Bisexuality in Psychoanalytic Theory: Interpreting the Resistance

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This article discusses the evolution (or lack thereof) of the Freudian concept of bisexuality in psychoanalytic theory. The author addresses issues such as the sustained legacy, in psychoanalytic thought, of conflating biological sex, sexual orientation and gender identity (particularly with respect to bisexuality), portrayals of bisexual desire as fantastic/impossible and the linking of bisexuality with hysteria. Conceptualizations of bisexuality as an immature, primordial state of being are also addressed. The author further comments on the unfortunate tendency of the contemporary, queer-theory-inspired psychoanalytic authors, while critiquing the rigid traditional notions of sexual identity and object choice and advocating for “fluidity,” to bypass/omit bisexuality altogether. It is suggested that at present, bisexuality is either pathologized or rendered invisible in most psychoanalytic discourses, and that for this situation to change, bisexual voices will need to make themselves heard from within the psychoanalytic establishment, critiquing the theory on its own premises and offering viable alternative conceptualizations. These will need to include a psychoanalytic theory of bisexuality the author defines as experience-near.

Keywords: bisexuality, psychoanalytic, queer theory, experience-near theory

INTRODUCTION: CONFUSION OF TONGUES

Since its inception, psychoanalytic theory has relied heavily on the concept of bisexuality, and over the decades, multiple authors have used this concept in a variety of contexts. Yet psychoanalytic usages of the words}

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bisexual and bisexuality may strike a contemporary reader as anything but commonsensical. Because of the conceptual chaos that surrounds the use of this term, it is easier to say what it does not mean to psychoanalytic thinkers than what it does. Only tenuously related to the currently popular understandings of bisexuality as a type of sexual orientation or identity associated with attraction to both (or multiple) genders—in short, the B in “LGBT”—bisexuality as a psychoanalytic concept remains steeped in assumptions about human sexuality that were dominant in Western cultures in the early 20th century.

My goal in this article is to outline the problematic aspects of the psychoanalytic thinking on bisexuality and make suggestions for revisions in psychoanalytic theory that could help make it more bi-inclusive. My concern here is specifically with mainstream clinical psychoanalysis and psychoanalytic psychology. It is uncontested that much valuable bisexuality research has been produced in recent years in other areas of psychology; with few exceptions, however, this research has been ignored by psychoanalysis—a discipline that interacts more closely with biological and medical sciences than with research psychology.

Critiquing and modifying psychoanalytic conceptions of bisexuality is important for a number of reasons. Clinical psychoanalysis and psychoanalytic psychotherapy remain the treatments of choice for individuals committed to in-depth self-exploration and character change, as well as for those with chronic mental illnesses that are not amenable to brief surface interventions. It is vital to ensure that self-identified bisexuals and bi-questioning people who seek analysis receive sensitive and respectful treatment that is based on the individual’s needs and not on outdated theories. On the theoretical plane, bisexual theory would greatly benefit from more intensive collaboration with psychoanalysis—a discipline uniquely well suited to address deeper aspects of sexuality, such as unconscious desire, fantasy and identification.

WHAT IS PSYCHOANALYSIS?

Founded by Freud at the turn of the 20th century, psychoanalysis is a form of psychological treatment that utilizes transference analysis to bring awareness to the unconscious aspects of the personality. Psychoanalysis is time-consuming, requiring several years of three to five sessions each week. Typically, the patient lies on the couch and the analyst sits behind him or her; the purpose of this arrangement is to help the patient focus on his or her inner world. Psychoanalytic psychotherapy is an outgrowth of psychoanalysis; though based on the same theory and utilizing the same basic set of techniques, it does not require the use of the couch and
can be practiced with only one weekly therapy session. Many therapists accept certain aspects of psychoanalytic theory and technique but not others, or choose not to seek the in-depth training that the full-scope psychoanalytic practice demands. Such therapists typically define their work as psychodynamic.

In most countries, the profession of psychoanalysis is internally regulated by local psychoanalytic institutions; to qualify as a psychoanalyst, a practitioner is required to undergo rigorous formal training at a recognized psychoanalytic institute and to maintain an ongoing affiliation with one thereafter. Psychoanalytic psychotherapy is not regulated in the same way; anyone who feels that he or she has mastered the principles of psychoanalytic psychotherapy through training and supervision can declare himself or herself a psychoanalytic psychotherapist.

