

Historicizing the Emergence of Sexual Freedom: The Medical Knowledge of Psychiatry and the Scientific Power of Sexology, 1880-1920

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Abstract:

This paper develops an historical analysis of the turn-of-the-twentieth-century discourse of sexology that accounts for its heterogeneity, attending to the complex interactions and distinctions between medicine and science. Between 1880 and 1920, I argue, the conceptual possibilities for the articulation of a modern notion of sexual freedom emerged from two stages of historical development: first, the psychiatric implantation of sexual psychopathology around the 1880s and 1890s that gave sexuality for the first time in history both a psychological and a pathological character under the name of medicine; and second, the subsequent sexological impulse in the 1900s and 1910s to deploy the existing vocabularies of perverse sexuality in a new system of normalizing and liberalizing scholarly endeavors under the name of science. It was not until this transition from the "psychiatrization" of sex to a more general "scientification" of sex around the turn of the twentieth century did people gradually adopt and participate in the making of a modern notion of sexual freedom that demarcated sexual desire from heterosexual obligations. This new sense of sexual self, positioned in a constant political struggle with its cultural legitimacy and intelligibility, would remain central to the concept of sexual freedom throughout the rest of the century.

Introduction¹

1 Historians have retrospectively grouped the scientists and medical doctors who studied and wrote about sexuality dating from the late nineteenth century to the early twentieth century under the general rubric of "sexologists." Many scholars have gone a step further and interpreted these sexologists' assignment of pathological meanings to non-heteronormative erotic desires merely as a one-way function of medical authority. Although there is some validity to this popular strand of historical interpretation, it is nonetheless an overly simplistic perspective that fails to acknowledge the expert heterogeneity within the sexological discourse itself. Based on my review of the existing body of literature in the history of sexuality, not a single author adequately differentiates and analyzes the parameters of science and medicine in turn-of-the-twentieth-century sexology.² Historians of sexuality who have

¹ The author wishes to thank Elizabeth Lunbeck and especially Alan S. Yang for their careful and insightful comments on earlier versions of this research article, which is a slightly revised version of an earlier paper that first appeared under the same title in the *Journal of the North Carolina Association of Historians*, vol. 16 (2008): 35-76

² I am referring to an extensive body of scholarship that analyzes the writings of the early sexologists without distinguishing "medicine" from "science" in a sufficiently explicit manner. Most historians, for example, interpret Richard v. Krafft-Ebing's degenerationist view of homosexuality the same way they interpret Havelock Ellis' writings on sexual inversion, and it is my intention in the following pages to demonstrate the problem with this de-contextualized method of analyzing historical sources. Oftentimes, historians erroneously characterize the writings of the turn-of-the-twentieth-century sexologists merely as a "medical" discourse. I will show that it is more correct to identify the work of some sexologists as constituting a "scientific" discourse, even if they

written about the sexologists to date, therefore, have risked leaving unexamined critical tensions and issues of historicism that exist at the intersections of medicine and science in the history of sexology.³

2 In order to develop a historical analysis that attends to the complex interactions and distinctions between medicine and science, I divide the early sexologists into two waves, acknowledging that there remain exceptions to this strategic chronological organization.⁴ The first wave includes doctors, all of whom specialized in mental diseases and published mostly in the last two decades of the nineteenth century—such as psychiatrists Richard von Krafft-Ebing, Albert Moll, and August Forel. A careful contextualization of their writings in the history of medicine reveals that their intention in categorizing, labeling, and theorizing about sex was more about establishing the autonomy of psychiatry (away from neurology in particular) within the larger medical profession, rather than presenting themselves as pioneers of an entirely new scientific discipline of sexuality.⁵ In addition, while most historians of medicine have attributed the increasing prevalence of psychoanalytic practice among post-

received medical training. For the body of historical scholarship that I am challenging, see Angelides; Banner, esp. pp. 118-23; Bland and Doan; Bullough; Chauncey 1989, 1994; Crozier 2000; D'Emilio and Freedman, esp. pp. 171-235; Dixon 1997, 2001; Duggan 1993, 2000, esp. chap. 6; Faderman, 1978, 1981, 1992; Garber; Greenburg, esp. pp. 397-433; Hatheway; Katz, esp. pp. 137-74; Newton; Rosario 1997, 2002; Smith-Rosenberg, esp. pp. 245-96; Somerville; Terry; Weeks, 1977, 1981, esp. pp. 96-121, and 1985, esp. pp. 61-95; Eder, Hall, and Kemka. For more literary-oriented accounts, which are even less sensitive to the distinction between medicine and science, see, for example, Breger; Doan and Prosser; Halberstam; Noble; Prosser. More sensitive approaches can be found in Conrad and Schneider, pp. 172-214; Crozier 2008; Hansen; Herm; Schmidt; and Sengoopta.

³ See n. 2 above. The only exception that I have come across is an endnote in Lunbeck. Lunbeck shows how historians have tended to overlook sociologically-oriented sexual scientists and only rely on the writings of medical experts, or vice versa, when discussing sexologists' view of homosexuality. Thus, in comparison to the scholars cited above, Lunbeck is much more attuned to the delicate boundaries of science and medicine in sexology. See Lunbeck, pp. 410-411, n. 2. Although Oosterhuis does a promising job in contextualizing Krafft-Ebing's work against a historical background of psychiatric professionalization, by focusing on medicine alone Oosterhuis also does not explicitly acknowledge the complicated relationships between science and medicine in turn-of-the-twentieth-century sexology. Likewise, by focusing on science alone LeVay is similarly a one-sided account. Sengoopta might be the only other exception that adequately approaches the relation between science and medicine in fin-de-siècle central Europe, but Sengoopta focuses on Hirschfeld and primarily on the ways his biomedical theory of homosexuality interacted with Eugen Steinach's work. It is my intention in these pages to emphasize the sexological *enterprises* of Hirschfeld and other early twentieth-century sexual scientists (rather than their *theories* of sexuality), and, accordingly, to illuminate the differences between this "scientific" undertaking from the late nineteenth-century "medical" discourse of sexual pathologization.

⁴ I have intentionally excluded Freud from my analysis primarily because Freud had never identified himself as a sexologist: he was trained as a neurologist, became the founding father of psychoanalysis, and was ambitious enough to see his project as always larger than a systematic scientific study of sexuality. Though many historians regard Freud as one of the most influential turn-of-the-twentieth-century sexologists, others have made the careful differentiation. C.f. Zaretsky; Sulloway, chap. 8.

⁵ The most notable exception to my periodization is Albert Moll, whom I group under the first-wave sexologists in this paper. Moll was actually very much involved in the second wave sexological movement, and, next to Hirschfeld and Iwan Bloch, was considered by many as one of the "founding fathers" of modern sexual science. By the early twentieth century, he became an explicit opponent of Freud and Hirschfeld and established the International Society for Sex Research in 1913 as a rival organization to Hirschfeld and Bloch's Medical Society for Sexology. It should be noted that my periodization does not completely ignore the impact of non-medical sexological authors, such as John Addington Symonds and Edward Carpenter. Their influences take a particular presence in the second stage of my periodization: see section 3 below on "sexological impulse, 1900-1920."

1920s psychiatrists to Freud's turn-of-the-century legacy, my analysis provides an alternative explanation: the new subject of therapeutic intervention, namely sexual psychopathology, especially following Krafft-Ebing's publication of *Psychopathia Sexualis* in 1886, both reflected and induced the decline in biological psychiatry and the rise in psychiatrists' psychogenetic emphases from 1880 to 1920.⁶

3 Moreover, following the birth of this new topic of psychiatric intervention, to quote Michel Foucault (1994), "What is modified...is the more general arrangement of knowledge that determines the reciprocal positions and the connection between the one who must know and that which is to be known...It is not a matter of the same game, somewhat improved, but of a quite different game" (137). I would stress that psychiatrists came to this "quite different game" in and through their attempt at improving their old game. Subsequently, what took shape was an entirely novel organization of the relationship between the psychiatrist ("the one who must know") and their new object of clinical knowledge: sexual perversion ("that which is to be known"). Without this "recasting at the level of epistemic knowledge," through which sexuality acquired a psychopathological definitional status for the first time, and after which the separation between one's sexuality from one's sense of self was no longer tenable, the modern notion of sexual freedom would not have emerged (Foucault 1994, 137).

4 The second generation of sexologists consists of sex reformers, all of whom were trained in medicine, frequently voiced anti-pathological claims about variations in human sexuality, and published most extensively in the first two decades of the twentieth century—including Iwan Bloch, Henry Havelock Ellis, and Magnus Hirschfeld. These sexologists' advocacy of sexual liberalism, I propose, can be viewed as a sequential reaction to the psychopathological model of sexuality propounded by their psychiatric predecessors. By forming a professional network of sexology through, for example, the founding of disciplinary journals, learned societies, and conference meetings—something that the previous generation of psychiatrists had not done, Hirschfeld and other second-wave sexual scientists hoped not only to expand sexology beyond medicine, but more importantly to achieve social reform through sexual science itself (Crozier 2001). It was through the effort of these sexologists that we can trace the first sign of a modern notion of sexual freedom.⁷

⁶ On Freudian legacy, see, for example, Ackerknecht 1968, chap. 10, and 1982, p. 207; Alexander and Selesnick, pp. 181-265; Duffin, pp. 286-8; Harrington, p. 252; Kennedy, p. 401; Lunbeck; Millon, chap. 7; Porter 1999, pp. 514-9, and 2002, pp. 183-98; Shorter, chap. 5.

