:

By "sexual inversion", we mean exclusively such a change in a person's sexual impulses, the result of inborn constitution, that the impulse is turned towards individuals of the same sex, while all the other impulses and tastes may remain those of the sex to which the person by anatomical configuration belongs. There is, however, a wider kind of inversion, which not only covers much more than the direction of the sexual impulses, but may not, and indeed frequently does not, include the sexual impulse at all. This inversion is that by which a person's tastes and impulses are so altered that, if a man, he emphasizes and even exaggerates the feminine characteristics in his own person, delights in manifesting feminine aptitudes and very especially, finds peculiar satisfaction in dressing himself as a woman and adopting a woman's ways. Yet the subject of this perversion experiences the normal sexual attraction, though in some cases the general inversion of tastes may extend, it may be gradually, to the sexual impulses.¹¹

After describing some cases, Ellis writes further,

The precise nature of aesthetic inversion can only be ascertained by presenting illustrative examples. There are at least two types of such cases; one, the most common kind, in which the inversion is mainly confined to the sphere of clothing, and another, less common but more complete, in which cross-dressing is regarded with comparative indifference but the subject so identifies himself with those of his physical and psychic traits which recall the opposite sex that he feels really to belong to that sex, although he has no delusion regarding his anatomical conformation.¹²

In categorizing disorders, Ellis' clear separation of two distinct kinds of things, anatomical configuration and psychic traits, provides a surface manifestation of a profound and wide-ranging epistemological mutation. It is what makes possible sexo-aesthetic inversion, as a disease, in the first place.

Ellis' discussion descends from the psychiatric style of reasoning that begins, roughly speaking, in the second half of the nineteenth century, a period during which rules for the production of true discourses about sexuality change radically. Sexual identity is no longer exclusively linked to the anatomical structure of the internal and external genital organs.

11. Havelock Ellis, "Sexo-Aesthetic Inversion," *Alienist and Neurologist* 34 (1913): 156.

12. *Ibid.*, p. 159.

It is now a matter of impulses, tastes, aptitudes, satisfactions, and psychic traits. There is a whole new set of concepts that makes it possible to detach questions of sexual identity from facts about anatomy, a possibility that only came about with the emergence of a new style of reasoning. And with this new style of reasoning came entirely new kinds of sexual diseases and disorders. As little as 150 years ago, psychiatric theories of sexual identity disorders were not false, but rather were not even possible candidates of truth-or-falsehood.¹³ Only with the birth of a psychiatric style of reasoning were there categories of evidence, verification, explanation, and so on that allowed such theories to be true-or-false. And lest you think that Ellis' discussion is outdated, I should point out that the third edition of the *Diagnostic and Statistical Manual of Mental Disorders* of the American Psychiatric Association discusses disorders of sexual identity in terms that are almost conceptually identical to those of Ellis. It calls these disorders, "characterized by the individual's feelings of discomfort and inappropriateness about his or her anatomic sex and by persistent behaviors generally associated with the other sex," *gender identity disorders*.¹⁴ We live with the legacy of this relatively recent psychiatric style of reasoning, so foreign to earlier medical theories of sex. So-called sex change operations were not only technologically impossible in earlier centuries; they were conceptually impossible as well. Before the second half of the nineteenth century persons of a determinate anatomical sex could not be thought to be really, that is, psychologically, of the opposite sex. Anatomical sex exhausted one's sexual identity; psychological considerations could not have provided the basis for "sex reassignment surgery" since these considerations were not so much as relevant to the question of one's sexual identity. Our current medical concept of sex reassignment would have been unintelligible or incoherent since it could not cohere with the style of reasoning about sexual identity.

The anatomical style of reasoning took sex as its object of investigation and concerned itself with diseases of structural abnormality, with pathological changes that resulted from some macroscopic or microscopic anatomical change. It is for this reason that hermaphroditism most visibly exemplifies this mode of reasoning. But for sexuality to become an object of clinical knowledge, a new style of psychiatric reasoning was necessary. Ellis' discussion already *takes for granted* the new style of reasoning and so treats sexuality and its attendant disorders, such as sexo-aesthetic inversion, as if they were naturally given. Even as sophisticated a historian as Ariès can conflate these different objects of clinical investigation, with

13. For an explanation of this terminology, see Ian Hacking, "Language, Truth and Reason," in *Rationality and Relativism*, ed. Martin Hollis and Steven Lukes (Oxford, 1982), pp. 48–66.

14. American Psychiatric Association, Task Force on Nomenclature and Statistics, *Diagnostic and Statistical Manual of Mental Disorders*, 3d ed. (Washington, D.C., 1980), p. 261.

the inevitable historical confusion that results. Writing about homosexuality he declares, "The anomaly condemned was one of sexual ambiguity, the effeminate man, the woman with male organs, the hermaphrodite."¹⁵ But any attempt to write a unified history that passed from hermaphroditism to homosexuality would solder together figures that an adequate historical epistemology must keep separate. The hermaphrodite and the homosexual are as different as the genitalia and the psyche. The notion of a style of reasoning helps us to see how this is so.

Indeed, I do not think it would be going too far to defend the claim, paradoxical though it may seem, that sexuality itself is a product of the psychiatric style of reasoning. Sexuality only became a possible object of psychological investigation, theorizing, and speculation because of a distinctive form of reasoning that had a historically specific origin; or to put it another way, statements about sexuality came to possess a positivity, a being true-or-false, only when the conceptual space associated with the psychiatric style of reasoning was first articulated. A somewhat pedestrian, though still surprising, confirmation of this claim is in fact provided by looking at the origin of the word "sexuality." The very word "sexuality," as well as our concept of sexuality, first appears, according to the *Oxford English Dictionary*, in the late nineteenth century. The *O.E.D.* gives as its first example of "sexuality," defined as "possession of sexual powers, or capability of sexual feelings," a statement from 1879 made in J. M. Duncan's *Diseases of Women*: "In removing the ovaries, you do not necessarily destroy sexuality in a woman." Nothing could be a better illustration of my claim that sexuality is an object distinct from the anatomical style of reasoning about diseases. A woman's sexuality is not reducible to facts about, or to the existence of, her reproductive system, and given this understanding it was necessary to have a way of conceptualizing sexuality that permitted one to say something about it without invoking, in any essential way, those anatomical facts. It is the psychiatric style of reasoning that made such talk possible in medicine, that made it possible to make statements such as Duncan's. Without this style of reasoning we would be forever talking about sex, not about sexuality.