Until a few decades ago, only psychiatrists could train as psychoanalysts in the United States. Today, psychoanalytic training is also open to psychologists and, in some cases, social workers, marriage and family therapists and people from other professional backgrounds.

**BISEXUALITY: HOW IT ALL BEGAN**

A brief historical note on the origins of the term *bisexuality* may help contextualize this discussion. In the late 19th century, biological scientists began using this term to refer to the hypothetical capacity of an organism to develop into either a male or a female of its species. The idea that human beings were bisexual gained popularity when it was discovered that human embryos did not begin to show either male or female sexual characteristics until the 12th week of gestation (Drescher, 2007).

In Darwin’s theory of evolution, bisexuality, in the sense of sexual ambiguity, or hermaphroditism, was posited as an early stage in man’s evolutionary journey. In *The Descent of Man, and Selection in Relation to Sex*, published in 1871, Darwin described the increased differentiation between the sexes as the mechanism that gradually produced the modern, civilized human beings—a species believed to have the highest mental faculties. Inspired by the discovery of the hermaphroditic ascidians in 1866 and the subsequent embryological studies that demonstrated the presence of both sets of sexual organs in the human embryo until the 3rd month of development (Angelides, 2001), Darwin (1871/1936) asserted that “some remote progenitor of the whole vertebrate kingdom appears to have been hermaphrodite or androgynous” (p. 525). As humans developed, male and female sexual organs became differentiated and specialized in function, yet both sexes retained atavistic features associated with the other sex; hence, modern men and women were bisexual.
Freud, along with a few others, extended the notion of bisexuality into the psychological realm, suggesting that humans were psychologically as well as physically bisexual (Drescher, 2007). Nonetheless, psychic bisexuality for him forever remained secondary to the essential features of the human physical development. It was, so to speak, a manifestation of biology in the psychological realm. Insofar as the concept of gender as distinct from biological sex had not yet been articulated, having the physical characteristics of both sexes was “naturally” understood to entail having the psychic characteristics of both genders. And because Freud’s theory of object choice was based on the idea of identification—one identifies with one parent and feels attracted to the other—bisexuality implied both bigenderism and dual attraction.

Among Freud’s best-known contributions to the theory of sexuality, his distinctions between instinct and aim (1905/1962) and between sex, psychic identification and object choice (1920/1955c) paved a way for a more nuanced and less biologically determined understanding of sexuality. His concept of bisexuality, by contrast, remained remarkably overinclusive as well as inextricably linked to biology (Smith, 2002; Stoller, 1974). It referred, simultaneously, to disharmonious or shifting gender identity, dual attraction and the universal sexual ambiguity of the human anatomy. Not surprisingly, a concept that was so loaded “embarrass[ed] all enquiries into the subject” (Freud, 1940/1955b, p. 188).1

In most of Freud’s writing (with An Outline of Psychoanalysis [1940/1955b], one of his latest works, being a notable exception), bisexuality is construed as the deeper truth of human sexuality that is, however, impossible in practice—at least not for a modern human person. Human nature is bisexual because the human physique is so, but a human progress (in line with the Victorian idea of linear progress) from a natural being to a cultured one, his or her bisexuality becomes somewhat of an omnipresent atavism. With ontogeny recapitulating phylogeny, a child is polymorphously perverse; lacking a solid sense of itself as either male or female and clueless about the ultimate goal of sex—supposedly procreation—this child can enjoy any form of sexual activity. Not so an adult. Primordial bisexuality always lurks in the background, yet fundamentally, one is always psychically identified as either a man or a woman, and one’s object choice is always complimentary to this identification.

Recently, Angelides (2001) assessed Freud’s placement of bisexuality in the past (of individual and the species) as an example of a pervasive cultural phenomenon that he called “erasure of bisexuality in the present tense” (p. 69). He argued that erasing bisexuality from the present tense was a price Freud had to pay for assigning it a central role in the formation of all sexualities. In other words, a theory that suggested continuity between masculinity and femininity, hetero- and homosexuality, and normality and
psychopathology was subversive enough. Had this theory also made bisexuality possible and visible as praxis, had it allowed for the possibility of this ambiguous space being populated by mature modern adults, it would have gone a step too far. Such a theory would have become too radical for the audiences and possibly for the author himself.