⁷ One should note that, apart from Moll, none of the earlier psychiatrists who wrote about sexual pathology from a medical perspective exclusively participated in this "new generation" of sexology, the formation of which largely depended on something similar to the three technologies of scientific disciplinization that Steven Shapin and Simon Schaffer referred to in their famous work on the debate between Thomas Hobbes and Robert Boyle

5 By a modern notion of sexual freedom, I simply mean the ability to conceive of, articulate, and enact a sense of sexual self-definition and self-agency without subsuming sexual desire under heterosexual obligations (such as marriage and procreation). This definition fits nicely with what historian Sharon Ullman has called the "modernization of sexuality," by which she means

the twentieth-century redefinition of sexuality as a means of self-realization rooted in pleasure and unconnected to reproduction. A new value system revolving around desire and sexual fulfillment became prominent; sexual discourse emphatically entered the public realm, and the entire framework for sexual understanding came loose from religious and proscriptive moorings. This dramatic revisioning made sexuality central to personal identity and even to the definition of a successful life. (3)

In creating an unprecedented type of discourse about sexual perversion towards the end of the nineteenth century, the first-wave psychiatrists entered a fresh realm of medical knowledge in which they claimed for themselves exclusive expertise. But if we take Michel Foucault's contention that "where there is power, there is resistance" seriously, this new technique of medical surveillance facilitated the possibility for successive sexologists to appropriate the language of sexual perversion in a "reverse discourse" that would then displace its initial pathological meanings by making new claims for its normalcy (Foucault 1990, 95 and 101). Between 1880 and 1920, I argue, sexual freedom emerged from two fundamental stages of historical periodization: first, the psychiatric implantation of sexual psychopathology around the 1880s and 1890s that gave sexuality for the first time in history both a psychological and a pathological character under the name of medicine; and second, the subsequent sexological impulse in the 1900s and 1910s to deploy the existing notions of perverse sexuality in a new system of normalizing and liberalizing scholarly endeavors under the name of science.

Psychiatric Implantation: 1880-1900

6 In the nineteenth century, psychiatry was the youngest of the major branches of medicine, primarily because its development largely depended on the Enlightenment effort to place mental illness back into the hands of medical men (Ackerknecht 1982, 204). The French physician Philippe Pinel anchored this effort with the publication of his *Medico-Philosophical Treatise on Mental Alienation or Mania* (1801), in which he advocated reducing mechanical restraints in mental asylums, producing the famous image of Pinel "striking the chains off the

over the air pump (namely, a material technology, a literary technology, and a social technology). For the specific definition of each as used in the context of the debate, see Shapin and Schaffar, pp. 25-6.

mad."⁸ According to historians of medicine such as Erwin Ackerknecht, French romantic psychiatry dominated the first half of the nineteenth century, followed by German somatic psychiatry dominating the latter half.⁹ As this transition unfolded, the boundary between psychiatry and neurology became more defined after the 1880s, when the task of psychiatrists gradually evolved to dealing with diseases unexplainable or untreatable by neurologists (Clark; Jacyna). Eventually, a decline in somatic psychiatry and an increasing level of interest in psychogenic explanations of mental disorders distinguished the psychiatric profession at the beginning of the twentieth century, when Kraepelin's nosological treatise and Freud's psychoanalytic writings began to disseminate broadly on both sides of the Atlantic.

7 Reacting to the early nineteenth-century "Romantic" character of the mental health profession, most psychiatrists between 1850 and 1880 attributed mental illness to physiological causes, particularly anatomical abnormality in the brain. In the opening chapter of his influential text *Mental Pathology and Therapeutics*, German pioneering neuropsychiatrist Wilhelm Griesinger, founder of the *Archiv für Psychiatrie und Nervenkrankheiten* and the Society for Medical Psychology, proclaimed that "the brain alone can be the seat of normal and abnormal mental action" and that "the normal state of the mental process depends on the integrity of this organ" (3). Similarly, the eminent psychiatrist Henry Maudsley, who was as highly regarded in England as Griesinger in Germany, also considered mental pathology as a somatic illness, as he explicitly expressed in *Body and Mind* (1870): "The physiology and the pathology of mind are two branches of one science; and he who studies the one must, if he would work wisely and well, study the other also" (2).¹⁰

8 In Vienna, the work of Theodore Meynert, teacher of Sigmund Freud, emblemized the contemporary psychiatric trend to interpret diseases of the mind as structural pathologies of the brain. Culminating in his famous *Psychiatry: A Clinical Treatise on Diseases of the Fore-Brain*, Meynert's life-long commitment to understanding mental states as epiphenomena of neurophysiological processes was evident in his explanation of people's "individuality":

The innervation centre for the third nerve is anatomically connected with a number of mutually associated centres...distributed over the entire cortical area [. . .]. The sum of these "centres" constitutes the "individuality," the "ego" of abstract-psychologists[. . .] This unequal activity of the fore-brain, constituting individuality, varies as regards contents and degree with each person; it is designated also as the

⁸ See e.g. Goldstein, chap. 3; Zilboorg and Henry, chap. 8. In fact, historians debate over the role of the asylum "mad-doctors" as humane moral reformers or authorities who were more concerned with social control than disease treatment. This somewhat dated historiographical debate, however, rests outside the scope of this paper. For a recent set of essays that reviews and attempts to open up new research directions in the history of psychiatry, see Scull.

⁹ Ackerknecht 1968, 1982, p. 205; and Goldstein. Alternatively, Shorter, chap. 3, maintains that German psychiatry strictly dominated the entire 19th century.

¹⁰ On Maudsley's emphasis on the somatic aspects of mental organization, see also Maudsley 1902, 1916.

character of the individual. It has been justly observed, if the character (individuality) of a person were entirely known we would be able to predict the thoughts and deeds of such an individual, however complicated they might be.(167-8, emphasis original)

Based on his histopathological studies, Meynert not only identified specific physiological processes in the forebrain as the corresponding cerebral features of "individuality," he even hinted the possibility of predicting an individual's thoughts and behavior quantitatively, if sufficient data were gathered. Such an attempt to measure and quantify human thoughts, while locating the "seat of human action" in neuroanatomy, enabled Meynert to postulate that normal human behavior followed a regular set of laws:

The idea of *individuality* is an artificial one, though valuable from a practical point of view, for the degree of intensity by which these images and their connections adhere to this conception will not admit of accurate measurement; and it is plainly impossible to say that at a certain intensity a presentation becomes a factor of the *ego*, and not yet at another. There is but one safe stand to take on this question, and that is to attribute to the ill-defined conception of individuality only those presentations which, as soon as the "character" of an individual is known, will enable us to predict his deeds; whence it follows that the deeds of the individual obey certain laws. (172, emphasis original)

Even though individuality was not necessarily an organic concept, for Meynert, it could still be valuable, as long as it allowed mental scientists and clinicians to systematize the relationship between psychological functions and neuroanatomical pathways.

9 As the nineteenth century reached its final decade, however, psychiatrists had yet to establish enough convincing connections between mental diseases and somatic causes, which hindered the profession's drive to advance the legitimacy and autonomy of their field of specialization in medicine (Ackerknecht 1968, 82; Duffin, 285). As such, psychiatrists' renewed interest and investment in dynamically-oriented approaches appeared around the same time. Echoing the earlier Romantic physicians' understandings of mental illness, this new wave of psychogenically-inclined psychiatrists began to shift their emphasis from bodily to psychological causes in explaining mental disorder. One of the key figures responsible for this transition was Emil Kraepelin, who combined Karl L. Kahlbaum's *catatonia*, Bénédict A. Morel's *démence précoce*, and Ewald Hecker's *hebephrenia* into the single category *dementia praecox* in the fourth edition (1893) of his textbook *Clinical Psychiatry*, the precursor to the modern *Diagnostic and Statistical Manual of Mental Disorders* published by the American Psychiatric Association. In his *Lectures on Clinical Psychiatry* (1917), Kraepelin reminded his audience the mental, non-biologic roots of this particular disease of the mind:

[the patient] occasionally composes a letter to the doctor, expressing all kinds of distorted, half-formed ideas, with a peculiar and silly play on words, in very fair style,

but with little connection...These scraps of writings, as well as his statements that he is pondering over the world or putting himself together a moral philosophy, leave no doubt that besides the emotional barrenness, there is also a high degree of *weakness of judgment* and *flightiness*, although the pure memory has suffered little, if at all. We have a *mental and emotional infirmity* to deal with, which reminds us only outwardly of the states of depression previously described. This infirmity is the incurable outcome of a very common history of disease, to which we will provisionally give the name of *Dementia Praecox*. (23, emphasis original)

"In giving a careful account of dementia praecox, or schizophrenia, as a distinct disease," according to historian Edward Shorter, "Kraepelin had handed psychiatry its most powerful term of the twentieth century" (106). By placing the two types of "functional" psychoses that he had developed—manic depression in addition to schizophrenia—at the top of the psychiatric agenda by 1899, Kraepelin gave birth to a revolutionary current in psychiatry in which psychical explanations of mental illness gradually replaced causal understandings derived from brain anatomical research, the primary focus of earlier nineteenth-century psychiatrists.¹¹

10 It was against this background of professional frustration and therapeutic despair with somaticism, reflecting the unstable footing of psychiatry within the larger profession of medicine at the time, that Meynert's Viennese successor Richard von Krafft-Ebing first published his magnum opus *Psychopathia Sexualis* in 1886.¹² Historians of science, medicine, and sexuality have correctly documented how Krafft-Ebing's description of homosexuality as a diseased neurotic degeneracy had profoundly influenced the way other scientific and medical experts thought about various forms of sexual perversion around the turn of the twentieth century. Most, however, simply stop there and fail to explain why Krafft-Ebing adopted the degeneration theory first posited by the French psychiatrist Bénédict A. Morel, why he was reluctant to abandon the theory altogether even until the end of his career (Oosterhuis 103), and the broader implications of these conscious decisions made on his part with respect to the larger disciplinary contexts of psychiatry and sexology, especially since he was such an acclaimed international figure.¹³ In what follows, I suggest that Krafft-Ebing's intention in publishing his widely read medico-forensic text *Psychopathia Sexualis*, which had undergone at least twelve German editions and two different English translations by the

¹¹ 1899 was the year of publication of the sixth and the first definitive edition of his seminal textbook *Clinical Psychiatry*.

