## SEXUAL MODERNITY IN THE WORKS OF RICHARD VON KRAFFT-EBING AND ALBERT MOLL Harry Oosterhuis

First I would like to thank the organisers of this conference for inviting me, although I'm not a expert on Albert Moll. I have only studied Moll's main works on sexuality: *Die Conträre Sexualempfindung, Untersuchungen über die Libido sexualis, Das Sexualleben des Kindes* and his contributions to the *Handbuch der Sexualwissenschaften*, which he edited. I am much more of an expert on Richard von Krafft-Ebing, about whose work and patients I published the book *Stepchildren of Nature* almost ten years ago. My paper is about Krafft-Ebing and Moll as leading medical authorities on sexuality and the historical significance of their work.

The three central points in my argument are:

First, that Moll's view of sexuality can be situated in between that of Krafft-Ebing and Freud. Moll's sexology was a continuation of Krafft-Ebing's work and offered the most comprehensive and sophisticated general theory on sexuality before Freud wrote his *Drei Abhandlungen zur Sexualtheorie* (1905). Whereas systematic classification of sexual perversion formed the leading principle of the composition of Krafft-Ebing's *Psychopathia sexualis*, Moll's *Untersuchungen über die Libido sexualis*, which built on Krafft-Ebing's work, was organised on the basis of an explanatory framework of sexuality in general, whereby his discussion of perversion served as supportive elucidation.

The second point is that the work of both Krafft-Ebing and Moll in several ways can be viewed as a central moment in the constitution of the modern experience of sexuality and that it anticipated present attitudes toward sexuality.

The third point is that their new perspective, not only on sexual perversion, but also on sexuality in general, cannot be reduced to the Foucaultion notion of medicalisation with its connotation of social constraint, control and discipline. Although Krafft-Ebing and Moll indeed surrounded sexual deviance with an aura of pathology and they echoed nineteenth-century stereotypical thinking on gender and sexuality in general, their sexology embodied several ambiguities and contradictions. It cannot be regarded only as a stigmatisation or disqualification of sexual aberration. On the other hand, it would also be too simple to view it merely in terms of liberation. What was at stake is a much more fundamental transformation of the definition and explanation of sexuality and of its meaning in human life.

The historical background of the modernisation of sexuality, in which Krafft-Ebing and Moll were key figures, is the late-nineteenth century development of the medical-psychiatric understanding of sexual deviance, in which, I think, four basic, partly connected transformations can be distinguished:

1. The first was the general transference of sexuality from the realm of sin and crime to the domain of health and illness.

- 2. The second was that the focus in forensic medicine on criminal sexual acts and the physical proof of such acts was superseded by the forensic-psychiatric preoccupation with the personal and pathological characteristics of moral offenders.
- 3. The third was the turning around of the causal relation between sexual deviance and pathology: whereas physicians had first believed that mental and nervous disorders were the *result* of disorderly sexual conduct, psychiatrists supposed that they *caused* it.
- 4. The fourth transformation was the shift that Krafft-Ebing primed in the mid 1880s and that he and Moll elaborated in the 1890s, from a psychiatric perspective in which perversion was explained as a derived, episodic and more or less singular symptom of a more fundamental mental disorder, to a consideration of perversion as part, be it pathological, of a more general and continuous sexual instinct.

This last transformation was crucial for the crystallisation of a new understanding of human sexuality into a historically consequential form. In my paper I discuss five outstanding features of sexual modernity that can be found in Krafft-Ebing's and Moll's work and that I will now briefly summarise.