***FACES OF PRIMITIVITY: MADNESS, IMMATURENESS AND DEVIANT SEXUALITY***

In late 19th century, the appropriation of Lamarckian and Darwinian concepts by the emerging discipline of anthropology produced an influential intellectual current that Brickman (2003) termed sociocultural evolutionism. She elaborated:

> Human life was seen as evolving through time [...] toward its evolutionary telos, the European, masculine subject; the implication, so important for developments in anthropological and social theory, was that deviations from this normative end were represented as prior in evolutionary time. Thus savages, children, criminals, peasants, and the urban poor, as well as mentally ill and, of course, women of any social and cultural provenance, were “more primitive,” stuck somewhere midway on the evolutionary path. (pp. 47–48)

Freud was profoundly influenced by evolutionary ideas and their anthropological applications, as well as by Haeckel’s recapitulation hypothesis, which asserted that ontogeny recapitulates phylogeny—that is, that each individual organism repeats, in its development, the evolutionary process of its species. In Freud’s theory, the mental world of a European child was equivalent to that of a savage, that is, an African or American Indian native. A neurotic was conceptualized as a person who had not developed fully; hence, his world, too, was the same as the child’s and the savage’s. Homosexuality, as a developmental arrest, also represented lagging behind in evolutionary time. In short, anything that did not match the male European ideals of mastery, autonomy and rationality was associated with the primitive past, the childhood of the individual and the species. This peculiar legacy of viewing the nonnormative, not simply as inferior or crazy, but as prior in time to the normative, lives on in contemporary psychoanalysis. Deconstruction of social evolutionism and of its shameful roots in colonial anthropology is vital for critiquing subtle yet pervasive prejudices of all kinds (including, of course, biphobia) that remain hard-wired into psychoanalytic theory.
Unlike other analytic ideas about sexuality, which have undergone profound changes in the recent decades under the influences of feminism, gender studies and queer theory, the concept of bisexuality has received little critical attention. Although the Freudian concept of universal psychic bisexuality became axiomatic for generations of analytic thinkers, bisexuality as a sexual orientation, identity and lifestyle has, to this day, remained largely outside of the field of analytic ideas, barely visible and barely thinkable.

Remarkably, the psychoanalytic establishment managed to ignore the groundbreaking research of Kinsey and Masters and Johnson, not to mention the work of Fritz Klein or any other writer with a specifically bi agenda. The lack of ripples created in the mainstream psychoanalytic community by the Kinsey reports, which shocked, scandalized and forever changed American society, is particularly staggering, yet not altogether unexplainable. Clinical psychoanalysis of the time was a fairly insular, high-brow discipline jealously guarding itself against intrusions and challenges. Kinsey’s conclusions, based on an enormous sample of 5,300 men, represented a direct threat to a discipline that envisioned itself as a branch of objective medical science, all the while shying away from quantitative empirical research and continuing to derive its ideas about sexuality from a handful of case studies. In the absence of a convincing counterargument, tight-lipped contempt and dignified silence were probably the best strategy.

So, what do analysts have in mind when they speak of bisexuality and what is problematic about the ways this term is used in contemporary analytic theory? The entry in Mijolla’s *International Dictionary of Psychoanalysis* (2005) is telling in this regard. The author informs us that according to the psychoanalytic notion of bisexuality, “all human beings simultaneously possess both masculine and feminine sexual dispositions.” Like a Proustian madeleine, this archaic phrase reminds us of something long forgotten. What is being invoked here—sexual orientation, gender categories, anatomy? We are taken back to the time when the three lived together in blissful harmony.

**LIVING IN THE PAST**

The psychoanalytic tradition of conflating biological sex, gender and object choice has been contested with respect to female and male homosexuality. Burch (1997) pointed out the circularity inherent in such thinking:

a lesbian is masculine-identified because she is a lesbian, and she is a lesbian because she is masculine-identified. Observations of lesbians
Corbett (1993) challenged the idea that gay men are femininely identified and argued that men engaging in receptive anal sex experience themselves as masculine, even while their felt masculinity is different from that which is culturally given. A. Schwartz (1998) went a step further, providing case examples of her lesbian patients, which illustrate the complex interlacing in their psyches of maternal and paternal, feminine and masculine identifications. She contended that though homosexuals are typically more aware than heterosexuals of the complexities of their gender identities, various combinations of same-sex and cross-gender identifications are present in all subjects, regardless of sexual orientation.