¹² Krafft-Ebing authored a number of significant writings on sexuality before *Psychopathia Sexualis*. See e.g. Krafft-Ebing 1877.

¹³ Oosterhuis' biography of Krafft-Ebing is perhaps the only exception to this generalization. Oosterhuis, however, focuses on the emergence of "sexual identity"; whereas in this paper, I am trying to contextualize Krafft-Ebing's contribution within the larger discourse of early sexology in order to make claims about the emergence of "sexual freedom," beyond "sexual identity." Nonetheless, my work should be viewed as complementing Oosterhuis' work, rather than challenging it.

early 1900s, had three fronts: (1) to legitimate the psychiatric establishment within the larger medical profession; (2) to establish the credibility of psychiatrists and their work; and (3) to demonstrate the kind of scientific progress that such credibility required.

11 Due to the psychiatric profession's vulnerability in the last quarter of the nineteenth century, Krafft-Ebing's publication of *Psychopathia Sexualis* brought a new kind of legitimacy and independency to the psychiatric establishment, and correspondingly expanded its professional authority and cultural status in a novel way. "Before the 1860s," according to historian Harry Oosterhuis, "medical interest in disorderly sexual conduct was intrinsically linked to forensic medicine that focused on criminal acts such as rape and sodomy" (38). Over the course of the nineteenth century, physicians who were interested in sexual deviance changed from describing "mental and nervous disorders [as] the *result* of 'unnatural' acts" to viewing them as the "*cause* of sexual aberrations" (Oosterhuis 43, emphasis original). Being the first exhaustive compilation of different categories of sexual perversion, Krafft-Ebing's masterpiece construed sexual pathology as a realm of medical specialization that belonged exclusively to psychiatrists, particularly those with a forensic interest. Recognizing that the publication of *Psychopathia Sexualis* provided a definitive opportunity for claiming an unprecedented kind of medical specialty and therapeutic authority, psychiatrists across Europe and the United States immediately responded by discussing, supporting, and quoting from this encyclopedic contribution in their own writings. In initiating the proliferation of new medical vocabularies of erotic deviance in the last few decades of the nineteenth century, Krafft-Ebing's monument not only provided psychiatrists a new type of professional identity, competence, and power, but also granted sexuality a mental-pathological characterization for the first time in history.¹⁴

12 In order to promote the legitimacy of their new expertise in sexual psychopathology, and of their status in the medical profession more generally, psychiatrists needed to demonstrate the credibility of such an enterprise. It was under this condition that in explaining homosexuality Krafft-Ebing appropriated the psychiatric theory of degeneration first posited by Morel in *Treatise on the Physical, Intellectual, and Moral Degeneration of Human Species* (1857), the wide circulation of which was further amplified by the appearance of Charles Darwin's *The Origins of Species* two years later; and it was also in this context that Krafft-Ebing's degenerationist interpretation of homosexuality subsequently gained tremendous popular support in both Europe and the United States. As mentioned earlier, most somatic approaches to mental illness failed to yield results that satisfied mental health practitioners

¹⁴ For a list of new sexual vocabularies developed in the final decades of the nineteenth century, see Oosterhuis, pp. 44-5.

near the end of the nineteenth century. Given that cerebral localizations of psychological disorders remained unfruitful, most psychiatrists on both sides of the Atlantic, especially in France, turned to hereditary explanations that resonated with Darwin's evolutionary ideas. This strategic alignment with the highly esteemed, state-of-the-art biological theory enabled mental health experts to secure a more scientific and credible image for their profession.

13 To establish the credibility of their expertise, in turn, required psychiatrists to embody and demonstrate a sense of scientific progress in their work. This effort was evident, for example, in the revision process of Krafft-Ebing's influential volume. In no more than six pages of the seventh edition of *Psychopathia Sexualis* (1892, 225-30), Krafft-Ebing reviewed a small number of etiological theories of homosexuality offered by other experts and posited his own *hypothesis*:

An explanation of congenital contrary sexual feeling may perhaps be found in the fact that it represents a peculiarity bred in descendants, but arising in ancestry. The hereditary factor might be an *acquired* abnormal inclination for the same sex in the ancestors (*v. infra*), found fixed as a congenital abnormal manifestation in the descendants. Since, according to experience, acquired physical and mental peculiarities, not simply improvements, but essentially defects, are transmitted, this hypothesis becomes tenable. Since individuals affected with contrary sexual feeling not infrequently beget children,-at least, they are not absolutely impotent (women never are),-a transmission to descendants is possible. (228, emphasis original)

It is worth emphasizing that in the early editions of his monograph, Krafft-Ebing framed his degeneration theory of homosexuality in a remarkably reserved tone. His "hypothesis" became "tenable" under specific conditions, and the idea that individuals inherited homosexual feelings from their parents was only "possible" at best.

14 By the time the revised and enlarged twelfth edition appeared in 1903, Krafft-Ebing had expanded this section of his text to roughly thirteen pages (1933, 338-50). In addition to presenting case studies shorter in length but greater in numbers throughout his new edition, Krafft-Ebing asserted his degeneration theory of homosexuality more forcefully and supported it more consistently. Under the same section from which the previous quote was cited, he now devoted seven pages to dismiss other explanations of homosexuality that did not fit his degenerationist framework, and the rest of the thirteen pages to make the case that homosexuality was nothing but the manifestation of a hereditary "organic taint."

If the structure of this opinion is continued, the following anthropological and historical facts may be involved:

1. The sexual apparatus consists of (a) the sexual glands and the organs of reproduction; (b) the spinal centres, which act either as a check or a stimulus upon (a); (c) the cerebral regions, in which the psychical processes of the *vita sexualis* are enacted.
2. The tendency of nature in the present stage of evolution is the reproduction of

monosexual individuals, and the law of experience teaches that the cerebral centre is normally developed which corresponds with the sexual glands ("Law of the Sexual Homologous Development").

3. This destruction of antipathic sexuality is at present not yet completed.

4. Besides, a long line of clinical and anthropological facts favour this assumption.

5. These manifestations of inverted sexuality are evidently found only in persons with *organic taint*. (345-7, emphasis original)

Although I have necessarily compressed three pages of text into the above quotation, what I hope to show here is that after eleven revisions of *Psychopathia Sexualis*, Krafft-Ebing had become more stringent with respect to his degenerationist position and invested much more organizational effort in maintaining the claim that homosexuality was a "defect of the natural laws [that] must...be considered as a manifestation of degeneration" (349).

15 Moreover, in the later version of his text, Krafft-Ebing elaborated upon Darwinian evolutionary theory to a significant extent, something that he did not do in the seventh edition. Borrowing Darwinian conceptions allowed Krafft-Ebing to equate homosexuality with evolutionary regression: since homosexual traits blurred the distinction between masculinity and femininity, according to him, homosexual individuals exhibited an unfavorable anatomical and psychological hermaphroditism that resembled the lower end of the evolutionary scale (348). At the same time, Krafft-Ebing reminded his expert readers that "later researches...proceeding on embryological (onto- and phylogenetic) and anthropological lines seem to promise good results" (344). Therefore, situated in a convincing research trajectory, Krafft-Ebing's explanation of homosexuality as a familial degeneration within the Darwinian framework of evolutionary biology represented a more general attempt to render psychiatry as a medical discipline that evidenced scientific progress. By exemplifying elements of scientific advancement, psychiatric specialties such as sexual psychopathology could then be perceived as professionally valid and respectable.

16 After the publication of *Psychopathia Sexualis*, other psychiatrists quickly embraced Krafft-Ebing's degenerationist interpretation of sexual perversions, especially homosexuality. Kraepelin (1915) in his seminal nosological treatise, for instance, stated that "the morbidity of the condition [of contrary sexual instinct] depends not upon impulses which are perverted from the outset, but upon a characteristic tendency originating in a hereditary state of degeneracy" (511). Berlin psychiatrist Albert Moll, whose *The Sexual Life of the Child* (1912 [1909]) was widely disseminated in medical circles, also adopted Krafft-Ebing's degenerationist framework when discussing homosexuality. In his *Perversions of the Sex Instinct* (1931 [1891]), the first medical monograph exclusively devoted to the topic of homosexuality, Moll remarked that "just as in degenerates heredity manifests itself for one in

the form of the idea of persecution, for another in the form of epilepsy, degeneration, in Uranists takes the form of sexual inversion...It is therefore certain, as we have seen, that a great many Uranists are the progeny of families possessing a neuropathic heredity" (149). The endorsement of Krafft-Ebing's familial degenerationist language grounded in a Darwinian conception of evolution was most pronounced in the writings of Swiss psychiatrist August Forel, then the Director of the Insane Asylum in Zurich. According to Forel, "even homosexual love that does not affect minors nor insane persons, is a sign of degeneracy, but produces no offspring and consequently dies out *by means of selection*. We hope, therefore, that this type may be *extinct* some day" (247, emphasis added). Kraepelin, Moll, and Forel thus all agreed with Krafft-Ebing in *principle* how mental health practitioners should approach the clinical problem of homosexuality by using the common language of degeneration, even though they may have differed in their respective *theories* of how degeneration was specifically linked to homosexuality.¹⁵ In exploring a fresh realm of therapeutic intervention, members of the psychiatric community recognized that Krafft-Ebing's degenerationist paradigm provided them a systematic convention, so that by constantly referring to it in their own work, those outside the community—including other medical professionals—would be able to appreciate the internal coherence of psychiatric authority.

