

# Pleasure Seeking and the Aspect of Longing for an Object in Perversion. A Neuropsychanalytical Perspective.

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*In modern psychiatric classifications the term paraphilia has replaced the term perversion by changing the scope of the definitions from avoided procreation to failures of relationship-aspects of sexuality. Contemporary psychoanalysts also seem less interested in pleasure seeking aspects, which were so important within original Freudian thought, and instead concentrate interpretation on hostility and the history of the representation of objects. This paper discusses the connection between distinct object representations in perversions and attachment theory and neurobiological representations. It will discuss the observation that the neglect of pleasure seeking in perversion often results in a failure to recognise the addiction-like aspects of perversion, which seem to be particularly relevant to modern psychiatric and psychological thinking. The SEEKING-system (Panksepp, 1998) is used to conceptualise a neurobiological basis for pleasure seeking. This SEEKING-system may be "hijacked" by rewards in different forms of addiction as well as in sexual obsessions. The polarity between "drive representation" and "object representation," as created by Freud (1933, 1940a), may correspond to the polarity identified in contemporary thinking between the addictive or compulsive characteristics of sexual gratification (drive representation) and the influence of early object representation on the later ability to integrate instinctual wishes into relationships (object representation).*

**KEYWORDS:** perversion; paraphilia; sexual addiction; psychotherapy

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AMERICAN JOURNAL OF PSYCHOTHERAPY, Vol. 66, No. 2, 2012

## BACKGROUND/OBJECTIVES

### THE TERM PERVERSION

In the *Three Essays on the Theory of Sexuality*, Freud (1905) defined perversion in relation to his concept of a basic libidinal drive, framing it as a form of sexuality that does not achieve its biological purpose, i.e. procreation. The paradigmatic change in the conception of instincts (Kaplan and Gangestad, 2005; Tooby and Cosmides, 1990; Wilson, 1975) conceives procreation as resulting from a group of *different instincts* concerned with courting, mating, and breeding offspring. This may be one of the reasons why, even in clinical terms, the avoidance of cohabitation is no longer the decisive criterion for diagnosing paraphilia (DSM IV–TR, 2000). Nowadays it is primarily the aspect of hostility and the incapacity for consensual sexuality that defines these disorders. The term paraphilia has, therefore, partially replaced the older term perversion by shifting the scope of definitions from avoided procreation to the failure of relationship aspects of sexuality.

The current psychiatric definition of paraphilia (DSM IV-TR) includes:

*Recurrent intense sexually arousing fantasies, sexual urges, or behaviors generally involving 1) nonhuman objects, 2) the suffering or humiliation of oneself or one's partner, or 3) children or other nonconsenting persons that occur over a period of at least six months (Criterion A). For some individuals paraphilic fantasies or stimuli are obligatory for erotic arousal and are always included in sexual activity. In other cases, the paraphilic preferences occur only episodically (e.g. perhaps during periods of stress), whereas at other times the person is able to function sexually without paraphilic fantasies or stimuli . . . [ . . . ] the diagnosis is made if the behavior, sexual urges or fantasies cause clinically significant distress or impairment in social, occupational or other important areas of functioning (Criterion B). (Shortened definition, American Psychiatric Association, 2000, p. 566).*

Even Freud did not rely on his early definition (avoidance of procreation) in his later publications. In *Fetishism* (1927) and *Splitting of the Ego in the Process of Defence* (1940b) the most important element for the definition of perversion was the fetish. The term perversion was only used for those forms of bizarre sexual activity where castration anxiety could be assumed to be the cause of adhering to a fetish rather than being aroused by sexual partners. Castration anxiety originally meant the fear of losing the pleasure-spending organ. Castration anxiety was understood by later psychoanalytical thinkers even more metaphorically as representing the loss of the possibility of feeling (sexual) pleasure. One possibility of overcoming (castration) fear is to avoid the sight of the stimulating (and

simultaneously) fearsome sexual incentive (the female genitalia) by looking for something reassuring and soothing that offers a feeling of security. It remains unclear why the sight of the female genitals should be traumatic for some children and not for others. Bach (1994) tries to explain these differences:

One may surmise that in some cases the whole mother and not only her genitals has been traumatic or to put it concretely, that some of those children who find the sight traumatic have discovered not only a fantasized gap in the genital area but also an actual gap in relatedness, and that the child's entire psyche has been mobilized to deny and patch over this gap. In certain cases one can regard this fantasy of a frightening genital nothingness as the ultimate body metaphor for a series of developmental losses culminating in the fear that there is no one there to love or to be loved (p. 12).