With respect to bisexuality, however, no attempts have been made to disentangle gender identity from object choice. Written 35 years ago, Stoller’s (1974) words “few of Freud’s ideas kept their original form as unmodified as ‘bisexuality’” still ring true today (p. 343). Bisexuality as a psychoanalytic concept has not been extracted from the prefeminist, pregender-studies lumping together of sex, gender and sexuality. Curiously out of date with the culture at large, contemporary analytic usages of the term persistently invoke gender. Examples are too numerous to list here; some of the references in the next section, however, powerfully illustrate this point.

WHAT WILL I BE WHEN I GROW UP?

Postulated by Freud as the innate, universal human characteristic, the bedrock of personality and hence of the psychoanalytic theory, bisexuality retained this status for many decades. Analytic authors representing divergent movements within psychoanalysis have remained surprisingly unanimous in their views of bisexuality. Unlike a mature sex/gender role or object choice that constitutes a developmental achievement, it is seen as a primary, undifferentiated condition. Any adult is expected to have consolidated an identity as either a male or a female; ideally, he or she has additionally made the socially valued, unproblematic heterosexual object choice. Although the alternative homosexual object choice was, until recently, seen as a more troublesome type of adjustment, widely associated with immaturity (Dimen, 1991; A. Schwartz, 1998), it clearly represented a higher stage of development than the innately given, infantile bisexuality. To use a culinary analogy, heterosexuality, in this view, may be likened to a cake that tastes just right and homosexuality, to one prematurely taken
out of the oven; bisexuality, to continue with the analogy, is not a cake at all but amorphous dough whose future edibility is as yet undetermined.

References to bisexuality that betray this bias permeate psychoanalytic literature. For example, Bettelheim (1954), who studied “primitive” initiation rites, in which adolescent participants were required to take on masculine and feminine roles, argued that the purpose of such ceremonies was to assist youth in relinquishing the polymorphous perversity of childhood and fully accepting mature, genital, socially prescribed sexual roles. Writing three decades later, Fast (1984) proposed that children started out with a “bisexually overinclusive” (p. 15) gender identity that included masculine and feminine qualities, gradually developing differentiated gender characteristics. She provided clinical examples of “residues of primitive notions of bisexual wholeness” (p. 18) in complicated analytic cases, emphasizing that such were necessarily relinquished in healthy development.

Unlike earlier writers, Fast had the concept of gender, as distinguished from biological sex, at her disposal; nonetheless, she made no distinction between gender and sex, or gender and sexual orientation, in her discussion of bisexuality.

As the acclaimed contemporary classical analyst Joyce McDougall (2000) authoritatively informed us, the progression from infantile bisexuality to mature monosexuality is inevitable and painful:

The obligation to relinquish these instinctual bisexual aims requires a mourning process that is not accomplished with ease. Perhaps one of humankind’s most scandalous narcissistic wounds for our megalomaniac childhood desires is inflicted by the necessity to accept our inescapable monosexuality. (pp. 157–158)

Notice the pairing of instinctual with bisexual in the above quote. Monosexuality emerges as a result of the complex psychological process of mourning, the capacity for which, according to the shared psychoanalytic wisdom, in itself constitutes a developmental accomplishment. Bisexuality is an inborn, biologically based instinct in which everyone is free to partake, including those incapable of mourning: nonhuman animals, infants and the “primitively organized” chronically mentally ill patients.

Given that bisexuality is associated with very early, primordial stages of psychic development—those at which magical thinking predominates—it is hardly surprising that it is often relegated to the realm of fantasy: “In dreams, we are all magical, bisexual and omnipotent” (MacDougall, 1986, p. 215); “the impossibility of having everything accounts for so much misery that the notion of universal bisexual wishes is almost inescapable” (Richards, 2000, p. 38).
The following illustrates how such views affect the actual clinical practice of psychoanalysis. In an article with a revealing title “Gender and Sexual Orientation in the Age of Postmodernism: The Plight of The Perplexed Clinician,” Stephen Mitchell (1996), a pioneer in relational psychoanalysis, reflected on the difficulties a contemporary analyst faced when sitting with patients who were unsure about their sexual orientation. As an intersubjectivist, the author decisively rejected the classical notion of analytic neutrality as unattainable and emphasized the ongoing impact on the analysand of the analyst’s personal biases. In a case vignette, Mitchell reported, with extraordinary openness, on his process of critically examining his own biases as they came up in reaction to an analysand’s sexual exploration. As the patient, who was erotically responsive to men and women, dreaded the idea that he might be gay and wished for the analyst to reassure him that he was not, the latter felt torn:

Would helping him come to terms with a gay life represent a helpful avoidance of vestiges of homophobia in me or a righteous conformity with what is now politically correct? Would helping him adjust to heterosexuality represent my own heterophilia and a collusion with his homophobia or respect for what he wanted for himself? But patients sometimes want things for themselves that are terribly self-destructive. (p. 69)

Finally, the analyst decides to make an interpretation that is not intended to propel the patient in either direction but rather, to reflect the current state of events. He suggests that in ruminating between heterosexuality and homosexuality the patient is, in fact, choosing asexuality, “which was itself a possible, viable life course” (p. 69). Although the earnestness of Mitchell’s self-examination and his willingness to consider multiple possibilities are admirable, it is striking that a sexually active patient’s reluctance to choose between homo- and heterosexuality was conceptualized as his choosing asexuality rather than bisexuality, neither rather than both. What we read between the lines of the vignette is that this open-minded, gay-friendly and well-meaning analyst subscribed to the view of bisexuality as an immature, undifferentiated, pregenital condition to be resolved on the path to adult sexuality. Unlike asexuality, it was not, for him, a “possible, viable life course”.

**HYSTÉRIA: A WARPED MIRROR**

On a slightly more disturbing note, the psychoanalytic concept of bisexuality is subtly yet inextricably linked to the problem of hysteria. Attributed
by the Greeks to the upward wandering of the uterus in the woman’s body and seen in medieval Europe as a result of humoral imbalance (Foucault, 1965), hysteria became the domain of psychiatry in the late 19th century, after it was studied by the eminent French neurologist Charcot.

Freud’s career began with the study of hysteria, and it was not too long before he discovered the “bisexual nature of hysterical symptoms” (Freud, 1908/1955a, p. 165). Albeit a universal phenomenon, bisexuality was particularly easy to observe in psychoneuroses, he wrote in “Hysterical Fantasies and their Relation to Bisexuality.” What hysterical symptoms expressed was the masculine sexual fantasy on one hand and the feminine on the other. Their bisexual nature made the analysis of hysterics difficult, as once the sexual meaning of a symptom had been resolved, the symptom sustained itself by the complimentary sexual meaning: one belonging to the opposite sex (Freud, 1908/1955a).

Freud’s ideas about hysteria were further developed by the influential French psychoanalyst Jacques Lacan. For Lacan, the hysteric remained forever preoccupied with the question of his or her own sexual position. “Am I a man or a woman?” was the question that defined hysteria. Occupying the subject position traditionally associated with femininity in Western culture, the hysteric dissolved herself in the desire of her chosen “master,” whom she valorized. At the same time, womanhood, for an hysteric, remained an impenetrable mystery. Whether female or male, the hysteric experienced femininity as “other,” yearning to understand what it meant to be a woman yet never obtaining a satisfactory answer (Nasio, 1998).

Having disappeared from mainstream psychiatric diagnostic systems by late 20th century, the clinical diagnosis of hysteria made its comeback in the *Psychodynamic Diagnostic Manual*, published in 2006 by the Alliance of Psychoanalytic Associations. The *PDM*, as it has come to be known, reestablishes the link between hysteria and a concern about one’s gender, defining patients with “unconscious gender preoccupations” (PDM Task Force, 2006, p. 60) as suffering from hysterical personality disorders. The central feature of such disorders, according to the *PDM*, is viewing oneself as deficient based on one’s gender while attributing ideal qualities to the “opposite” gender. The authors specify that, unlike a transgendered person, a hysterical “accepts his or her biological gender” (p. 60). Unconsciously, however, one’s “biological gender” (whatever this phrase might mean!) is disliked (PDM Task Force).