17 Because the concept of degeneration provided the psychiatric profession such powerful leverage, Krafft-Ebing rigidly adhered to it until the very end of his career (Oosterhuis 103). And even when other psychiatrists such as Forel and Kraepelin wrote about homosexuality in the first two decades of the twentieth century, they still insisted on citing and applying Krafft-Ebing's degenerationist language (Kraepelin 1915, 511; Forel 247). The emerging new psychiatric discourse of sexual psychopathology towards the end of the nineteenth century, then, entailed two distinct but concomitant commitments: first, the systematic reference to the concept of degeneracy, and second, the systematic investigation of a psychological notion of sexuality that emphasized one's erotic tastes, inclinations, and impulses. While the former signaled the persistence of biological explanations, which was fundamental to pre-1880 psychiatric thought, the latter brought to surface the importance of focusing on the human psyche, which was gradually pushed to the forefront of post-1880

¹⁵ On the distinction between therapeutic principle and therapeutic theory, see Warner, p. 5.

psychiatric thought (and would later completely characterize the approach of psychoanalysts in the 1930s and 1940s).¹⁶

18 It is thus important for historians to interpret medical opinions about sexual pathology between 1880 and 1920 in terms of these two contradictory yet concurrent threads of psychiatric discussion. Writing in 1891, for example, Moll contended that the "seat of sexual inversion" was in the brain, in line with the somatic strand of psychiatric discourse:

The genital sense of the man are in a normal state excited by the image of a woman; in the Uranist the excitation is caused by the idea of a man. In him, the influence of ideas on the sexual urge are consequently misdirected. We are thus led to place the seat of sexual inversion in that place where the ideas awaken the sexual instinct. That is to say according to modern notions of psychology in the central nervous system or more particularly in the brain. (1931, 165-6)

When offering advice on the treatment of homosexuality later on in the book, however, Moll quickly shifted to a position that interpreted homosexuality as an intrinsic psychical problem: "the most ardent champions of the use of medicines are in accord that in the treatment of the Uranist not medicines but psychic means should be used. Inclinations and emotions are overcome not by the use of hydrochloric acid or the juice of the aloe; they should be fought with elements of a psychic order like their own" (199). The underlying tension in Moll's understanding of homosexuality, as if it was biologically caused but should be psychologically cured, could be resolved from the perspective that the entire psychiatric enterprise of medicalizing human sexuality from the 1880s onward fundamentally rested upon the dual-faceted attempt to study sexual behavior as a mental problem but without entirely leaving behind its biological grounding. As such, psychiatrists' effort to legitimate their field in the closing decades of the nineteenth century both reflected and reinforced a *transitional phase* in the history of psychiatry not only in terms of a new topic of investigation, but more importantly in terms of etiological emphasis.

19 To recapitulate briefly, between 1880 and 1920, in hoping to gain a better understanding of sexual deviance specifically and diseases of the mind more generally, psychiatric experts shifted from an emphasis on bodily causes to psychogenic accounts; brain localizations of mental defects slowly lost their appeal and psychical considerations came to the fore. While most historians of medicine have attributed the root of this transition to Freud, I have shown that by turning their attention to sexual perversion, psychiatrists had also created a new platform of professional discourse that played a catalytic role in the

¹⁶ For an account of how psychoanalysis dominated the American psychiatric practice starting especially from the 1930s and 1940s, see, for example, Alexander and Selesnick, pp. 181-265; Shorter, pp. 170-81; Starr, p. 345; and Zaretsky, chap. 11.

transformation of their therapeutic emphasis, while sexuality was for the first time in history interpreted as psycho-pathological in nature. This new psychiatric discourse, originally intended for the medical surveillance, regulation, and control of sexuality, inadvertently constituted a distinct ground for the emergence of a modern notion of sexual freedom.

Sexological Impulse: 1900-1920

20 In compiling and classifying patient case studies of sexual aberration, psychiatrists in the late nineteenth century invented an abundance of medical vocabularies whose pathological meanings could then be reworked by a subsequent generation of experts in the opening decades of the twentieth century. "Sexual inversion," "homosexuality," "sadism," "masochism," and "fetishism" were concepts now to be studied intensively, extensively, and not just medically but more importantly *scientifically*. A second wave of sex scientists, including Iwan Bloch, Havelock Ellis, and Magnus Hirschfeld, represented a group of individuals at the beginning of the twentieth century who published monographs, edited disciplinary journals, founded learned societies, and organized conferences, all devoted to the goal of establishing a comprehensive scientific discipline of human sexuality that incorporated a variety of research methodologies. In this process, they often advocated more liberal attitudes toward both the medical and legal aspects of sexual behavior, directly reflecting their conviction that social reform could be achieved through sexual science.

21 The disciplinary consolidation of sexology began with a group of medical experts in the 1900s who shared a common scholarly goal of studying sex through a combination of scientific approaches. The Berlin physician Iwan Bloch opened his acclaimed *The Sexual Life of Our Time* (1928 [1907]) with the following proclamation:

For more than ten years the author of the present work has been occupied, both theoretically and practically, with the problems of the sexual life, and in his various earlier writings he has regarded these problems, not merely from the point of view of the physician, but also from that of the anthropologist and of the historian of civilization. He is, in fact, convinced that the purely medical consideration of the sexual life, although it must always constitute the nucleus of sexual science, is yet incapable of doing full justice to the many-sided relationships between the sexual and all the other provinces of human life. To do justice to the whole importance of love in the life of the individual and in that of society, and in relation to the evolution of human civilization, this particular branch of inquiry must be treated in its proper subordination as a part of the general science of mankind, which is constituted by a union of all other sciences-of general biology, anthropology and ethnology, philosophy and psychology, the history of literature, and the entire history of civilization. (ix)

What Bloch called for, and claimed his book to represent, was a comprehensive study of human sexuality that drew on various kinds of scientific inquiry, including biological, ethnological, psychological, and historical perspectives. With Bloch's declaration, the birth of modern sexology was now secured.

22 In fact, the British independent scholar Henry Havelock Ellis and the Berlin doctor Magnus Hirschfeld had already published monographs and articles on the subject of homosexuality with a similar aim in mind. Ellis, trained in medicine, authored *Sexual Inversion* (1897)-the second volume of his encyclopedic series *Studies in the Psychology of Sex*-with the initial help of the poet and literary critic John Addington Symonds and subsequent assistance from the socialist romantic writer Edward Carpenter.¹⁷ In the process of writing his book, Ellis integrated the literary and historical information about homosexuality that Symonds and Carpenter had provided with his own medical and psychological insights. Shortly after, in Germany, Hirschfeld sent questionnaires to 3,000 male college students of the Charlottenburger Technische Hochschule in December 1903 and again to 5,721 metal-workers of the German Metal Workers Union in February 1904.¹⁸ Based on this survey method, Hirschfeld reported 1.5 per cent homosexuals and 4.5 per cent bisexuals among the students, and 1.15 per cent homosexuals and 3.19 per cent bisexuals among the metal-workers.¹⁹ In addition to estimating its prevalence, Hirschfeld researched homosexuality through another approach-conducting field work in locales of Berlin's homosexual subculture, the findings of which were documented in his *Berlin's Third Sex* (1904). Clearly, Ellis's collaboration with Symonds and Carpenter, as well as Hirschfeld's employment of statistical and ethnographical research methods, denoted a strong effort to expand the disciplinary boundary of scientific sexology to extend beyond medicine.

23 Likewise, learned societies and disciplinary journals in sexual science were founded by this second generation of sexologists and not by earlier psychiatrists, who were more concerned with legitimizing their field of specialization within the larger medical profession. At his home in Charlottenburg, Hirschfeld formed the first sexological society in history, the Scientific-Humanitarian Committee (SHC), on 15 May 1897. He also managed the editorship of the *Yearbooks for Sexual Intermediaries*, published under the name of SHC from 1899 to 1923, which included articles by a variety of scientists, including biologists, psychoanalysts,

¹⁷ Ellis 1906. The first English edition was published as the first volume of the *Studies* in 1897, the second in 1901 as the second volume. The manuscript was translated into German by Hans Kurella and published in Leipzig in 1896 with J. A. Symonds' name included as the co-author. See Ellis and Symonds.