The first characteristic of sexual modernity is the notion that sexuality is an essential, powerful, and irresistible force in human life, which is dangerous as well as wholesome. Because of its explosive and barely controllable nature, Krafft-Ebing and Moll believed, sexuality had to be repressed by social constraints and self-control. On the other hand, they stressed that sexuality also played a constructive role in personal and social life. Their work facilitated, to a certain extent, a favourable view of sexuality. In their perspective there was a strong link between sexuality and sociability; think of Moll's conceptualisation of the Contrectationstrieb as a psychological and social drive. Both also acknowledged that sexual abstinence and dissatisfaction could be detrimental to one's health, thus anticipating the Freudian assumption that sexual restraint may be unhealthy repression that may lead to mental distress. As is true of Freud's work, that of Krafft-Ebing and Moll is permeated with a dilemma. On the one hand, the human is inevitably driven by sexual urges and their suppression may cause nervous and mental complaints. On the other, it is impossible to freely give way to lust, because, as an irrational and sometimes violent force, it is simultaneously a threat to social order and it may also cause personal distress.

The second feature of sexual modernism concerns the way sexual desires are defined and classified, and the differentiation of the normal and the abnormal is questioned. In Krafft-Ebing's discussion of the main perversions and also in Moll's explanatory framework, the differentiation between the normal and abnormal appeared to be not so much qualitative and absolute but rather quantitative and gradual. The four fundamental forms of perversion they distinguished, sadism, masochism, inversion and fetishism were not only categories of deviance, but also concepts that explained aspects of normal sexuality. In Krafft-Ebing's work there was a shift away from a classification of perversions within clear boundaries to a tentative understanding of 'normal' sexuality in the context of deviance. On his turn Moll argued that the sexual instinct could only be explained by

comparing normal and abnormal forms side by side. The Freudian notion that the libido consists of 'component drives' and that normal heterosexuality is the result of a healthy conversion of various impulses, whereas perversions arise from developmental disturbances, was foreshadowed in his work. Even more than Krafft-Ebing, Moll, by underlining the normalcy of frequent sexual activities during childhood, including perverted ones, modified the differentiation of the normal and the abnormal, and stressed the omnipresence of differences of degree. Also, Moll's view of the relation between what in the twentieth century was designated as 'nature' and 'nurture' showed more nuance than any other sexological work around 1900.

The third hallmark of sexual modernity refers to the shift from the procreative norm to the pleasure as well as the relational dimension of sexuality. In Krafft-Ebing's and Moll's work sexuality was more and more disconnected from reproduction. The perverse impulse appeared as a pleasure wish that yearned neither for generation nor for intercourse per se, but only for its own satisfaction; this is the essence of Moll's *Detumescenztrieb*. Also, they underlined the importance of sexuality for love and partnership. Moll's argument that the *Contrectationstrieb* was one of the two fundamental component sexual instincts explicitly connected sexuality to the affective longing for physical and psychological union with a partner as a purpose in itself. Stressing that both love without sexuality and sexual pleasure without love were incomplete, Krafft-Ebing and Moll began to replace negative attitudes toward sexuality by a positive evaluation of it within the context of the ideal of romantic love and companionship marriage.

It was exactly the appreciation of the relational and affective dimension of sexuality that contributed to Krafft-Ebing's changing view of homosexuality, which Moll largely adopted. At the end of his life Krafft-Ebing was inclined to think that homosexuality was more or less the equivalent of heterosexuality, because many homosexuals who had expressed themselves in his case histories, had made clear that partnership was as important to them as sexual gratification. Moll also stressed that the manner in which homosexuals experienced sexual passion as well as love was in no way different from the feelings of heterosexuals. Such comparison of hetero- en homosexuality marked the shift from a conception of the sexual impulse as a reproductive instinct toward a view of sexuality that emphasised erotic desire and pleasure in the context of affection and personal fulfilment. In the context of romantic love sexuality went hand in hand with privacy, intimacy, equality, reciprocity, and psychic communication. Contrary to homosexuality, other perversions, like fetishism, sadism, masochism, voyeurism and exhibitionism, could in themselves hardly be geared to these ideals.