Given the persistent psychoanalytic tendency to conflate biological sex, gender and sexual orientation—particularly with respect to bisexuality—analytic formulation concerning people with an ambiguous or disharmonious gender identity inevitably also imply those who are dually attracted (i.e., who fit the current cultural definition of bisexuality). With the majority of bisexuals, variously represented as asexual (like Mitchell’s
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patient), homosexual or perverse, having been rendered invisible in the
psychoanalytic discourse, hysterics are the only ones whose “bisexuality”
is magnified in a grotesque, ugly and unappetizing way. Hysteria thus be-
comes a warped mirror in which we see ourselves reflected as monsters,
and that is only funny up to a point.

FEMINIST USES

In the 1990s, a trend emerged among analysts with feminist sensibilities
to employ the concept of bisexuality in the service of loosening polarized
gender norms and expanding the range of acceptable attitudes and behav-
iors, particularly for women. In this body of work, bisexuality came to
represent cross-gender identifications that were formed in early childhood
and, though later disavowed, could still be accessed in adulthood via ana-
lytic work. The presence in the psyche of these “bisexual” identifications
was used to ground the possibility of gender-atypical mental qualities and
activities; for example, they made it possible for a woman to exhibit the tra-
ditionally masculine characteristics of competitiveness and assertiveness
(Bassin, 1996; Elise, 1997, 1998; Stimmel, 1996). Although representing
“bisexuality” (which in this literature had been extracted from the domain
of sexuality and placed exclusively in the domain of gender) as healthy and
useful rather than pathological, authors urging for the reactivation of pre-
Oedipal bisexual identifications in adult analysis helped further strengthen
the already-too-strong association between bisexuality and unrelinquished
childhood.

A rare exception to the current of exiling bisexuality into prehistorical
past, Young-Bruehl (2001) problematized the notion of early bisexuality.
Her overview of the recent developments in the biological study of sex
suggests that even, or perhaps especially, essentialist researchers are now
finding it difficult to pinpoint the core determinants of either male or fe-
male sex. Should one be judged as male or female based on one’s internal
reproductive structures, external sexual organs, chromosomal makeup, hor-
monal levels or the type of gonads one has? Furthermore, it is recognized
that some of these factors change and affect the organism differently over
the course of its lifetime. With the very concept of biological sex rapidly
disintegrating into multiple loosely related variables, the notion of biolog-
ical or innate bisexuality seems difficult to sustain. Implicitly suggesting
that this notion may have reached a conceptual dead-end, Young-Bruehl
(2001) proposed, instead, a new area of focus: the study of the bisexuality
of the patient’s objects, which in her view invariably incorporate traits
and characteristics from two or more sources, such as the mother, father
and siblings. The object chosen always contains elements of maternal and
paternal objects; hence, it is always bisexual. Bisexuality of his or her chosen object—namely, how this object integrates its masculine and feminine qualities—is highly important to the chooser. Although innovative in other respects, Young-Bruehl’s theoretical construction uses bisexuality primarily as a gender category, thus helping reify the masculine–feminine split as well as minimize the significance of bisexual practice.

Layton (2000) likewise questioned the relationship between bisexuality and pre-Oedipality. She challenges assumptions underlying the notion of universal pre-Oedipal bisexuality, namely, that most mental attitudes and behaviors can be classified as either feminine or masculine, that in the realm of psychic identification, paternal is always synonymous to masculine and maternal, to feminine, and that metaphors derived from genital anatomy and heterosexual intercourse can be helpful in illuminating unconscious motivations for nonsexual activities. Is a little girl actively exploring her environment engaging in a masculine activity, thus being bisexual, or is her behavior not masculine until labeled thus by a theorist who equates activity with masculinity? Is a female child flirting with her mother acting out her paternal—hence masculine—identification, or is there a possibility of mother–daughter eroticism that does not entail a masculine identification on the part of either? Is it useful to invoke masculine identifications to normalize qualities such as curiosity, assertiveness and competitiveness in women? Layton maintained that the idea of pre-Oedipal bisexuality helps naturalize the sociocultural phenomena of gender splitting and gender inequality by invoking gender identifications to explain attributes that are not inherently gendered. In addition, she takes a stand against using bisexuality exclusively as a gender category while ignoring bisexual object choice, arguing that by doing so, analysts collude with the pervasive cultural trend of rendering bisexual desire and practice invisible.