The missing genital thus comes to symbolize the absent relationship.

### PERVERSION AND ATTACHMENT

Even if infantile sexuality is understood in a broad sense to comprise all forms of a tender bodily relatedness, the intrapsychic representation of relationship can no longer be conceptualized exclusively in terms of infantile sexuality. Bowlby (1969) presumed that the attachment between a baby and its mother was a requirement for all mammals to survive in the wild. Attachment is a product of natural selection. Its appearance as a higher order pattern at the age of 18 months is dependent on the regular activation of a group of rather primal instinct patterns (like feeding, smiling, crying, clinging, running away, and being cuddled), which bind the child to the mother. Panic reactions in the case of separation from the mother are observable signs of the achievement of an attachment pattern. Such panic reactions are one of the basic emotional systems, which, according to Panksepp (1998), can be located in certain areas of the brain. One of the clearest neuropeptide facilitators of separation distress is corticotropine-releasing hormone (CRH), while the brain oxytocin system promotes the construction of a social bond (Liotti and Panksepp 2004; Insel, 1997). In addition, the brain opioid system, with its panic reducing and calming effects, may play an important role in social (Panksepp et al., 2002) as well as in sexual (Liebowitz, 1983) rewards. However, stimulation of the genitals and other body zones of the baby by the mother and other interactions of instinct patterns, such as exchanging smiles, crying, uttering different sounds and echoing them, running away, and catching are important for the development of attachment. The development of wishes

for attachment and those for sexual activity, therefore, have to be conceptualized differently, allowing for a dialectic interaction between both (Bowlby, 1969).

Freud may have grasped something of this dialectic interaction when he considered a bidirectional development of sexuality:

A normal sexual life is only assured by an exact convergence of the affectionate current and the sensual current, both being directed toward the sexual object and the sexual aim. The affectionate current comprises what remains over of the infantile efflorescence of sexuality (Freud, 1905/1920, p. 207).

Furthermore, in *A Universal Tendency of Debasement in the Sphere of Love* (1912), Freud stated that:

Two currents whose union is necessary to ensure a completely normal attitude in love have failed to combine. These two may be distinguished as the *affectionate* and the *sensual* current (p. 180).

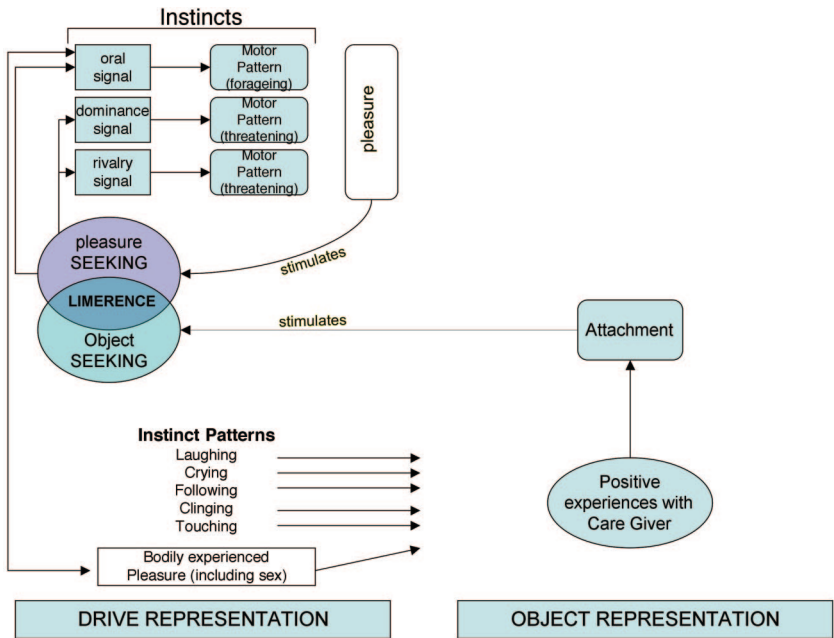
The tender part of erotic feelings may represent the object-relational aspect or the integration of sexual body feelings in the experience of attachment.