The changing view on homosexuality entailed that Krafft-Ebing and Moll highlighted the dichotomy of heterosexuality and homosexuality as the basic sexual categories, whereas they identified other perversions as derived subvariations of hetero- and homosexuality. In this way they prefigured that the gender of one's sexual partner - the other (hetero), the same (homo) or both (bi) – would become the dominant feature of the modern sexual order, and not so much the more particular preference for other characteristics of one's sexual partner or for the nature or context of sexual activities. For example a preference for certain clothes, body parts, specific objects or for specific acts, scripts or situations. In

theory such a fetishistic framework for classifying sexuality would also have been possible. Late-nineteenth-century French psychiatrists tended to consider fetishism as the 'master perversion' that included all the aberrations by which sexual desire had fixed itself on the wrong goal, be it an object, a body part, a certain act or physical type, a person of the same sex, an unusual age-category, or an animal.

The fourth dimension of sexual modernity relates to the psychological understanding and experience of sexuality. Krafft-Ebing and Moll were influenced by degeneration theory and adhered to biogenetic and evolutionary explanations of sexuality, but on the whole their perspective cannot be characterized as biological. Although in their general explanation the sexual drive was located in the nervous system and the brain, and the underlying causes of perversion remained heredity, these were not very relevant for their approach of perversion in clinical practice. Their numerous and sometimes extensive biographical case descriptions centred not so much on bodily characteristics as on personal history, subjective experience and emotional life. For the greater part they had to judge from what perverts were telling them and that is why autobiographical accounts were so important in their work. The body nor actual behaviour was decisive in the diagnosis of perversion, but the personality, the psychological attitude behind outward appearance and behaviour.

In their work sexuality emerged as a complex of reflexes, bodily sensations, behaviours, experiences, feelings, thoughts, desires, fantasies, and dreams. The interplay between the body and the inner self, might explain why sexuality has become such a meaningful and sensitive experience in modern Western culture, giving cause to an array of emotional problems: endless self-scrutiny, fears of being abnormal, anxieties about erotic attractiveness and sexual achievement, and conflicts between private desires and social roles, and between sexual fantasies and the realities of everyday life. Krafft-Ebing's and Moll's autobiographical case histories already show that sexuality had become the subject of endless self-reflection, which, on the one hand, had a redeeming effect, but, on the other, reinforced inner conflicts. As many of their case studies illustrate, self-contemplation was more often than not a cause for anxiety, uneasiness, and frustration, but at the same time it also created the possibility for self-awareness and self-expression, and later for sexual emancipation.

Closely related to the psychological experience of sexuality, is its strong link to personal identity, the fifth distinctive characteristic of sexual modernity. Sexual deviance was no longer perceived as a more or less temporal, fleeting digression, but as a continuous and essential feature of one's inner being or personality. Sexuality was privileged as the quintessence of the individual self. The individualistic case history model played a crucial role in the development of Krafft-Ebing's and Moll's perspective on sexuality. It was not just a means of categorising and pathologising deviance, but also offered a space in which individual perverts could articulate their sexual desire in the form of personal, autobiographical narrative. Their detailed self-examinations, their drive to narrate, as Philippe Weber has aptly phrased it, and the belief that their sexual desire expressed something deep and fixed from within the inner self, were crucial in the development of sexual identity.

This does not necessarily mean that individual meanings of the sexual self should be considered as reflections of an internal, psychological essence. Neither psychiatric case histories nor autobiographies are unmediated sources for the voices of perverts. Sexual identities crystallised as patterned narratives, and as such their content and form were of a social rather than of a psychological origin. For the materialisation of sexual identity a cultural model, a script, was necessary. In this respect Krafft-Ebing's and Moll's work offered a forum in which sexual desires and experiences could be articulated, understood and justified by presenting them as an integral part of one's life history.