Despite Foucault's remarks to the contrary at the end of volume 1 of *The History of Sexuality*, I think it is of decisive epistemological importance to distinguish carefully between sex and sexuality, where the former is understood, as the *O.E.D.* defines it, as "either of the two divisions of organic beings distinguished as male and female respectively"; an example of this usage is the statement in Crooke's *Body of Man* from 1615, "If wee respect the . . . conformation of both the sexes, the male is sooner perfected . . . in the wombe." The *O.E.D.* gives as another definition of "sex" what is in effect a further specification of the first definition, "the sum of those differences in the structure and function of the reproductive

15. Ariès, "Thoughts on the History of Homosexuality," in *Western Sexuality*, p. 66.

organs on the ground of which beings are distinguished as male and female, and of the other physiological differences consequent on these"; an example of this usage is a remark of H. G. Wells from a 1912 book on marriage: "The young need . . . to be told . . . all we know of three fundamental things; the first of which is God, . . . and the third sex." These uses are closely connected with the use of the verb "to sex," which the *O.E.D.* defines as "to determine the sex of, by anatomical examination."

Although they are closely related, I am concerned primarily with the concepts of sexuality and sex rather than with the words "sexuality" and "sex." A good example of how the same word may be used to express two distinct concepts is given by the only instance I know of where the notion of sexuality is linked to biology instead of psychology. This occurs in Buck's *Handbook of Medical Science* from 1888: "According to a strict biological definition sexuality is the characteristic of the male and female reproductive elements (genoblasts), and sex of the individuals in which the reproductive elements arise. A man has sex, a spermatozoon sexuality." This statement is so bizarre as to produce puzzlement eventuating in silence. Can a spermatozoon be heterosexual, homosexual, or bisexual? Can it suffer from deviant sexuality, or abnormally increased or decreased sexuality? Can it have masochistic, sadistic, or fetishistic sexual desires? The answer to these questions is neither yes nor no, since the questions get their sense from the psychiatric style of reasoning, which has no application whatsoever to a spermatozoon. We quite literally do not understand the claim that "a man has sex, a spermatozoon sexuality" for there is no such thing as sexuality outside of the psychiatric style of reasoning. The irreducible weirdness or incomprehensibility of Buck's claim is a good example of how specific concepts are produced by distinctive styles of reasoning, of how we think about sexuality, and of how we distinguish between sex and sexuality. In looking for the origin of our concept of sexuality, we do well to heed Oscar Wilde's advice that "it is only shallow people who do not judge by appearances." We should examine the word "sexuality" in the sites in which it is used, that is, we must look at the sentences in which "sexuality" appears, and see what is done with these sentences by the various people who use them. Typically, at least when we are dealing with an epistemological break, we will find that the concept under investigation enters into systematic relation with other very specific concepts, and that it is used in distinctive kinds of sentences to perform regular, because often repeated, functions. What we must avoid is the attempt to go behind the appearances, to offer some subtle hermeneutic reconstruction that ignores or overrides the surface of sentences.

If anyone believes that I have so far been talking only about words and not about things, that I have not exited from concepts to the world, it will be helpful at this point to recall some examples of Wittgensteinian criteria. In the most compelling discussion I know of Wittgenstein's notions

of criteria and grammar, Stanley Cavell, in *The Claim of Reason*, brings into focus a number of examples, one of which concerns the grammar of "pain":

And pain can be deadened (not altered, as an opinion), or obtunded (not dampened, as a mood); you can locate certain pains, or have to, by prodding, i.e., by activating them, causing them afresh, focussing them; we speak of someone as in pain, but not as in pleasure (and as in mourning and in ecstasy, but not as in joy or in rage); you can cause pain but not pleasure, which is given and is taken (like pride and courage, but unlike happiness, which can only be found; though you can make someone proud and happy, and so also ashamed and unhappy); and so on.¹⁶

Is it only part of our concept of pain that we say it can be deadened or obtunded, but not altered or dampened, that we say someone is in pain but not in pleasure, that we cause pain but give pleasure? Or is it in the nature of pain itself that we can say these things of it? Cavell's grammar of pain is meant to show that any such facile distinction collapses under the weight of this example. And in this same chapter, entitled "What a Thing Is (Called)," contrasting what he calls the Austinian kind of object and the Wittgensteinian kind of object, he shows more specifically that "if you do not know the grammatical criteria of Wittgensteinian objects, then you lack, as it were, not only a piece of information or knowledge, but the possibility of acquiring any information about such objects *überhaupt*; you cannot be told the name of that object because there is as yet no *object* of that kind for you to attach a forthcoming name to."¹⁷ In these terms, I can formulate my claim by saying that sexuality is a Wittgensteinian object and that no one could know the grammatical criteria of this object before the emergence of the psychiatric style of reasoning, which is to say that before this time there was as yet no object for us to attach the name "sexuality" to.

I recognize that I am defending a very strong, counterintuitive, even seemingly unnatural, thesis here, so let me try to increase its plausibility. I want to approach this issue by discussing some aspects of Leo Steinberg's brilliant book, *The Sexuality of Christ in Renaissance Art and in Modern Oblivion*.¹⁸ Although I am going to focus almost exclusively on a conceptual inadequacy in Steinberg's account, I do not for a moment wish to diminish the major achievement of his book, which transcends the boundaries of any single discipline, articulating issues that take the reader far from the

16. Stanley Cavell, *The Claim of Reason: Wittgenstein, Skepticism, Morality, and Tragedy* (New York, 1979), p. 78.

17. *Ibid.*, p. 77.

18. Leo Steinberg, *The Sexuality of Christ in Renaissance Art and in Modern Oblivion* (New York, 1983); all further references to this work, abbreviated *SC*, will be included in the text.

province of art history. His book has an almost unlimited interest, and the kind of provocations it allows is a certain indication of its very rare virtues. The title of Steinberg's book should give us pause since, according to the claim I have just put forward, it seems as though there could not be any such thing as the *sexuality* of a person, Christ included, in the Renaissance. A careful reading of his book shows unambiguously that it is not about the sexuality of Christ, but about the sex of Christ, the representation of Christ's genitalia in Renaissance art. Indeed, Steinberg's argument requires that the paintings he discusses be about the sex of Christ, the fact of his sex.