¹⁸ Charlottenburg is a district in Berlin where Hirschfeld resided:

¹⁹ Hirschfeld, "Das" (1904). Hirschfeld reported these numbers later again in Hirschfeld 2000, pp. 544-5 and 553-7. The first edition of this monograph was published in German in 1914, the second in 1920. These numbers are also cited in LeVay, pp. 25-6; and Wolff, pp. 58-9.

and other physicians, with whom Hirschfeld often shared conflicting theories of homosexuality. His major purpose, though, was to promote professional communications and scientific conversations about problems in human sexuality, especially same-sex desire. Subsequently, the collaboration between Hirschfeld and Bloch, along with other physicians, resulted in the founding of the Medical Society for Sexology and Eugenics in Berlin on 3 February 1913. The founding of this larger and more eminent sexological society also revived the *Journal of Sexual Science*, which Hirschfeld had launched in 1908 by himself as a monthly publication but only lasted for a year, and which was now under the new editorship of Bloch and Albert Eulenburg with an elevated international status. In the summer of the same year that the Medical Society was established, Hirschfeld participated in the International Congress of Physicians organized by the British Medical Association from 6 to 12 August in London. At the Congress, he gave a presentation on hermaphroditic, androgynous, homosexual, and transvestite individuals that brought him immediate worldwide recognition. More importantly, his presence at the convention inspired the births of the first Viennese sexological organization in 1913 and the British Society for the Study of Sex Psychology in 1914.²⁰

24 Having solidified his international standing in the field of sexual science, Hirschfeld did not pause for long before publishing his most definitive monograph on the topic of homosexuality, *The Homosexuality of Men and Women* (2000 [1914]), a meticulously researched piece of scholarship that distinguished him from other sexologists as the most qualified expert on the subject of his time. In revising *Sexual Inversion* for its third and final edition, for instance, Havelock Ellis had to familiarize himself with Hirschfeld's book, which was over 1000 pages in length and written based on 10,000 personal histories of homosexual men and women.²¹ Having read the entire book, Ellis made careful references to Hirschfeld almost fifty times throughout the revised version of *Sexual Inversion*, in sharp contrast to the striking absence of any mentioning of Hirschfeld's work in the previous editions.²² "It is to Hirschfeld," Ellis now commented, "that we owe the chief attempt to gain some notion of the percentage of homosexual persons among the general populations" (1936, 61). Iwan Bloch, too, praised Hirschfeld's *Homosexuality* for its unequalled and authoritative qualities. By this time, as Hirschfeld's biographer Charlotte Wolff has rightly observed, "Nobody could deny

²⁰ For a more detailed biographical account, see Wolff; and Dose.

²¹ On Ellis' updating of his *Studies*, see also Crozier 2000, pp. 456-460.

²² Ellis 1936, pp. 3, 4, 9, 13, 24, 27, 28, 35, 60, 61, 62, 72, 73, 83, 86, 90, 91, 196, 203, 210, 251, 255, 256, 261, 263, 265, 268, 273, 278, 280, 282, 284, 287, 289, 292, 301, 309, 315, 316, 320, 323, 325, 330, 331, 332, 334, 335, 341, and 353. According to my count, Ellis has cited Hirschfeld exactly forty-nine times in this third edition. Cf. Ellis 1906.

that his knowledge of homosexuality was unsurpassed" (173). Five years after the publication of *Homosexuality*, Hirschfeld in 1919 officially opened his renowned Institute for Sexual Science, the very first of its kind in history.²³

25 In this process of formalizing a comprehensive discipline of sexual science, the medical background of Bloch, Ellis, and Hirschfeld provided an opportunity for the pathologizing model of homosexuality initially articulated by first-wave nineteenth-century psychiatrists to be challenged. As John A. Symonds expressed in an 1892 letter to Edward Carpenter regarding his cooperation with Ellis on *Sexual Inversion*, to voice an effective alternative opinion about homosexuality that did not support most psychiatrists' neuropathic perspective at the time required such an opinion to come from a man with certain credentials: "I am so glad that H. Ellis had told you about our project. I never saw him. But I like his way of corresponding on this subject. And I need somebody of medical importance to collaborate with. Alone, I could make but little effect-the effect of an eccentric."²⁴ Since Ellis did not practice medicine, even though he received some medical training, Ellis had no patient case studies to anchor a scientific investigation of homosexuality. As such, the major advantage for Ellis in collaborating with Symonds was precisely that Symonds, himself a homosexual, would be instrumental for gathering homosexual life histories, which Ellis could then use as the data of his scientific analysis (Grosskurth 175-6). Although Symonds passed away long before the project was near completion, Ellis ultimately embraced Symonds' anti-pathological perspective of homosexuality and seriously doubted the value of "treating" same-sex desire. He concluded in *Sexual Inversion* that "[we] can seldom...congratulate ourselves on the success of any 'cure' of inversion...if we can enable an invert to be healthy, self-restrained, and self-respecting, we have often done better than to convert him into the mere feeble simulacrum of a normal man."²⁵

26 As for the situation in Germany, Hirschfeld's medical training and committed field work experience allowed him to influence other physicians' view of homosexuality to a significant degree. In 1903, Hirschfeld brought Paul Näcke, director of the Saxon Mental Hospital of Colditz, to homosexual bars in Berlin, after which Näcke commented in an article

²³ On Hirschfeld's Institute, see also Dose.

²⁴ John Addington Symonds to Edward Carpenter, Am Hof, Davos Platz, Switzerland, 29 December 1892, in Schueller and Peters, vol. 3 (1969), p. 797.

²⁵ Ellis 1906, p. 202. It is also worth emphasizing here that the language of psychiatric discourse was no longer framed merely in terms of madness or insanity. As Elizabeth Lunbeck has demonstrated, at the dawn of the twentieth century, "Most significant was psychiatry's abandonment of the distinction between sane and insane that had structured nineteenth-century practice, and its concomitant reorganization around a metric concept of the normal. By the 1920s, the metric mode of thinking that psychiatrists first elaborated around psychopathy would be dominant within, and beyond, the discipline. The psychiatric point of view no longer dichotomously classed individuals as sane or insane but arrayed them on a scale, assessing their variations from what was thought normal" (306).

that "I got the impression that effemination appeared only in a small minority of homosexuals," and "I find the expressions 'manly' and 'effeminate' extremely subjective. We don't know whether such qualities, if they exist, have a physical or mental origin" (cited in Wolff 52-3). After being criticized by Hirschfeld in 1903 for betraying an "objective" anthropological effort in understanding homosexuality, Iwan Bloch also reversed his initial position that conceptualized homosexuality as a diseased condition (Wolff 110). Not only did he eventually collaborate with Hirschfeld in organizing sexological meetings and publications, as mentioned earlier, Bloch explicitly stated in his widely circulated *The Sexual Life of Our Time* that "homosexuals are thoroughly healthy, free from hereditary taint, physically and psychically normal" (490). Hence, both the story behind Ellis' *Sexual Inversion* and Hirschfeld's impact on other doctors demonstrate that the pathological definitions of sexual variations originally propounded by the earlier psychiatrists simultaneously created an opportunity for a second generation of experts to transform the existing pathological definitions by participating in new scholarly endeavors under the name of science.

27 In addition to questioning medical depictions of homosexuality as a mental disorder, sexual scientists in the early twentieth century also sought to undermine the criminal status of homosexual behavior. In England, for example, Ellis stated his liberal stance on the legal issue of homosexuality in *Sexual Inversion*: "I am of opinion that neither 'sodomy'...nor 'gross indecency' ought to be penal offenses, except under certain special circumstances. That is to say, that if two persons of either or both sexes, having reached years of discretion, privately consent to practice some perverted mode of sexual relationship, the law cannot be called upon to interfere."²⁶ Similarly in Berlin, immediately following the founding of the Scientific-Humanitarian Committee in 1897, Hirschfeld crafted the famous "Petition to the Reichstag," a petition for abolishing Paragraph 175 of the German penal code that punished sexual contact between men. Even though the law was not entirely eliminated until 1994, most sources confirm that during his lifetime, at one point or another, Hirschfeld was able to acquire thousands of signatures for the Petition-including the signature of Richard v. Krafft-Ebing.²⁷

Sexuality and the Emergence of Sexual Freedom

28 Thus far, I have traced the ways in which the late nineteenth-century discourse of sexual psychopathology represented a historically-specific psychiatric tendency to gradually move away from somatic explanations towards psychogenic accounts of mental disorder, at

²⁶ Ellis 1906, p. 214. See also Crozier 2000, 2001.

²⁷ LeVay, p. 25; Wolff, p. 43. For more on the early German homosexual movement, see Fout; Lauritsen and Thorstad; Steakley; Oosterhuis and Kennedy.

the same time providing the starting point for a succeeding generation of sexologists to both extend the disciplinary boundaries of sexual science beyond medicine and advocate sexual reform. Implicit in this transition from the mere "psychiatrization of sex" to a more general "scientification of sex," however, was a fundamental reconfiguration of the "conceptual space" that "determines what statements can and cannot be made with the concepts" of sex and sexuality (Davidson 136). Or to borrow Foucault's insight, "what has changed is the silent configuration in which language finds support: the relation of situation and attitude to what is speaking and what is spoken about" (1994, xi). Simply put, the psychiatric system of sexual knowledge that emerged in the latter part of the nineteenth century had completely transformed the possible terms and conditions under which people understood this aspect of themselves.