More recently, postmodernism has undermined the idea that sexual identities are fixed in nature or the psyche. However, in the popular, common sense understanding of sexuality this notion is still paramount. Sexual identities may be debunked or 'deconstructed' at a theoretical level, they are nevertheless not only a creation of psychiatric sexology, but real in a historical sense. A critical attitude towards the concept of sexuality as a psychobiological unity should not lead to loosing sight of sexual identities as a part of the real self-experience of modern man. Sexual identity is still experienced as an essence that is already there, waiting to be discovered, explored, understood and expressed. Sexologists, psychotherapists, self-help groups and manuals, the mass media, and emancipation movements have only intensified the preoccupation with the true sexual self, even more perhaps since sexuality, from the 1960s on, has become a focal point of personal awareness, individual growth, self-actualisation, and emancipation. What Krafft-Ebing's and Moll's patients and correspondents did in the privacy of the psychiatric consulting room or in their letters, has largely become public property: nowadays such candid stories are told in popular magazines or on television and the internet all the time.

To conclude, the modern sexual order, which I have tried to catch in five features, replaced some basic traditional patterns of sexuality. In traditional society sexuality was largely embedded in a fixed natural and moral order. As a function of social and moral behaviour, sexuality had no distinct existence, but was instrumentally integrated with marriage, reproduction, kinship, fixed gender roles, social status and economic concerns. Sexual morality was dominated by a reproductive imperative: the crucial differentiation was between reproductive sex within marriage and acts that interfered with it. Personal sentiment and attraction were of minor importance to the calculus of economic security, socio-political interests and familial advantage in choosing a partner.

The psychiatric understanding of perversion signalised that in the modern experience sexuality, as a distinct impulse with its particular internal physical and psychological mechanisms, dissociated itself from other social domains and began to generate its own meanings. As such sexuality became associated with profound and complex human emotions and anxieties. Foucault rightly understood the continuity of nineteenth-century psychiatric interference with sexuality and the present-day craving for self-expression: both are based on the confessional model which proclaims sexuality as the key to the individual self. However, I would argue that his assessment of this model of sexuality as a limitation of possibilities is one-sided. It was more than an instrument of professional power and social control.

The work of Krafft-Ebing and Moll was open to divergent meanings, and contemporaries, among them many of their patients, correspondents and informants, have indeed read it in different ways and they played their own role. The individuals labelled as perverts were not just passive victims of medical power, having no other choice than to conform to its stereotypes. Their life stories played an important role in the production of knowledge on sexuality. Krafft-Ebing and Moll relied on them to give their more theoretical considerations an empirical basis and they enabled voices to be heard that were usually silenced. Individuals concerned capitalised on the psychiatric model in order to explain and to justify themselves. The psychiatric understanding of perversions fluctuated between medical labelling and control on the one hand and the realization of self-awareness and self-expression and the recognition of sexual variance on the other. The case histories and their social and cultural settings make clear that medical knowledge of sexuality could only have an impact because it was embedded in society. It was constituted in a process of social interaction between physicians who professionally shaped perversion as a psychiatric field and individuals who expressed themselves.

So, the modern understanding and experience of sexuality emerged not only from medical thinking in itself. They did not so much construct as articulate the modern experience of sexuality, which came into being in the context of longer-term social and cultural developments. The modernisation of sexuality involved transformations in the field of individualism, economic independence, social and geographical mobility, urbanisation, affluence consumerism, social democratisation, self-reflection, and personal identity as well as changes in the social function of sexuality. In the middle class context of romantic love, which presumed privacy, intimacy and psychic communication, personal emotion and desire gained primacy. As the clue to the authentic self, sexuality became associated with profound and complex emotions and anxieties, and as such it achieved importance in autobiographical self-reflection. In the wake of romantic love and self-analysis, sexuality grew into a separate, largely internalized, sphere in human life. Only at that point it was possible for medical and psychological science to define it as a distinct impulse or instinct, and to delve into its operation. And only at that point it became possible to liberate and emancipate sexuality from what people began to experience more and more as its social suppression.