To briefly summarize his argument, Steinberg believes that these representations of Christ are motivated by the centrality of an incarnational theology, that the representation of the penis of the infant or adult Christ gives visible reality to the mystery of the incarnation. For Christ to redeem humanity by his death, he had to be a man in every respect, and these Renaissance paintings represent him as such: "The rendering of the incarnate Christ ever more unmistakably flesh and blood is a religious enterprise because it testifies to God's greatest achievement. And this must be the motive that induces a Renaissance artist to include, in his presentation of the Christ Child, even such moments as would normally be excluded by considerations of modesty—such as the exhibition or manipulation of the boy's genitalia" (SC, p. 10). As Steinberg succinctly puts it later in his book, "the evidence of Christ's sexual member serves as the pledge of God's humanation" (SC, p. 13). And as he himself recognizes, the dogma of the incarnation requires that Christ be "both deathbound and sexed" (SC, p. 13), and these artists allow us to see that he is sexed, by anatomical examination; the argument requires nothing at all about Christ's sexuality. The anatomical fact of Christ's sex, the representation of his penis, is paralleled by Renaissance discussions and sermons about Christ's circumcision and, as André Chastel has pointed out, by the reliquary of the holy foreskin, called the Relic of the Circumcision, in the Holy of Holies at the Lateran, which was stolen in 1527 during the sack of Rome. Again, there is much about sex but nothing about sexuality in these traditions. At one point in his review of Steinberg's book, Chastel accuses him of "an unjustified transfer of a current conception to a description of the situation in the fifteenth and sixteenth centuries."¹⁹ But the most blatant and far-reaching such transfer, overlooked by Chastel, occurs in the very title of his work. Of course, one might think that Steinberg is simply being careless in his choice of words, that nothing significant turns on this choice, since whatever words he uses, he clearly means "sex." But his choice of "sexuality," whether careless

19. André Chastel, "A Long-Suppressed Episode," review of *The Sexuality of Christ in Renaissance Art and in Modern Oblivion* by Leo Steinberg, trans. David Bellos and Christopher Benfry, *New York Review of Books*, 22 Nov. 1984, p. 25 n. 2.

or studied, covers something of genuine significance that is all too naturally missed. It is this automatic and immediate application of concepts, as though concepts have no temporality, that allows, and often requires, us to draw misleading analogies and inferences that derive from a historically inappropriate and conceptually untenable perspective. So let me turn to some representations of sex and sexuality in order to underline their radical differences.

The iconographical representation of sex proceeds by depiction of the body, more specifically by depiction of the genitalia. The iconographical representation of sexuality is given by depiction of the personality, and it most usually takes the form of depiction of the face and its expressions. Figures 1 through 5, all of which appear in Steinberg's book, represent the sex of Christ by explicitly drawing attention to the fact of his genitalia. Figure 1 depicts Saint Anne manipulating Christ's genitalia as Mary and Joseph look on. The work as a whole bears no trace of scandal or blasphemy, and I believe Steinberg is correct in interpreting Anne's palpation of Christ's penis as "palpable proof" of "God's descent into manhood" (*SC*, p. 8). Notice that Christ's profile is barely visible, his face turned toward Mary and not a prominent or significant part of the woodcut. The lengths or depths to which some will go to deny what is visibly evident is rather remarkable. One art historian reviewing Steinberg's book has said the following about his interpretation of the Baldung woodcut:

The gesture [of Saint Anne] is at the very least ambiguous, in that the fingers could well be behind the penis, and not touching it at all. Indeed, given that her other fingers are around his knee, this is the most likely reading. . . . If they [Baldung's contemporaries] had initially supposed that St Anne was fondling Christ's penis, they would surely have looked again to see if another, less wildly inappropriate reading was possible. They would have noticed not only the position of the other fingers, but would also have observed that her right hand is under the child's back and that she is bending forward to take him from her daughter. This is a familiar subject; and once we recognise it, we can see that the ambiguously placed left hand cannot possibly be touching the genitals. Baldung's composition is a little awkward, but it does not represent a subject unique in European art.²⁰

This description, even while acknowledging that Baldung's composition is a "little awkward," shows a reviewer who exemplifies modern oblivion. First of all, Steinberg's reading is not in the least "wildly inappropriate" when framed by his readings of dozens of other paintings and by the visual evidence of the other 245 reproductions in his book. Furthermore,

20. Charles Hope, "Ostentatio Genitalium," *London Review of Books*, 15 Nov.–5 Dec. 1984, p. 20.



FIG. 1.—Hans Baldung Grien, *Holy Family*, 1511.

the alternative reading that the fingers “could well be behind the penis” which is supposed to be made “most likely” by the fact that “her other fingers are around his knee” is hardly likely at all. If Saint Anne’s fingers were actually around Christ’s knee, it would be more natural for her thumb to be extended, which it is not, and for her wrist to be angled more toward her body. Moreover, and most important, the placement of her left hand is more than a little awkward if Saint Anne is lifting Christ from Mary’s arms. If, on this interpretation, the supporting right hand is actually doing the lifting, then the position of the other hand is entirely unmotivated. The alternative interpretation is that the left hand is supposed to be participating in the lifting. But if one simply places one’s hands in the exact position of Saint Anne’s and then attempts to lift an infant from the angle from which she is purported to be lifting Christ, one all too quickly sees that the most straightforward function of this placement of the left hand would be to strain or dislocate the child’s left knee or hip. Steinberg’s historical erudition in interpreting paintings is not made at the expense of the perspicacity of his eye.

Figure 2, a painting by Veronese, depicts, going clockwise, Mary, Saint Joseph, Saint John, and Saint Barbara, with the infant Jesus in the middle. The central image of the painting is Jesus’ self-touch, a motif which recurs in many other Renaissance paintings. Although in passing Steinberg describes the infant Jesus in this painting as a “contented baby,”



FIG. 2.—Veronese, *Holy Family with Saint Barbara and the Infant Saint John*, c. 1560.



FIG. 3.—Maerten van Heemskerck, *Man of Sorrows*, c. 1525–30.

the expression on his face is actually rather minimal, bordering on blank, his “contentment” being more a lack of restlessness than anything else. The other central image of the painting is Saint John kissing the infant’s toe. There is a long tradition of Christian exegesis and interpretation in which the head and feet represent respectively the divine and the human. So Saint John’s kissing Jesus’ foot draws attention to his humanity as does the self-touch, and this is enhanced by the gazes of all the protagonists (nobody looks at Jesus’ face) and by the fact that his upper body is shadowed in a way that his lower body is not. Moreover, as Steinberg points out in another context, “feet” is a standard biblical euphemism for genitalia—Saint Jerome refers to “the harlot who opens her feet to everyone who passes by” (SC, p. 144).²¹ Figure 3 is one of three paintings by Maerten van Heemskerck depicting Christ, the mystical Man of Sorrows.