**PSYCHOANALYSIS AND QUEER THEORY**

Queer theory descended from lesbian/gay studies, as well as from feminist critiques of compulsory heterosexuality and patriarchal gender relations (Jagose, 1996). According to Kassoff (2004), “queer theory highlights the way individual sexual experience has been marginalized by the dominant narrative of heterosexuality, imposed in part historically by psychoanalysis” (p. 160). Queer theorists work to undermine metanarratives of sexuality, demonstrating that all sexual identities are constructed in reference to each other and are therefore neither monolithic nor permanent. In the words of E. Sedgwick (cited in Kassoff), “queer can refer to: the open mesh of possibilities, gaps, overlaps, dissonances and resonances, lapses and excesses of meaning when the constituent elements of anyone’s gender, of
anyone’s sexually, aren’t made or can’t be made to signify monolithically” (p. 162).

Psychoanalysis and queer theory have interacted and influenced each other in a variety of ways. Numerous queer theorists have gone back to Freud’s original texts, mining them for subversive ideas and emphasizing the “queer”—deregulatory, destabilizing—potential of his theory. In turn, some psychoanalysts—particularly those affiliated with the contemporary relational school—showed great interest in queer theory.

In the 1990s, psychoanalytic practitioners committed to a postmodern queer perspective began to voice their views on the pages of certain analytic journals, notably Gender and Psychoanalysis and Psychoanalytic Dialogues. Building on the earlier feminist critiques, these writers called for radical investigation of the classical psychoanalytic concepts pertaining to gender and sexuality, including penis envy, Oedipal conflicts, castration anxiety, the primal scene and psychosexual stages.

Unlike the more conservative relational theorists who argue that classical concepts are central to psychoanalysis and propose various redefinitions that would render them more inclusive (e.g., it has been suggested that penis envy and castration anxiety could be understood in a symbolic, rather than literal sense and that Oedipal configurations could incorporate same-sex parenting couples), psychoanalytic queer theorists insist that the very use of such concepts reinforces phallocentric, heteronormative notions of sexuality. Furthermore, authors with a queer sensibility are interested in centering gender as the structure organizing eroticism, and in divorcing desire from reproduction. They critique linear developmental models of sexual development on account of their framing certain sexualities as more mature than others. By means of such radical revisioning, queer theorists in psychoanalysis as in other fields hope to create space for new, imaginative, alternative sexual possibilities, on the cultural and the individual levels (Stack, 1999).

**NOT QUEER ENOUGH**

Although queer theory emphasizes the fluidity of human sexuality and in certain ways establishes fluid eroticism as an ideal (Smith, 2002; Stack, 1999), the tendency in queer theory in general, and in queer-theory-inspired psychoanalytic writing in particular, is to give at best a cursory notice to bisexuality as a sexual identity or lifestyle (Hemmings, Eadie, James, & Young, cited in Angelides, 2001).

The reasons for bypassing bisexuality on the theoretical path from rigidity to fluidity are multiple. Critical of the regulatory role traditional heteronormative concepts have played, queer theorists are wary of
postulating alternative sexual norms or extolling specific sexual identities and practices. In addition, some of these thinkers see it as their priority to develop ways of thinking about sexuality that do not rely on gender. Quite aside of such philosophical considerations, some queer theorists may, paradoxically, subscribe to a binary view of sexuality in which the heterosexual–homosexual pole has been replaced with a similarly categorical juxtaposition between having and not having a sexual orientation (Angelides, 2001). In other words, they may imagine an abstract ideal of complete erotic fluidity as the only alternative to the limitations of monosexuality.

**WHAT IS TO BE DONE?**

Contemporary psychoanalytic notions of bisexuality continue to rely on a number of grossly outdated theoretical assumptions, which may be summarized as follows: (1) biological sex, gender and object choice imply each other and are virtually synonymous; (2) sexuality develops in a linear fashion, from the undifferentiated, infantile bi-sexuality to a differentiated, mature mono-sexuality; and (3) disharmonious gender identity signifies psychopathology. Unlike the psychoanalytic ideas about homosexuality, which have been subjected to extensive critique within the psychoanalytic establishment, the concept of bisexuality is used in roughly the same ways today as it was in Freud’s lifetime.