29 A crucial component of this psychiatric discourse was the categorization and pathologization of people's erotic inclinations, which allowed for a possible conception of personhood rooted in the psychological condition of one's sexual desire- *a sense of sexual self* (see Reed 2001). The homosexual now inhabited a sense of sexual self distinct from the fetishist based on the difference in their respective bodily involvements and mental characters of sexual pleasure; and the sadist now had a sense of sexual selfhood distinct from the masochist precisely for the same reason. Even though these different sexual personas may converge in a given individual, the point is that after the medical experts had created different sexual labels corresponding to specific types of erotic psychology, the ways individuals appropriated, resisted, and negotiated these labels would always function within an epistemological framework in which a complete separation of one's sexual desire from one's sense of self would no longer be possible.

30 The effort of the second generation of sexual scientists, including Ellis and Hirschfeld, did not reverse this process of epistemic change but significantly relied upon it. The kind of "liberating impulse" captured in what they had accomplished both reflected and constructed the possibility for *science* -in addition to medicine, religion, and law- to speak about sexuality, which was now no longer exclusively defined around a medical conception of psychic condition, no longer understood in terms of a cause or an effect of behavioral outcome, and most certainly no longer perceived as a behavioral morphology in and of itself: sexuality came to be conceived as the conjuncture of all of the above. As a complex system of interaction between mental states and physiological expressions, and as a turn-of-the-twentieth-century product orchestrated through the exercise of the scientific power of sexology at the expense of psychiatric medical knowledge, sexuality was now something

through which a sense of self-ownership, self-definition, and self-determination could be articulated. Only within a new regime of sexual scientific knowledge, through a new sense of sexual self, and under a new set of possible conditions, was it possible for an individual at the beginning of the twentieth century to experience a distinctly modern notion of sexual freedom that both decoupled sexual desire from the institution of marriage and procreation *and* intrinsically linked it to new modes of political struggle.

31 I want to conclude by showing that the dissociation of sexual desire from heterosexual obligations represents an archeologically-unique mode of conceptualization, without which the feminist position for legalizing birth control would not have consolidated in the opening decades of the twentieth century.²⁸ When New Women like Margaret Sanger fought for birth control in the early twentieth century, they were also fighting for women's right to demand sexual pleasure.²⁹ But this latter aspiration, be it implicit or explicit, would not have been a possible candidate of feminist thinking prior to the psychiatric discourse of sexual pathology and the subsequent reworking of the psychiatric model by a second group of liberal sex reformers. Medical authorities like Krafft-Ebing first psychiatrized sex to give it both a psychical and a pathological dimension, with the result being that *women's sexual interest appeared for the first time in history as a possible free-standing condition outside the heteronormative confinement of marriage practice*. Sexual scientists like Ellis then challenged the pathologizing model of sex in their campaign for sexual liberalism-which involved consensual limits, mutual love and affection, and even reciprocal sexual satisfaction, but not procreation (such as demonstrated in their tolerant attitude towards homosexuality). As such, when the second generation of sexologists appropriated and modified the pathologizing model of sexuality articulated by the first-wave psychiatrists, the epistemological consequences amounted to an entirely new system of discursive knowledge about the sexual self.³⁰

32 This new system of discursive knowledge about sexual selfhood emerged precisely at the juncture in time where historians of gender and sexuality have located a shift in women's

²⁸ I use "archeology" in the way that Foucault uses the term, the object of which I take to be discursive formations or knowledge ("savoir"). See Foucault 1972, esp. chap. 5. See also Davidson, chap. 8.

²⁹ Members of the early twentieth-century birth control movement emphasized that they were advocating for "birth control" (or "contraception") and not necessarily "abortion." The existing body of literature on the history of birth control is extensive. I have primarily relied on Brodie; Degler; Gordon 1990, 1992; Mohr; Reed 1978; Tone. I am aware that my following discussion is concerned with middle-class women almost exclusively as opposed to working-class women, whose history of sexual episteme, of course, deserves explication in its own right.

³⁰ This statement supports Carroll Smith-Rosenberg's claim that "To the later generations of New Women the new sexual vocabulary offered by Havelock Ellis and other liberal male sex reformers appeared as congenial-at times more congenial than the rallying cries of the older political feminists" (284). On the relationship between the New Woman and sexuality, see also Hall; Newton.

intimate experience. Prior to the twentieth century, same-sex romantic friendships between middle-class women were surprisingly tolerated in American society. These intimate bonds between women existed within a larger social structure that encouraged women to enter the institution of heterosexual marriage. Around the turn of the twentieth century, however, the desire to form intimate bonds with persons of the same-sex, sexually or not, became a focus of intense medical surveillance. In this "attack on 'romantic friendship,'" according to historian Lillian Faderman, "even romantic friendship that clearly had no sexual manifestations was now coming to be classified as homosexual. Medical writers began to comment on 'numerous phases of *inversion* where men are passionately attached to men, and women to women, *without the slightest desire for sexual intercourse*'" (1992, 49, emphasis original). The first-wave psychiatrists and their followers, therefore, did not merely clinically pathologize same-sex intimate relationships; more importantly, they *sexualized* such interpersonal relations. This turning point in the history of female same-sex relationship resembled a larger cultural shift in the conceptualization of the nature of female intimate experience: such a re-conceptualization secured the concurrent births of the New Woman, the modern lesbian, and the possibility of female sexual freedom.³¹

33 The way many women had begun thinking about and experiencing a sense of self that demanded sexual enjoyment and its related political interests reveals the process of epistemic change—underscoring the shifting relations between systems of knowledge and forms of experience—that I have considered. This is why even though some historians have convincingly challenged Nancy Cott's conception of Victorian female "passionlessness" by showing that certain nineteenth-century female free lovers themselves had outwardly refuted such doctrine, the same historians have often failed to offer a meaningful interpretation of the fact that women in the nineteenth century, free lovers or not, lived in a historically-specific social apparatus, in which the idea of sexual desire was exclusively framed in relation to the institution of marriage and female sexuality was exclusively understood in relation to maternal interest (Cott).³² My analysis, then, suggests that the period between 1880 and 1920 marked *a substantive transformation in the historical epistemology of sexuality from nineteenth-century free love to twentieth-century sexual freedom*. To impose the modern

³¹ On female same-sex relationships in the Victorian English speaking world, see Smith-Rosenberg; Marcus.

³² Using Victoria Woodhull as an example, Ellen DuBois directly challenges Cott's interpretation: "As for female sexuality per se, Woodhull ...believed in the existence, desirability and healthfulness of sexual passion, in women as well as men. She wholeheartedly refuted the doctrine of passionlessness which she called 'that unnatural lie,' by this time an idea that challenged male sexuality as well as female." On free love, see also Passet; Sears; and Stoehr. Jesse F. Battan's work (1992, 2004) on nineteenth-century free love focuses on the importance and power of language. On free love in the context of the lives of cultural anthropologists Margaret Mead and Ruth Benedict, see Banner, esp. pp. 136 and 148.

concept of sexual freedom backward in time and apply it to historical contexts before the late nineteenth century, therefore, is to exercise an "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" (Davidson 41). It was not until the transition from the psychiatrization of sex to a more general scientification of sex around the turn of the twentieth century did women, for instance, gradually adopt and participate in the making of a modern notion of sexual freedom that demarcated sexual desire from marriage and child-bearing. This new sense of sexual self, positioned in a constant political struggle with its cultural legitimacy and intelligibility, would remain central to the idea of sexual freedom throughout the rest of the twentieth century.

Works Cited

- Ackerknecht, Erwin H. *A Short History of Medicine*, rev. ed. 1955. Baltimore: Johns Hopkins University Press, 1982.
- _____. *A Short History of Psychiatry*, 2nd rev. ed. 1959. Trans. Sula Wolff. New York: Hafner, 1968.
- Alexander, Franz G., and Sheldon T. Selesnick. *The History of Psychiatry: An Evaluation of Psychiatric Thought and Practice from Prehistoric Times to the Present*. 1966. Northvale, NJ: Jason Aronson, 1995.
- Angelides, Steven. *A History of Bisexuality*. Chicago: University of Chicago Press, 2001.
- Banner, Lois W. *Intertwined Lives: Margaret Mead, Ruth Benedict, and Their Circle*. New York: Alfred A. Knopf, 2003.
- Battan, Jesse F. "'The Word Made Flesh': Language, Authority, and Sexual Desire in Late Nineteenth-Century America." *Journal of the History of Sexuality*. 3 (1992): 223-244.
- _____. "'You Cannot Fix the Scarlet Letter on My Breast!': Women Reading, Writing, and Reshaping the Sexual Culture of Victorian America." *Journal of Social History*. 37.3 (2004): 601-624.
- Beith, Gilbert. *Edward Carpenter, in Appreciation*. London: George Allen & Unwin, 1931.
- Bland, Lucy, and Laura Doan, eds. *Sexology in Culture: Labelling Bodies and Desires*. Chicago: University of Chicago Press, 1998.
- Bloch, Iwan. *The Sexual Life of Our Time in Its Relations to Modern Civilization*. 1907. Trans. M. Eden Paul. New York: Allied Book, 1928.