21. Steinberg’s entire excursus 18 is relevant here.

All three paintings, not to mention others discussed by Steinberg, clearly exhibit a phallic erection. Even though we take erection to represent sexuality, the presence of rising desire, no such equation can be found here, where the symbolic value of erection is quite different. Steinberg speculates, not at all wildly, that in these paintings erection should be equated with resurrection: "If the truth of the Incarnation was proved in the mortification of the penis, would not the truth of the Anastasis, the resuscitation, be proved by its erection? Would not this be the body's best show of power?" (*SC*, p. 91). Whatever one ultimately thinks about these depictions, one looks in vain for any expression of sexuality. Figures 4 and 5 depict a hand-on-groin gesture of the dead Christ. Although



FIG. 4.—Mattia Preti (?), *Dead Christ with Angels*.



FIG. 5.—David Kindt, *Lamentation*, 1631.



FIG. 6.—From S. Lindner, “Das Saugen an den Fingern, Lippen, etc. bei den Kindern (Ludeln). Eine Studie,” *Jb. Kinderheilk*, 1879.

this motif raises many interpretive problems, discussed at length by Steinberg (see *SC*, excursus 38), suffice it to say that dead men can have no sexuality, even if the dead man is Christ exhibiting, by the gesture of his left hand, his sex, his humanity. My motive for reproducing these illustrations is that, like all of Steinberg’s iconographical evidence, they can be fully interpreted without invoking the notion of sexuality; indeed, to invoke this notion is to misrepresent what is being depicted.

Contrast these representations with some illustrations from nineteenth-century psychiatric texts.²² Consider, first, figure 6, which is from an 1879 article by the Hungarian pediatrician Lindner, cited and discussed

22. A useful discussion of the iconography of madness can be found in Sander L. Gilman, *Seeing the Insane* (New York, 1982).

in the second of Freud's *Three Essays on the Theory of Sexuality*.²³ The central feature of the drawing is the depicted relationship between thumb sucking and genital stimulation, which relationship is intended to exhibit one of the essential components of infantile sexuality. The upper left arm/shoulder and right hand of the girl are contiguous in a way that suggests one single, interconnected, even continuous motion linking thumb sucking and genital manipulation. The drawing demonstrates, as Freud was to emphasize, that sexuality is not to be confused with the genitals, that the facts of sexuality encompass far more than the fact of one's sex. Think of Lindner's reasons for accompanying his article with this drawing—there is no need for visible proof of the little girl's sex; it is not as though one is faced with a hermaphrodite; the fact that one views a female child is unproblematic and unambiguous. But how could Lindner demonstrate the facts of infantile sexuality to his doubting pediatric colleagues? It is that problem to which this drawing is meant to respond. It links, so to speak, by ocular proof the psychological pleasure and satisfaction in thumb sucking with the satisfaction one takes in genital stimulation. There is no plausible explanation of the drawing that doesn't invoke the psychology of sexuality as opposed to the anatomy of sex. Furthermore, the expression on the girl's face, although perhaps showing contentment (it is difficult to determine unequivocally) is primarily one of distraction and self-absorption. Her eyes never fully meet ours; the lack of direction in her gaze expresses her preoccupation with her own activity. This kind of infantile self-absorption more subtly demonstrates another aspect of infantile sexuality—the psychiatric style of reasoning calls it “auto-erotism.” Figures 7 through 9 illustrate the psychiatric emphasis on the face and its expressions as the way of representing derangements of the personality. From “Happy, Hilarious Mania” to “impulsive insanity,” physiognomy was the key to personality. As James Shaw, author of a series of late nineteenth-century articles entitled “Facial Expression as One of the Means of Diagnosis and Prognosis in Mental Disease,” put it:

The face having been examined in repose, it is necessary, in order to study the facial reaction, to engage the patient in conversation, or if he is suffering from much intellectual weakness, to ask him a question or make some statement or movement calculated to arouse his attention, and then to watch the changes of facial expression carefully, or to note their absence. . . . Attention to these simple directions, together with a general knowledge of the facial signs given below, will enable any practitioner to refer most

23. S. Lindner, “Das Saugen an den Fingern, Lippen etc. bei den Kindern (Ludeln). Eine Studie,” *Jahrbuch für Kinderheilkunde und physische Erziehung* 14:68; see Sigmund Freud, *Three Essays on the Theory of Sexuality*, *The Standard Edition of the Complete Psychological Works of Sigmund Freud*, ed. and trans. James Strachey, 24 vols. (London, 1953–74), 7:179–81.



FIG. 7.—James Crichton Browne, "Happy Hilarious Mania," c. 1869.



FIG. 8.—Manic depression. The manic state is on the left, the depressive state on the right. Theodor Ziehen, *Psychiatrie für Ärzte und Studierende bearbeitet*, 1894.

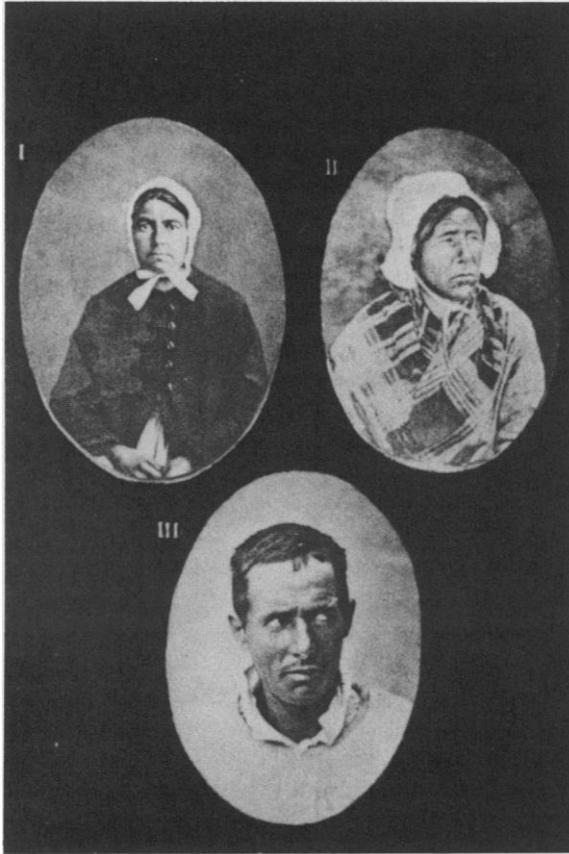


FIG. 9.— Three studies of impulsive insanity. Henri Dagonet, *Nouveau traité élémentaire et pratique des maladies mentales*, 1876.

cases to one of the ten great symptomatic groups into which I have divided mental cases for the purposes of this monograph. Many cases will be further capable of diagnosis as to the subdivisions etiological, pathological, or symptomatic, to which they belong, and in most others the medical man will be put on the way to a diagnosis to be confirmed by the patient's speech, conversation, conduct, and anamnesia (personal and family history).²⁴

For my immediate purposes, figure 10 is most interesting. It is the only photograph of sexual perversion among the fifty-five photographs reproduced in Shaw's *Physiognomy of Mental Diseases and Degeneracy*. Here is Shaw's commentary on this photograph: "The young deaf mute rep-

24. These articles originally appeared in *The Medical Annual*, vol. 12 (1894), vol. 15 (1897), and vol. 21 (1903). They were republished as *The Physiognomy of Mental Disease and Degeneracy* (Bristol, 1903). The quotation is from the latter.