Many human beings are familiar with the dialectic between sexuality and attachment: on the one hand, they feel sexually attracted to someone without the desire for a deep personal partnership, while on the other hand, they feel a strong separation anxiety in a long-lasting relationship where sexual attraction has already disappeared (Eagle, 2007).

Limerence, as described by Tennov (1979), is a result of the connection of sexual attraction with the wish to remain close to the object of desire—a tendency for closeness as observed in a secure attached child. According to Tennov (1979), falling in love (limerence) is defined as an ardent longing for the love object combined with an inability to think of alternative gratifications. Therefore, Freud's bidirectional development of wishes in love today may be expressed in a slightly different way as the convergence of the activation of erogenous pleasure experiences (component instincts) with the activation of attachment feelings and expectations.

According to Hazen and Zeifmann (1999), in the romantic love of adolescents the love object becomes the “new” representative of the first important attachment figures (the primal care givers). However, the connection between sexual behaviour and attachment style is more complicated: individuals with high levels of attachment avoidance also tend to avoid intimacy (Simpson et al., 1996) or to prefer “unrestricted” or promiscuous sexual behaviour (Brennan and Shafer, 1995; Brennan et al.,

Figure 1  
THEORY OF LIMERENCE



1998a; Fraley et al., 1998; Hill et al., 1994). In a broad range of studies, attachment style measures were strongly related to the kinds of intimate sexual activities preferred, with *secure* individuals enjoying a wide range of sexual activities usually in the context of long term relationships (compare Hazen et al., 1994; Fraley and Shaver, 2000; Feeney and Noller, 2004, Feeney et al., 2003, Miculincer and Shaver, 2007; Miculincer et al., 2002, Roisman et al., 2005).

Feelings of romantic love may be reduced in some individuals with paraphilic preferences. Their object of desire fascinates them, but is rarely connected with romantic love. This may be related to attachment factors. Rathbone (2001) compared the attachment style of individuals participating in sadomasochism recruited by an advertisement in a journal specialising in sadomasochism [SM] ( $n = 48$ ) with the attachment style of subscribers to two journals on economics ( $n = 35$ ). None of the people in the SM group had ever been in treatment for the sexual preference; nevertheless all of them showed different forms of “insecure attachment styles.” In the control group 53% showed a secure attachment style (a proportion also found in random samples). While no differences in

depressive symptoms were found in either groups, depressive mood and sexual desire were positively correlated in the SM group, but negatively in the control group. In most people erotic interests decrease while they are in a depressive mood. Others, mainly those with a propensity for addictive or compulsive forms of sexual behavior, may use sexual stimulation as a coping mechanism for dealing with sadness, pain and feelings of loss (Bancroft et al., 2003b). The role of narcissism in perversion, where a positive self-image is used defensively against feelings of intimacy, may correspond with the concept of attachment avoidance (Hazan & Shafer, 1987; Kernberg, 1988, 1991, 1992; Nowick & Nowick 1991, Rosenfeld, 1971, 1988; Stolorow, 1975).

The empirical findings regarding the dialectic between attachment patterns and sexual pleasure seeking may have some impact on the psychodynamic construction of perversions. It makes a difference whether we suppose that all object longing has some connection to (conscious or unconscious) erotic feelings (an assumption that would correspond with traditional libido theory), or whether we suppose that sexual pleasure seeking and the avoidance of loss spring from different sources that sometimes reach a compromise but can also conflict with one another. Neurobiological findings support the second hypothesis by differentiating between PANIC and SEEKING.