- Breger, Claudia. . "Feminine Masculinities: Scientific and Literary Representations of 'Female Inversion' at the Turn of the Twentieth Century." *Journal of the History of Sexuality*. 14.1/2 (2005): 76-106.
- Brodie, Janet F. *Contraception and Abortion in Nineteenth-Century America*. Ithaca, NY: Cornell University Press, 1994.
- Brome, Vincent. *Havelock Ellis, Philosopher of Sex: A Biography*. London: Routledge & Kegan Paul, 1979.
- Bullough, Vern L. *Science in the Bedroom: A History of Sex Research*. New York: Basic Books, 1994.
- Calder-Marshall, Arthur. *Havelock Ellis: A Biography* London: Hart-Davis, 1959.
- Carpenter, Edward. *My Days and Dreams: Being Autobiographical Notes*. London: George Allen & Unwin, 1916.
- Chauncey, George. "From Sexual Inversion to Homosexuality: The Changing Medical Conceptualization of Female 'Deviance'." *Passion and Power: Sexuality in History*. Ed. Kathy Peiss and Christina Simmons. Philadelphia: Temple University Press, 1989. 87-117.
- _____. *Gay New York: Gender, Urban Culture, and the Making of the Gay Male World, 1890-1940*. New York: Basic Books, 1994.
- Clark, Michael. "'Morbid Introspection,' Unsoundness of Mind and British Psychological Medicine, c. 1830-c.1900." *The Anatomy of Madness: Essays in the History of Psychiatry, Vol III: The Asylum and its Psychiatry*. Ed. W.F. Bynum, Roy Porter, and Michael Shepherd. London & New York: Routledge, 1988. 71-101.
- Collis, John Stewart. *Havelock Ellis: Artist of Life; A Study of His Life and Work*. New York: W. Sloane Associates, 1959.
- Conrad, Peter, and Joseph W. Schneider. *Deviance and Medicalization: From Badness to Sickness*, expanded ed. Philadelphia: Temple University Press, 1992.
- Cott, Nancy. "Passionlessness: An Interpretation of Victorian Sexual Ideology, 1790-1850." *Signs: Journal of Women in Culture and Society*. 4 (1978): 219-236.
- Crosby, Ernest H. *Edward Carpenter: Poet and Prophet*. Philadelphia, PA: Conservator, 1901.
- Crozier, Ivan. "Nineteenth-Century British Psychiatric Writing about Homosexuality before Havelock Ellis: The Missing Story." *Journal of the History of Medicine and Allied Sciences*. 63.1 (2008): 65-102.
- _____. "Taking Prisoners: Havelock Ellis, Sigmund Freud, and the Construction of Homosexuality, 1897-1951." *Social History of Medicine* 13.6 (2000): 447-466.

- _____. "The Medical Construction of Homosexuality and its Relation to the Law in Nineteenth-Century England." *Medical History*.45 (2001): 61-82.
- Darwin, Charles. *The Origin of Species by Means of Natural Selection, or The Preservation of Favoured Races in the Struggle for Life*. London: John Murray, 1859.
- Davidson, Arnold I. *The Emergence of Sexuality: Historical Epistemology and the Formation of Concepts*. Cambridge: Harvard University Press, 2001.
- Degler, Carl N. *At Odds: Women and the Family in America from the Revolution to the Present*. New York: Oxford University Press, 1980.
- D'Emilio, John, and Estelle B. Freedman. *Intimate Matters: A History of Sexuality in America*. New York: Harper & Row, 1988.
- Dixon, Joy. *Divine Feminine: Theosophy and Feminism in England*. Baltimore: Johns Hopkins University Press, 2001.
- _____. "Sexology and the Occult: Sexuality and Subjectivity in Theosophy's New Age." *Journal of the History of Sexuality*. 7.3 (1997): 409-433.
- Doan, Laura, and Jay Prosser, eds. *Palatable Poison*. New York: Columbia University Press, 2002.
- Dose, Ralf. *Magnus Hirschfeld: Deutscher, Jude, Weltbürger*. Teetz: Hentrich und Hentrich, 2005.
- Draznin, Yaffa Claire, ed. *"My Other Self": The Letters of Olive Schreiner and Havelock Ellis, 1884-1920*. New York: P. Lang, 1992.
- DuBois, Ellen. "Feminism and Free Love." *H-Net: Humanities and Social Sciences Online*.
- Duffin, Jacalyn. *History of Medicine: A Scandalously Short Introduction*. Toronto: University of Toronto Press, 1999.
- Duggan, Lisa. *Sapphic Slashers: Sex, Violence, and American Modernity*. Durham: Duke University Press, 2000.
- _____. "The Trials of Alice Mitchell: Sensationalism, Sexology, and the Lesbian Subject in Turn-of-the-Century America." *Signs: Journal of Women in Culture and Society*. 18.4 (1993): 791-814.
- Ellis, Havelock. *Studies in the Psychology of Sex*, vol. 1, part iv, *Sexual Inversion*, 3rd ed. 3rd ed. 1915. New York: Random House, 1936.
- _____. *Studies in the Psychology of Sex*, vol. 2, *Sexual Inversion*, 2nd ed. 1901. Philadelphia, PA: F. A. Davis, 1906.
- Ellis, Havelock, and J. A. Symonds. *Das Konträre Geschlechtsgefühl*. Leipzig: Georg H. Wigand's Verlag, 1896.

- Ellis, Mrs. Havelock. *Three Modern Seers: James Hinton, Nietzsche, Edward Carpenter*. New York: M. Kennerley, 1910.
- Faderman, Lillian. *Odd Girls and Twilight Lovers: A History of Lesbian Life in Twentieth-Century America*. New York: Penguin Books, 1992.
- _____. *Surpassing the Love of Men: Romantic Friendship and Love between Women from the Renaissance to the Present*. New York: Morrow, 1981.
- _____. "The Morbidification of Love between Women by 19th-Century Sexologists." *Journal of Homosexuality*. 4 (1978): 73-90.
- Forel, August. *The Sexual Question: A Scientific, Psychological, Hygienic and Sociological Study*, 2nd ed. Trans. C. F. Marshall. New York: Physicians and Surgeons, 1935.
- Foucault, Michel. *The Archaeology of Knowledge*. Trans. A. M. Sheridan Smith. New York: Pantheon, 1972.
- _____. *The Birth of the Clinic: An Archaeology of Medical Perception*. Trans. A. M. Sheridan Smith. New York: Vintage Books, 1994.
- _____. *The History of Sexuality, Vol. 1: An Introduction*. Trans. Robert Hurley. New York: Vintage Books, 1990.
- Fout, John. "Sexual politics in Wilhelmine Germany: The Male Gender Crisis, Moral Purity, and Homophobia." *Journal of the History of Sexuality*. 2.3 (1992): 388-421.
- Garber, Marjorie. *Bisexuality and the Eroticism of Everyday Life*. 1995. New York: Routledge, 2000.
- Goldberg, Isaac. *Havelock Ellis: A Biographical and Critical Survey*. New York: Simon & Schuster, 1926.
- Goldstein, Jan. *Console and Classify: The French Psychiatric Profession in the Nineteenth Century*. 1987. Chicago: University of Chicago Press, 2001.
- Gordon, Linda. "Why Nineteenth Century Feminists Did Not Support 'Birth Control' and Twentieth Century Feminists Do: Feminism, Reproduction, and the Family." *Rethinking the Family: Some Feminist Questions*, rev. ed. Ed. Barrie Thorne and Marilyn Yalom. Boston: Northeastern University Press, 1992. 140-154.
- _____. *Woman's Body, Woman's Right: A Social History of Birth Control in America*, rev. and updated ed. New York: Penguin, 1990.
- Greenburg, David. *The Construction of Homosexuality*. Chicago: University of Chicago Press, 1988.
- Griesinger, Wilhelm. *Mental Pathology and Therapeutics*. 1867. Trans. C. Lockhart Robertson and James Rutherford. New York: Hafner, 1965.
- Grosskurth, Phyllis. *Havelock Ellis: A Biography*. London: Allen Lane, 1980.
- Halberstam, Judith. *Female Masculinity*. Durham: Duke University Press, 1998.

- Hall, Lesley A. *Sex, Gender, and Social Change in Britain since 1800*. New York: St. Martin's Press, 2000.
- Hansen, Bert. "American Physicians' 'Discovery' of Homosexuals, 1880-1900: A New Diagnosis in a Changing Society." *Framing Disease: Studies in Cultural History*. Ed. Charles E. Rosenberg and Janet Colden. New Brunswick, NJ: Rutgers University Press, 1992. 104-133.
- Harrington, Anne. *Medicine, Mind, and the Double Brain*. Princeton: Princeton University Press, 1987.
- Hatheway, Jay. *The Gilded Age Construction of Modern American Homophobia*. New York: Palgrave Macmillan, 2003.
- Herm, Rainer. "On the History of Biological Theories of Homosexuality." *Sex, Cells, and Same-Sex Desire: The Biology of Sexual Preference*. Ed. John P. De Cecco and David Allen Parker. New York: Haworth, 1995. 31-56.
- Hirschfeld, Magnus. *Berlins drittes Geschlecht*, Grossstadt-Dokumente, vol. 3. Ed. Hans Ostwald. Berlin and Leipzig: H. Seemann, 1904.
- _____. "Das Ergebnis der statistischen Untersuchungen über den Prozentsatz der Homosexuellen" [Results of the Statistical Undertaking on the Percentage of Homosexuals]. *Jahrbuch für sexuelle Zwischenstufen*. (Leipzig: Max Spohr). 6 (1904): 109-178.
- _____. *The Homosexuality of Men and Women*. Trans. Michael A. Lombardi-Nash. New York: Prometheus, 2000.
- Jacyna, Stephen. *Lost Words: Narratives of Language and the Brain, 1825-1926*. Princeton: Princeton University Press, 2000.
- Katz, Jonathan Ned. *Gay/Lesbian Almanac: A New Documentary*. New York: Harper & Row, 1983.
- Kennedy, Michael T. *A Brief History of Disease, Science, and Medicine: From the Ice Age to the Genome Project*. Cranston, RI: The Writers' Collective, 2004.
- Kraepelin, Emil. *Clinical Psychiatry: A Text-Book for Students and Physicians*, 7th ed. 1902. Trans. A. Ross Diefendorf. New York: Macmillan, 1915.
- _____. *Lectures on Clinical Psychiatry*, 3rd ed. Rev. and ed. Thomas Johnstone. New York: William Wood, 1917.
- Krafft-Ebing, Richard v. "Ueber gewisse Anomalies des Geschlechtstriebes und die klinischforensich Verwenthug derselben als eines wahrscheinlich functionellen