FIG. 10.—Sexual perversion with deaf-mutism. James Shaw, *The Physiognomy of Mental Diseases and Degeneracy*, 1903.

resented . . . is the subject of a mild form of sexual perversion, leading him to object to wear male attire except under compulsion. His face suggests effeminacy, and his sloping shoulders strengthen the impression. It is often the case that male sexual perverts resemble females, and *vice versa*."²⁵ There is obviously no question that the resemblance here is one of sexuality, not of sex. The pervert's tastes, impulses, desires, dispositions, and so forth exhibit feminine sexuality, all emblemized by the effeminacy of his face. A statement such as Duncan's that removing the ovaries does not necessarily destroy a woman's sexuality, thus divorcing sexuality from sex, was part of the conceptual space that made it possible for males to exhibit feminine sexuality and *vice versa*, made it possible for there to be kinds of sexuality that did not correspond to an individual's sex.

Let me return briefly to Steinberg in order to anticipate, without fully answering, a possible objection to my account. There is a sustained Christian tradition of discussions of Christ's virginity and chastity, a tradition present in many Renaissance sermons, and it might appear that this tradition is explicitly directed to Christ's sexuality, not merely to his sex. After all, how is one to understand chastity except by reference to sexuality? But as Steinberg emphasizes, chastity consists of physiological potency under check; it is a triumph of the will over the flesh and is exemplary because of the volitional abstinence in the face of the physiological possibility of sexual activity (see *SC*, p. 17 and excursus 15). Commenting on a painting of Andrea del Sarto, Steinberg notices that he "contrasts the Christ Child's stiffer member with that of St. John—a differentiation which suggests the likeliest reason for the motif: it demonstrates in the Infant that physiological potency without which the chastity of the man would count for nought" (*SC*, p. 79). Chastity and virginity are moral categories denoting a relation between the will and the flesh; they are not categories of sexuality. Although we tend to read back our own categories of sexuality into older moral categories, partly because it is often so difficult for us to distinguish them precisely, it is crucial to my argument that we separate the two. Blurring the two kinds of categories leads to epistemological and conceptual lack of differentiation, and results in the historiographical infection that the great French historian of science Georges Canguilhem has called the "virus of the precursor."²⁶ We perpetually look for precursors to our categories of sexuality in essentially different domains, producing anachronisms at best and unintelligibility at worst. The distinction between categories of morality and sexuality raises extraordinarily difficult issues, but I think it could be shown, for example, that even Aquinas' discussion of the parts or species of lust in part 2.2, question 154 of the *Summa Theologica* ought not to be assimilated

25. *Ibid.*

26. Georges Canguilhem, "Introduction: L'Objet de l'histoire des sciences," *Etudes d'histoire et de philosophie des sciences* (Paris, 1983), pp. 9–23.

to a discussion of sexuality. One must not suppose that in nineteenth-century psychiatry moral deviation was simply transformed into disease. And in the case of chastity one must carefully distinguish it from what Richard von Krafft-Ebing called “anaesthesia of the sexual instinct” in *Psychopathia Sexualis*: “Here all organic impulses arising from the sexual organs, as well as all impulses, and visual, auditory, and olfactory sense impressions fail to sexually excite the individual.”²⁷ This is a disorder of sexuality, not a triumph of the will but a form of psychopathology. Christ most assuredly did not suffer from it. Of course, in concentrating on the Renaissance and the nineteenth century, I have passed over many intervening years. But Steinberg’s book is of such importance and can be used to cast such a clear light on the epistemological contrast I wish to draw that a detailed discussion of it is worth our conceptual focus. (The eighteenth century raises its own intriguing problems and would require an entirely separate discussion.)

Here is one final piece of visual evidence for the newly emerging psychiatric style of representing diseases. It was not uncommon for medical texts up through the nineteenth century to include drawings depicting hermaphrodites (fig. 11). These poor creatures were shown exhibiting their defective anatomy, the pathological structure of their organs revealing, for all to see, the condition of their diseased sexual identity. Their ambiguous status was an ambiguous anatomical status. But not too many decades later, when a new style of reasoning appeared, we find the radically different iconography of sexual diseases to which I have pointed. A further exemplification of this new iconography is the frontispiece to D. M. Rozier’s tract on female masturbation (fig. 12), a nineteenth-century book published, significantly enough, at the threshold of the emergence of the psychiatric style of reasoning.²⁸ Opening this book, the reader is confronted by a drawing of a young woman. Her head is stiffly tilted toward her left, and her eyes are rolled back, unfocused, the pupils barely visible. She is a habitual masturbator. The depicted portion of her body looks normal, but we can see her psyche, her personality, disintegrating before our eyes. She stands as an emblem of psychiatric disorders, so distinct from her anatomically represented predecessors.

* * *

Since there are more seemingly problematic cases for my account than I can possibly discuss here, I want to take one example, returning

27. Richard von Krafft-Ebing, *Psychopathia Sexualis, with Especial Reference to the Antipathic Sexual Instinct: A Medico-Forensic Study*, trans. Franklin S. Klaf (New York, 1965), p. 34; all further references to this work, abbreviated *PS*, will be included in the text.

28. D. M. Rozier, *Des Habitudes secrètes ou des maladies produites par l'onanisme chez les femmes* (Paris, 1825). I have not been able to determine in which edition this frontispiece first appears; it does, however, appear by the time of the third edition in 1830.



FIG. 11.—Hermaphrodite. James Paris du Plessis, *A Short History of Human Prodiges and Monstrous Births. . .*, unpublished manuscript, early seventeenth century.

again to a Renaissance document, in order to show how I would defend my claims against some apparent counterinstances of historical importance. A useful place to begin is with a conversation between Foucault and some members of the department of psychoanalysis at the University of Paris/Vincennes that took place after the publication of the first volume of Foucault's *History of Sexuality*. Toward the end of this conversation, Alan Grosrichard questions Foucault as follows:

GROSRICHARD: Does what you say in your book about perversions apply equally to sado-masochism? People who have themselves whipped for sexual pleasure have been talked about for a very long time . . .

FOUCAULT: Listen, that's something that's hard to demonstrate. Do you have any documentation?