The emphasis on attachment in cases of patients with perverse symptom formation can be seen as a logical consequence of the development of psychoanalytic observations and descriptions in the clinical field of perverse symptoms during the last 50 years. Bak (1953) was one of the first authors to describe disturbances in the mother–child relationship in cases of fetishism, resulting in inordinate separation anxieties. Greenacre (1953, 1955, 1968, 1970, 1979) abundantly described disturbances in the mother–child relationship in the first 18 to 24 months of life, resulting in an impaired body and self-image and the projection of aggression onto relational objects exacerbating castration anxieties during the subsequent phallic and Oedipal periods. Khan (1979) proposed that in perversion the sexual object plays the role of an “as-if - transitional object” (p. 14). He referred to Winnicott’s (1953) statement, that if the integration of ego functions is disturbed as a result of an inadequate maternal holding environment, then transitional objects have very different characteristics. In these cases they may acquire a fetishistic quality (in being used as a masturbation device). Similarly, McDougall(1986) proposed that in patients with perversion, the mother–child relationship interferes with the process of internalization through which the child develops an autono-

mous psychic structure. The breakdown of the internalization process during the stage of transitional phenomena impedes the child's use of transitional objects in his or her efforts to separate from the maternal figure. This means that in such cases the transitional object does not develop further to symbolize the whole person of the mother. It remains a highly erotized part object with a directly pleasure spending quality. Stoller (1975) interpreted perversion as "the erotic form of hatred" or "the reversal of a defeat in childhood in a triumph in adult life" (p. 3; but see also Brenner, 1996; Eshel, 2005). In Stoller's view castration anxiety does not simply mean anxiety about the loss of one's genitals, but also the loss of one's female or male identity. For Stoller (1991)—as for Freud in his later publications (1927; 1940a; 1940b)—perversion is not a simple phenomenological description but a *functional* term. He diagnoses perversion only if analysis of the patient's symptom in a psychoanalytic setting shows that it is connected with conscious or unconscious fantasies of hostility. Such a definition is dependent on a first person perspective and cannot be used synonymously with the DSM-IV definition of paraphilia, which depends on observations of the patient's behavior (third person perspective). However, both concepts overlap substantially. In most cases of paraphilia the intrapsychic dynamics of perversion will be found if a psychoanalytic investigation with the patient is possible.

### PERVERSION, PARAPHILIA AND HYPERSEXUALITY

Only a few psychoanalysts have taken the hypersexual or addictive character of certain perversions into account, where at least the illusion of being unable to renounce pleasure plays a role (Fenichel, 1945; Myers, 1994, 1995; Kernberg, 1967; Kohut, 1971). Most psychoanalytical investigations into perversion conceptualised perversion and hypersexuality differently in spite of the fact that similar problems in the mother-child relationship have been described for both (Goodman, 1998). Klein (1957), for instance, addressed both the gratifying and the defensive functions of hypersexuality. She stated that hypersexuality is motivated (1) by the quest for sexual gratification, and (2) by the need to defend against hatred of and wishes to destroy the oral mother, towards whom ambivalent feelings operate. Klein focused on the premature intensification of genital desires and trends that may result from missing adequate oral gratification. The major consequence is a mixing up of oral and genital trends, through which "the oral relation becomes genitalised, and the genital trends become too much coloured by oral grievances and anxieties" (Klein 1957, p. 195). The ultimate incapacity of genital acts to satisfy oral needs, Klein



noted, perpetuates the insatiable drivenness of obsessional masturbation, promiscuity, and compulsive sexual activity.

Freud's libido theory alone seems insufficient to explain such addiction like patterns in perversions. Freud developed a concept of a libidinal drive similar to hunger. Drive (*trieb*=instinct according to the English Standard Edition) was defined as a constantly flowing force ("*eine immer fließende Kraft*"), a need caused by internal sources of stimulation (Freud, 1915, p. 119). As we now know, this exclusive concentration on internal sources neglects the important role of external stimuli (e.g. internet pornography). A neurobiologically oriented extension of the concept of libido according to the conceptualization of SEEKING (Panksepp, 1998) might be a helpful for further consideration.