- Degenerationszeichens des centralen Nervensystems." *Archiv für Psychiatrie und Nervenkrankheiten*. 7 (1877): 291-312.
- _____. *Psychopathia Sexualis, with Especial Reference to Contrary Sexual Instinct: A Medico-Legal Study*, 7th ed. Trans. Charles Gilbert Chaddock. Philadelphia: F. A. Davis, 1892.
- _____. *Psychopathia Sexualis, with Especial Reference to the Antipathic Sexual Instinct: A Medico-Forensic Study*, 12th ed. Trans. F. J. Rebman. New York: Physicians and Surgeons Book, 1933.
- Lauritsen, John, and David Thorstad. *The Early Homosexual Rights Movement (1864-1935)*. New York: Times Change Press, 1974.
- LeVay, Simon. *Queer Science: The Use and Abuse of Research into Homosexuality*. Cambridge, MA: MIT Press, 1996.
- Lewis, Edward. *Edward Carpenter: An Exposition and an Appreciation*. New York: Macmillan, 1915.
- Lunbeck, Elizabeth. *The Psychiatric Persuasion: Knowledge, Gender, and Power in Modern America*. Princeton, NJ: Princeton University Press, 1994.
- Marcus, Sharon. *Between Women: Friendship, Desire, and Marriage in Victoria England*. Princeton: Princeton University Press, 2007.
- Maudsley, Henry. *Body and Mind: An Inquiry into Their Connection and Mutual Influence, Specially in Reference to Mental Disorders*. London: Macmillan, 1870.
- _____. *Life in Mind and Conduct: Studies of Organic in Human Nature*. New York: Macmillan, 1902.
- _____. *Organic to Human: Psychological and Sociological*. London: Macmillan, 1916.
- Meynert, Theodor**. *Psychiatry: A Clinical Treatise on Diseases of the Fore-Brain Based Upon a Study of Its Structure, Functions, and Nutrition*. 1885. Trans. B. Sachs. New York: Hafner, 1968.
- Millon, Theodore**. *Masters of the Mind: Exploring the Story of Mental Illness from Ancient Times to the New Millennium*. New York: John Wiley and Sons, 2004.
- Mohr, James C.** *Abortion in America: The Origins and Evolution of National Policy, 1800-1900*. New York: Oxford University Press, 1978.
- Moll, Albert**. *Perversions of the Sex Instinct: A Study of Sexual Inversion*. Trans. Maurice Popkin. Newark: Julian, 1931.
- _____. *The Sexual Life of the Child*. Trans. Eden Paul. New York: Macmillan, 1912.

- Morel, Bénédict A.** *Traité des dégénérescences physiques, intellectuelles, et morales de l'espèce humaine*. Paris: J. B. Baillière, 1857.
- Newton, Esther.** "The Mythic Mannish Lesbian: Radclyffe Hall and the New Woman." *Signs: Journal of Women in Culture and Society*. 9.4 (1984): 557-575.
- Noble, Jean Bobby.** *Masculinities without Men? Female Masculinity in Twentieth-Century Fiction*. Vancouver, British Columbia: University of British Columbia Press, 2003.
- Oosterhuis, Harry.** *Stepchildren of Nature: Krafft-Ebing, Psychiatry, and the Making of Sexual Identity*. Chicago: University of Chicago Press: 2000.
- Oosterhuis, Harry, and Hubert Kennedy, eds.** *Homosexuality and Male Bonding in Pre-Nazi Germany*. New York and London: Harrington Park, 1991.
- Passet, Joanne E.** *Sex Radicals and the Quest for Women's Equality*. Urbana, IL: University of Illinois Press, 2003.
- Pemble, John, ed.** *John Addington Symonds: Culture and the Demon Desire*. New York: St. Martin's, 1999.
- Porter, Roy.** *Madness: A Brief History*. New York: Oxford University Press, 2002.
- _____. *The Greatest Benefit to Mankind: A Medical History of Humanity*. 1997. New York: W. W. Norton & Company, 1999.
- Prosser, Jay.** *Second Skins: The Body Narratives of Transsexuality*. New York: Columbia University Press, 1998.
- Reed, James W.** *From Private Vice to Public Virtue: The Birth Control Movement and American Society since 1830*. New York: Basic Books, 1978.
- Reed, Matt T.** "Historicizing Inversion: Or, How to Make a Homosexual." *History of the Human Sciences*. 14.4 (2001): 1-29.
- Robinson, Paul.** *Gay Lives: Homosexual Autobiography from John Addington Symonds to Paul Monette*. Chicago: University of Chicago Press, 1999.
- _____. *The Modernization of Sex: Havelock Ellis, Alfred Kinsey, William Masters and Virginia Johnson*. 1976. Ithaca, NY: Cornell University Press, 1989.
- Rosario, Vernon.** *Homosexuality and Science: A Guide to the Debates*. Santa Barbara, CA: ABC-CLIO, 2002.
- _____, ed. *Science and Homosexualities*. New York: Routledge, 1997.
- Rowbotham, Sheila, and Jeffrey Weeks.** *Socialism and the New Life: The Personal and Sexual Politics of Edward Carpenter and Havelock Ellis*. London: Pluto, 1977.
- Schmidt, Gunter.** "Allies and Persecutors: Science and Medicine in the Homosexuality Issue." *Journal of Homosexuality*. 10.3/4 (1984): 127-140.

- Schueller, Herbert M., and Robert L. Peters, eds.** *The Letters of John Addington Symonds* , 3 vols. Detroit: Wayne State University Press, 1967-69.
- Scull, Andrew.** *The Insanity of Place/The Place of Insanity: Essays on the History of Psychiatry*. New York: Routledge, 2006.
- Sears, Hal D.** *The Sex Radicals: Free Love in High Victorian America*. Lawrence: Regents Press of Kansas, 1977.
- Sengoopta, Chandak.** "Glandular Politics: Experimental Biology, Clinical Medicine, and Homosexual Emancipation in Fin-de-Siecle Central Europe." *Isis*. 89.3 (1998): 445-473.
- Shapin, Steven, and Simon Schaffar.** *Leviathan and the Air-Pump: Hobbes, Boyle, and the Experimental Life*. Princeton, NJ: Princeton University Press, 1985.
- Shorter, Edward.** *A History of Psychiatry: From the Era of the Asylum to the Age of Prozac*. New York: John Wiley and Sons, 1997.
- Smith-Rosenberg, Carroll.** *Disorderly Conduct: Visions of Gender in Victorian America*. New York: Alfred A. Knopf, 1985.
- Somerville, Siobhan.** "Scientific Racism and the Emergence of the Homosexual Body." *Journal of the History of Sexuality*. 5.2 (1994): 243-266.
- Starr, Paul.** *The Social Transformation of American Medicine: The Rise of a Sovereign Profession and the Making of a Vast Industry*. New York: Basic Books, 1982.
- Steakley, James D.** *The Homosexual Emancipation Movement in Germany*. 1975. Salem, NH: Ayer, 1993.
- Stoehr, Taylor.** *Free Love in America: A Documentary History*. New York: AMS, 1979.
- Sulloway, Frank J.** *Freud, Biologist of the Mind: Beyond the Psychoanalytic Legend*. New York: Basic Books, 1979.
- Terry, Jennifer.** *An American Obsession: Science, Medicine, and Homosexuality in Modern Society*. Chicago: University of Chicago Press, 1999.
- Tone, Andrea.** *Devices and Desires: A History of Contraceptives in America*. New York: Hill and Wang, 2001.
- Tsuzuki, Chushichi.** *Edward Carpenter, 1844-1929: Prophet of Human Fellowship*. Cambridge: Cambridge University Press, 1980.
- Ullman, Sharon R.** *Sex Seen: The Emergence of Modern Sexuality in America*. Berkeley: University of California Press, 1997.
- Warner, John H.** *The Therapeutic Perspective: Medical Practice, Knowledge, and Identity in America, 1820-1885*. Cambridge: Harvard University Press, 1986.

- Weeks, Jeffrey.** . *Coming Out: Homosexual Politics in Britain from the Nineteenth Century to the Present*. London: Quartet, 1977.
- _____. *Sex, Politics and Society: The Regulation of Sexuality since 1800*. London: Longman, 1981.
- _____. *Sexuality and Its Discontents: Meanings, Myths, and Modern Sexualities*. London: Routledge, 1985.
- Wolff, Charlotte.** *Magnus Hirschfeld: A Portrait of a Pioneer in Sexology*. London: Quartet, 1986.
- Zaretsky, Eli.** *Secrets of the Soul: A Social and Cultural History of Psychoanalysis*. New York: Alfred Knopf, 2004.
- Zilboorg, Gregory, and George W. Henry.** *A History of Medical Psychology*. New York: W. W. Norton, 1941.