GROSRICHARD: Yes, there exists a treatise *On the Use of the Whip in the Affairs of Venus*, written by a doctor and dating, I think, from 1665, which gives a very complete catalogue of cases. It's cited



FIG. 12.—Masturbator. D. M. Rozier, *Des Habitudes secrètes ou des maladies produites par l'onanisme chez les femmes*, 1830.

precisely at the time of the convulsions of St Médard, in order to show that the alleged miracle actually concealed a sexual story.²⁹

Foucault goes on to make the claim that, nevertheless, the pleasure in having oneself whipped was not catalogued in the seventeenth century as a disease of the sexual instinct, and the issue then drops—too soon, in my opinion, to see what is really at stake. Foucault's account of perversion was to have been worked out in what he originally announced as the fifth volume of his *History of Sexuality*, to be titled, appropriately enough, *Perverts*. But he soon reconceived the topics for his projected history of sexuality and so never provided much historical detail to support his claims about perversion. An account of the emergence of sexuality must

29. Foucault, "The Confession of the Flesh," *Power/Knowledge: Selected Interviews and Other Writings, 1972–1977*, ed. Colin Gordon, trans. Gordon et al. (New York, 1980), p. 221.

be supplemented by the story of the emergence of perversion as a disease category, something I have attempted elsewhere.³⁰ Or to be more precise, our experience of sexuality was born at the same time that perversion emerged as the kind of deviation by which sexuality was ceaselessly threatened. I have argued not only that our medical concept of perversion did not exist prior to the mid-nineteenth century but also that there were no perverts before the existence of this concept. This shift from the emergence of a concept ("perversion") to the emergence of a kind of person (the pervert), to return to an issue I have already mentioned, is underwritten by the doctrine that Ian Hacking has called "dynamic nominalism." Hacking argues that in many domains of the human sciences, "categories of people come into existence at the same time as kinds of people come into being to fit those categories, and there is a two-way interaction between these processes." Dynamic nominalism shows how "history plays an essential role in the constitution of the objects, where the objects are the people and ways in which they behave," since the human sciences "bring into being new categories which, in part, bring into being new kinds of people."³¹ Hacking gives multiple personality as an example of making up people and provides other examples from the history of statistics.³² Perverts and the history of perversion are a still further example of making up people. Our experience of sexuality is all that there is to sexuality itself, and this experience was decisively and quite recently formed by a set of concepts or categories, among them "perversion," and an associated style of reasoning.

Since the problem raised by Grosrichard is a good test case for my claims, I want to turn directly to the treatise he mentions. In 1629 (or, according to some sources, 1639) John Henry Meibomius, "a physician of Lubeck," wrote a short treatise entitled "On the Use of Flogging in Medical and Venereal Affairs, the Function of the Reins and Loins." It begins with a catalog of cases of whipping that bear no relation to any question of sexuality. Meibomius asserts that whipping has been used as a cure for melancholy, madness, to help lean persons "to plump their bodies," to cure relaxed limbs, to forward the eruption of smallpox, and

30. Arnold I. Davidson, "Closing Up the Corpses: Diseases of Sexuality and the Emergence of the Psychiatric Style of Reasoning," in *Handbook for the History of Psychiatry*, ed. E. Wallace and J. Gach, forthcoming.

31. Hacking, "Five Parables," in *Philosophy in History: Essays on the Historiography of Philosophy*, ed. R. Rorty, J. B. Schneewind, and Q. Skinner (Cambridge, 1984), pp. 122, 124.

32. See Hacking, "The Invention of Split Personalities," *Human Nature and Natural Knowledge*, ed. Alan Donagan, Anthony N. Perovich, Jr., and Michael V. Wedin (Dordrecht, 1986), pp. 63–85, and "Making Up People," in *Reconstructing Individualism: Autonomy, Individuality, and the Self in Western Thought*, ed. Thomas C. Heller, Morton Sosna, and David E. Wellbery (Stanford, Calif., 1986), pp. 222–36. Hacking attributes the doctrine of dynamic nominalism to me in this latter paper on the basis of my "Closing Up the Corpses."

to cure obstructions in the belly. After listing these cases, which he takes to be uncontroversial, he turns to the question of “persons who are stimulated to venery by strokes of the rod, and worked into a flame of lust by blows.”³³ He establishes the veracity of this kind of case through the testimony of other physicians as well as through his own medical experience. Here is one instance he cites:

I subjoin a new and late instance, which happened in this city of Lubeck, where I now reside. A citizen of Lubeck, a cheesemonger by trade, was cited before the magistrates, among other crimes, for adultery, and the fact being proved, he was banished. A courtesan, with whom this fellow had often an affair, confessed before the Deputies of the State, that he could never have a forcible erection, and perform the duty of a man, till she had whipped him on the back with rods; and that when the business was over, that he could not be brought to a repetition unless excited by a second flogging. [*FVA*, pp. 20–21]

Having thus established the truth of these instances, he next considers “what reason can be given for an action so odd and uncommon.” He first entertains the astrological explanation, namely, that “the man’s propensity to Venus was caused in his geniture, and destined to flogging by opposite and threatening rays of the stars,” only to reject it immediately since “the heavens and the stars are universal causes, and so cannot occasion such particular effects in one or two individuals” (*FVA*, p. 21). He next examines the explanation by custom, the idea that these odd and uncommon acts are due to vicious habits practiced in childhood, “a strange instance of what a power the force of education has in grafting inveterate ill habits on our morals.” But this explanation is also rejected because not all youths who are engaged in this practice continue it habitually; and moreover, “neither is it probable that all those boys we mentioned began their youth with exposing their chastity to sale with this reciprocal communication of vice, and used rods at the first to provoke lechery” (*FVA*, p. 22). The most adequate explanation of these strange cases, according to Meibomius, can be found by examining the physiology and anatomy of the reins and loins. After discussing in some detail the anatomical relations between the reins, loins, the seminal arteries and veins, and the testicles, as well as determining the way in which “each in a different manner, are appropriated as well for the elaborating of the seed as for performing the work of generation” (*FVA*, p. 23), Meibomius concludes:

33. Johann Heinrich Meibom, *On the Use of Flogging in Venereal Affairs* (Chester, Pa., 1961), p. 19; all further references to this work, abbreviated *FVA*, will be included in the text. The English translation of this Latin treatise first appeared in 1801.