In addition to being rooted in the views of sexuality no longer held true in Western culture, the psychoanalytic concept of bisexuality is overly theoretical; postulated as a universal, essential human quality, it is quite removed from the lived experiences of bisexual people. Although the role of bisexuality as the bedrock of psychoanalytic theory remains unquestioned, there exists “relatively little analytic data on bisexuality as behavior and lifestyle” (Richards, 2000, p. 38). And unfortunately, the contemporary blends of psychoanalysis and queer theory are no panacea, as authors writing from that perspective tend, on their quest for sexual fluidity, to omit bisexuality altogether.

The current situation with regards to psychoanalytic theorizing on bisexuality is reminiscent of what happened earlier with homosexuality: until a few decades ago, heterosexual analysts were the ones writing about homosexuality, of which they had no firsthand knowledge, while those experiencing homosexual lifestyles had no voice, as they were either barred from admission into psychoanalytic institutes or had to remain closeted within them. It was only when gay- and lesbian-identified analysts were finally able to voice their ideas that the questioning of inaccurate and pathologizing psychoanalytic notions of homosexuality could begin.
Because the bisexual community is developing and exerting its influence on the culture at large differently from the gay community, it should not be expected that the same processes will occur. Nonetheless, to initiate the process of change in the psychoanalytic thinking on bisexuality, it is vital that bi-identified analytic practitioners make themselves heard, critiquing the theory on its own premises and offering viable alternative conceptualizations.

What could such alternative conceptualizations look like? First, I suggest that the experience-distant (Kohut, 1971) theorizing on bisexuality that currently dominates psychoanalytic theory needs to be replaced with experience-near theorizing. In experience-near theories, individuals’ subjective experiences are taken as the starting point, and theoretical concepts are developed in an effort to best capture these experiences. To counteract the century-old tradition of relegating bisexuality into the mythical past (the first years of life), experience-near theorizing should focus on later experiences, which can be clearly remembered rather than deduced.

Second, bisexuality research produced outside of psychoanalysis in psychology and social sciences needs to be inserted into psychoanalytic theory and rearticulated in psychoanalytic terms. It is through its distrust of and avoidance of contact with other disciplines that psychoanalysis has managed to preserve its outdated assumptions about bisexuality. To initiate a conceptual revision within the field, disciplinary boundaries need to be loosened.

Third, queer theory should be used alongside the experience-near theory of bisexuality, for the two have an untapped potential to complement each other. While queer theory is indispensable for deconstructing heteronormative conceptions of gender and sexuality, thereby clearing up space for new ways of thinking, bisexuality, as an embodied, grounded practice can be used to fill up some of that space. While queer theory skillfully articulates what is wrong with heteronormativity, experience-near theory of bisexuality can be used to construct alternative ways of being. Through these interventions, bisexuality can be reinstated at the center of psychoanalytic theory—this time, not as a vague archaic concept but as a transformative practice.

In the meantime, psychoanalytically oriented bi-friendly clinicians and writers are advised to adapt a critical stance toward psychoanalytic ideas about bisexuality and make use of bisexuality research produced in other fields.

NOTES

1. Arguably, it is precisely due to its overinclusiveness that bisexuality claimed such an enormous explanatory power in Freud’s theory. It is because humans were fundamentally bisexual that their
unconscious desires were at odds with their consciously professed motivations. A man may consciously strive for success—yet his unconscious feminine yearning to submit to his boss gets in the way. A woman may see herself as a loyal, caring wife, yet at the bottom of her heart, she is tormented by the masculine feelings of rivalry with her husband. Because of universal bisexuality, psychoanalysis could be only partially effective in allaying man’s misery, for, “torn between conflicting needs, he’s bound to fail if he succeeds” (Auden, 1991, p. 213).

2. Classical analysts are orthodox Freudians. Of all the multiple schools of psychoanalysis, they are considered to be the most conservative on a variety of issues, including gender and sexuality.

3. Intersubjectivity in psychoanalytic theory refers to the view that meaning in the psychoanalytic encounter is derived from the interaction between the analyst and the patient, as opposed to the classical notion of an analyst as an expert on the patient’s mental life.

4. In the psychoanalytic theory of object relations, objects is a technical term referring to an individual’s unconscious ideas about people that are formed based on early-childhood experiences.

REFERENCES