That stripes upon the back and loins, as parts appropriated for the generating of the seed, and carrying it to the genitals, warm and inflame those parts, and contribute very much to the irritation of lechery. From all which, it is no wonder that such shameless wretches, victims of a detested appetite such as we have mentioned [masturbation], or others exhausted by too frequent repetition, their loins and their vessels being drained, have sought a remedy by flogging. For it is very probable that the refrigerated parts grow warm by such stripes, and excite a heat in the seminal matter, and that the pain of the flogged parts, which is the reason that the blood and spirits are attracted in greater quantity, communicate heat also to the organs of generation, and thereby the perverse and frenzical appetite is satisfied. Then nature, though unwilling, is drawn beyond the stretch of her common power, and becomes a party to the commission of such an abominable crime. [FVA, p. 30]³⁴

In the next paragraph, Meibomius' underlying aim in writing this treatise becomes clearer. As a physician, he has evidently cured a number of men, otherwise unable to perform the act of generation, with this treatment of stripes and strokes upon the back. This remedy seems to have become the object of much discussion and questioning among both fellow physicians and laypersons. Meibomius admits that perhaps some of those who come to him for treatment are simply exhausted by excess venery and request his treatment merely so that they can continue the "same filthy enjoyment." But he demands of those who question this practice, "You must, in all conscience, also ask: whether a person who has practised lawful love, and yet perceives his loins and sides languid, may not, without the imputation of any crime, make use of the same method, in order to discharge a debt which I won't say is due, but to please the creditor?" (FVA, p. 30). Meibomius wants to vindicate his practice by arguing that the use of whips in the affairs of Venus can be a justified therapeutic modality, one that physician and patient can practice without the imputation of any crime to either one.

These quotations already allow us to anticipate my argument that Meibomius' treatise is not a counterexample to the claim that perversion does not emerge as a medical phenomenon until the nineteenth century. Before I set out this argument, however, let me remind you how masochism was understood by nineteenth-century psychiatry. For this understanding, we do best to turn again to Krafft-Ebing's *Psychopathia Sexualis*, since Krafft-Ebing was, after all, the inventor of the concept of masochism. Here is what Krafft-Ebing says at the beginning of his section on masochism:

34. The copy of the text I have cited is mispaginated; page 23 is followed by page 30.

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 feeling; the masochist lives in fantasies, in which he creates situations of this kind and often attempts to realize them. By this perversion his sexual instinct is often made more or less insensible to the normal charms of the opposite sex—incapable of a normal sexual life—psychically impotent. But this physical impotence does not in any way depend upon a horror of the opposite sex, but upon the fact that the perverse instinct finds an adequate satisfaction differing from the normal, in woman, to be sure, but not in coitus. [PS, pp. 86–87]

Krafft-Ebing is unequivocal in his assertions that masochism is a special kind of psychopathological disorder that affects the functioning of the sexual instinct in a very particular way. The normal direction of the sexual instinct is blocked in masochism, and this instinct and the psychical sexual life are redirected to an abnormal path which Krafft-Ebing characterizes by a number of distinctive features. Masochism is one mode of functional deviation of the sexual instinct that picks out a *kind of individual*. Krafft-Ebing's world of sexual psychopathology is peopled not merely by individuals who want to be flagellated but by masochistic individuals, a very specific kind of diseased creature. If we were to list the ways of expressing or instantiating sexuality in Krafft-Ebing's universe, masochism would be on that list. Being a masochist is, in *Psychopathia Sexualis*, a possible way of conceiving of oneself, a possible way of being a person.³⁵

Returning to Meibomius' treatise, we find, first of all, that there is not even the slightest implication that people who are whipped, even for venereal purposes, suffer from a disease or disorder which manifests itself in a desire for such whippings. In 1629 there was no possible disease which consisted in the pleasure in having oneself whipped; the very idea of such a disease could not be conceptualized. It is only one of many similar ironies in the history of medicine that far from being a disease, the whipping of patients, and even the desire of some patients for these whippings, was thought to be therapeutically mandated and justified. Moreover, there is absolutely no indication in Meibomius' pamphlet that men who are whipped in venereal affairs constitute a distinct kind of individual, different from other people because of special features of their personality. Anybody may be a candidate for this therapy, depending solely upon whether his languid loins can be, so to speak, activated in no other, simpler way. The question for Meibomius and his interlocutors

35. For further discussion of this terminology, see Hacking's essays cited in note 32.

is whether the lust whipping arouses is always morally prohibited, whether it can ever be so aroused "without the imputation of any crime." The question is not whether there is some kind of person for whom only such whipping provides an adequate psychological satisfaction.

This reading of the treatise is further supported by two additional essays appended to it when it was reprinted in 1669. In neither of these essays is there any anticipation of the set of concepts necessary to describe the phenomenon of masochism. Indeed, all three essays, when not attempting to produce a physiological explanation of the effects caused by whipping, fit squarely into the tradition of moral philosophy and theology that deals with the nature and kinds of lust. Although I cannot discuss this tradition in any detail here, I want to make a few, general background remarks. In book 12 of the *City of God* Augustine uses the theological concept of perversion to describe evil acts of the will. The will is perversely affected when it fails to adhere to God, when it defects from the immutable to mutable good. Perversion is not intrinsically connected with lust, but describes any act of the will that is contrary to God and so is contrary to nature.³⁶ In part 2.2, question 154 of the *Summa Theologica*, Aquinas argues that there are unnatural vices that are a determinate species of lust, since they are contrary not merely to right reason, which is common to all lustful vices, but, in addition, "contrary to the natural order of the venereal act as becoming to the human race."³⁷ However, even in Aquinas' fascinating attempt to distinguish kinds of lust, it is clear that distinct species of lust do not map onto distinct kinds of individuals; we are all subject to all the kinds of lust, and the principle by which we distinguish lusts from one another does not permit us to distinguish different types of people from one another. In this tradition of moral theology, one classifies kinds of sins, not primarily kinds of individuals and certainly not kinds of disorders.

In fact, Krafft-Ebing was quite concerned with the issue of flagellation as it came to be discussed in moral philosophy and theology. He devotes a section of *Psychopathia Sexualis* to distinguishing carefully between passive flagellation and masochism, insisting that the former is a perversity, and therefore an appropriate topic of ethical and legal discussion, while only the latter is a genuine perversion, a medical phenomenon:

It is not difficult to show that masochism is something essentially different from flagellation, and more comprehensive. For the masochist the principal thing is subjection to the woman; the punishment is only the expression of this relation—the most intense effect of it he can bring upon himself. For him the act has only a symbolic value, and is a means to the end of mental satisfaction of

36. Augustine, *Concerning the City of God against the Pagans* (New York, 1972), bk. 12.

37. Thomas Aquinas, *Summa Theologica*, trans. Fathers of the English Dominican Province (Westminster, Md., 1911), 4:1819.

his peculiar desires. On the other hand, the individual that is weakened and not subject to masochism and who has himself flagellated, desires only a mechanical irritation of his spinal centre. [PS, p. 93]

Krafft-Ebing goes on to specify further the characteristics that distinguish the masochist from the “weakened debauchee” who desires passive flagellation, the most significant of these characteristics being psychological. He concludes by claiming that masochism bears to simple flagellation a relation analogous to that between inverted sexual instinct and pederasty; both of these relations are examples of the more general contrast between perversion and perversity, and hence of disease and moral deviation. The phenomenon of masochism, like the general phenomenon of perversion, is a thoroughly modern phenomenon. As Krafft-Ebing remarks, without any further comment, the perversion of masochism was, up until the time of Sacher-Masoch, “quite unknown to the scientific world as such” (PS, p. 87).

Let me return one last time to Meibomius’ treatise to make a final conceptual point. In this treatise, the adjective “perverse” occurs twice, once in the phrase “perverse and frenzical appetite” and a second time in the phrase “vices of perverse lust” (FVA, pp. 30, 22). The context of both occurrences makes it clear that “perverse” is used as a general term of disapprobation, although precisely what the disapproval consists in is not further specified. Indeed, if one looks at lexical patterns in the treatises of moral philosophy and theology that discuss perversion, and even in the pre-nineteenth-century medical works that seem to deal with this topic, the adjectival, adverbial, and verb forms, “perverse,” “perversely,” and “to pervert,” appear to occur far more predominantly than either the noun form “perversion” or, especially, the noun form “pervert.” However, I do not want merely to claim that the numerical occurrences of the noun form are far fewer than adjective, adverb, and verb, although in the works I have examined this appears to be the case. But even apart from looking at and counting lexical patterns, I think it can be argued that the noun had a conceptually derivative place in moral theology but a conceptually central place in nineteenth-century medicine. One could confirm this claim by studying, for instance, the use of this term in Augustine’s *City of God*. And just about the time that Meibomius’ treatise was published, a common use in English of the noun “pervert” was as an antonym to “convert”—a pervert being one that is turned from good to evil, and a convert being the contrary. This usage clearly implies that the primary phenomenon is to be located in the perverse choices and actions of the individual, someone being a pervert or convert depending on the person’s ethical choices.

In Krafft-Ebing’s *Psychopathia Sexualis*, however, we have a book devoted to the description, indeed the constitution, of four types of

characters: the homosexual or invert, the sadist, the masochist, and the fetishist. That is to say, we have a book that sets forth the intrinsic distinguishing characteristics of a new kind of person—the pervert. Krafft-Ebing insisted that to diagnose the pervert correctly one “must investigate the whole personality of the individual” (*PS*, p. 53). He continually emphasizes that diagnosis cannot proceed simply by examining the sexual acts performed. One must rather investigate impulses, feelings, urges, desires, fantasies, tendencies, and so on, and the result of this investigation will be to mark off new kinds of persons, distinct and separate from the normal heterosexual individual. It is the pervert who is primary, perverse choices and actions being subordinated to a conceptually subsidiary role. If in psychiatry the conceptual focus moves from perverse choice to the pervert, and if linguistic forms reflect such conceptual changes, then it should come as no surprise that we find more distinctive and frequent use there of “pervert” and even “perversion.”

Connected with this new focus is the fact that nineteenth-century psychiatry often took sexuality to be the way in which the mind is best represented. To know a person's sexuality is to know that person. Sexuality is the externalization of the hidden, inner essence of personality. And to know sexuality, to know the person, we must know its anomalies. Krafft-Ebing was quite clear about this point. In his *Text-book of Insanity*, a massive book that covers the entire field of mental abnormality, he writes, “These anomalies are very important elementary disturbances, since upon the nature of sexual sensibility the mental individuality in greater part depends.”³⁸ Sexuality individualizes, turns one into a specific kind of human being—a sadist, masochist, homosexual, fetishist. This link between sexuality and individuality explains some of the passion with which psychiatry constituted the pervert. The more details we have about the anomalies of perversion, the better we are able to penetrate the covert individuality of the self. Only a psychiatrist, after meticulous examination, could recognize a real pervert. Or to be more accurate, it was also thought that there was one other kind of person who could recognize a true pervert, even without meticulous examination: as if by a kind of hypersensitive perception, a pervert could recognize one of his own kind. Of course, much more historical detail would be needed to produce an unequivocally convincing argument that proves the conceptual shift from perverse choice to the pervert. But anyone who reads a few dozen of the relevant texts in moral theology and psychiatry will, I think, be fully struck by what Foucault once called their “different epistemological texture.”³⁹

38. Krafft-Ebing, *Text-book of Insanity Based on Clinical Observations*, trans. Charles Gilbert Chaddock (Philadelphia, 1904), p. 81.

39. Foucault, “The Confession of the Flesh,” p. 221. Foucault uses this expression in a different context than mine, though a related one.

Much of my discussion has been concerned with a rupture in styles of reasoning within medicine, a break from pathological anatomy in all its forms to the emergence of psychiatric reasoning. This rupture delineates a problematic internal to the history of medicine. However, my discussion of Meibomius' treatise and the issues it raises, as well as of Steinberg's remarks on the chastity of Christ, opens up a companion problem, one not internal to the history of medicine but rather centered on medicine's appropriation of an initially related, but unmedicalized domain. It is not that medicine simply took over the study of what had once been a part of morality; moral deviation did not merely transform itself into disease. Instead, the moral phenomenon of the perversity of the will furnished a point of reference that both opened the way for and provided an obstacle to the medical constitution of perversion. This problematic, which has barely begun to be worked out in detail, concerns a crossing of the "threshold of scientificity."⁴⁰ Foucault, in *The Archaeology of Knowledge*, has very precisely described the questions that must be answered in attempting to understand how such a threshold can be crossed. Describing not his own position but that of Canguilhem and Gaston Bachelard, the kind of history of science he calls an "epistemological history of the sciences," Foucault writes:

Its purpose is to discover, for example, how a concept—still overlaid with metaphors or imaginary contents—was purified, and accorded the status and function of a scientific concept. To discover how a region of experience that has already been mapped, already partially articulated, but is still overlaid with immediate practical uses or values related to those uses, was constituted as a scientific domain. To discover how, in general, a science was established over and against a pre-scientific level, which both paved the way and resisted it in advance, how it succeeded in overcoming the obstacles and limitations that still stood in its way.⁴¹

I know of no better succinct description of what is at stake at this level of analysis. An adequate history of the psychiatric emergence of sexuality will have to look not only to shifts in styles of reasoning within medicine but also to the multilayered relations between our ethical descriptions of sexual practices and their scientific counterparts.

40. Foucault, *The Archaeology of Knowledge and The Discourse on Language*, trans. A. M. Sheridan Smith (New York, 1972), p. 190.

41. *Ibid.*