Panksepp defined the term "SEEKING-system" as an activation of circumscribed brain-circuits (mesolimbic dopamine-system—an extended lateral hypothalamic corridor), which have a "characteristic feeling tone—a psychic energization that is difficult to describe, but is akin to the invigorated feeling of anticipation we experience when we actively seek thrills and other rewards" (Panksepp, 1998 p. 145). Such activities are highly dependent on the activation of dopamine transmitting cells in the ventral tegmental area (VTA). These cells release dopamine into the nucleus accumbens, which sends amplified signals to the ventral pallidum. With the pallidum output amplified, the motor regions are strongly activated and movements initiated. It is important to stress that activation of the mesolimbic dopamine system is not identical with the feeling of reward or pleasure. Its activation rather represents a "reward prediction error" meaning that the reward is much greater than predicted by similar experiences in the past (Schultz, 1989, p. 1). Ordinary reward or pleasure feelings do not activate the system. Addictive substances have a high impact on this system. Alcohol and cocaine especially "hijack" the mesolimbic dopamine system and result in an increase of dopamine receptors in the nucleus accumbens (Gear et al., 1999; Breiter et al., 1997). According to Solms and Turnbull (2002), activation of the SEEKING-system may even have an aggressive underpinning, for example, when animals are tracking a prey. In such cases the seeking acquires the character of cold aggression. According to Berridge and Robinson (2003), manipulation of the mesolimbic dopamine system changes an individual's *wanting* of drugs, for example, but not their *liking* of them. Wanting means the expectation of pleasure, not the pleasurable feeling itself (liking). This distinction between wanting and liking may reflect the psychological distinction between desire and pleasure.



Our hypothesis is that addictive forms of perversion/paraphilia correlate with a dysregulation of the SEEKING-system or a pathological wanting, respectively. The possibility that these systems can be hijacked by one or two extremely powerful stimuli, which bypass nearly all other possibilities of anticipating pleasure, supports the idea that the SEEKING-system could correspond to the pleasure principle (perhaps then better named desire principle). Individuals addicted to drugs or people who are compulsive gamblers would agree that their striving has a quality of pleasure seeking. Some of them would also agree that this pleasure is a compensation for other gains, even love. However we regularly face great problems when trying to interpret these feelings of pleasure as solely erotic in nature. The descriptive term of pleasure corresponds better both with patients' perceptions and with empirical findings than the highly theoretical and therefore still speculative term libido with its erotic connotation. However, refraining from direct application of abstract libido-based constructive interpretations does not mean giving up the entire concept of component instincts playing an important role in childhood sexual development and in the fixation on concrete forms of bodily gratification.

### COMPONENT INSTINCTS AND THE CONCEPT OF INSTINCT PATTERNS

The overriding importance of one component of instinct (oral, anal, genital, exhibitionistic, voyeuristic, sadomasochistic) over the others played a major role in Freud's theory of perversion as formulated in the *Three Essays* (1905). It is easy to demonstrate in clinical case material that perversions very often represent overindulgence in one of these component instincts. Taking a part for the whole (*pars pro toto*), these component instincts preoccupy a person with paraphilic symptoms. The SEEKING system may mediate such a "wanting" of instinct patterns.

It is not difficult to describe oral, anal, or genital stimulation and gratification according to the modern ethological definition of instinct patterns as motor patterns, which are elicited by certain stimuli and limited by others (Tinbergen, 1951; Hardy, 1964; Beach, 1976; Lorenz, 1981). Other body functions, such as smelling and touching attractive body parts, have to be added. They could easily be called "building blocks" for later fully-fledged sexuality. Their rehearsal elicits obvious (more or less sexual) pleasure in the child. It is very probable that such experiences leave largely unconscious traces in the procedural memory. Some studies investigated the relationship between childhood sexual experience with peers and more frequent or more enjoyable sexual experiences during teenage years (Reynolds et al., 2003; Bancroft et al., 2003a). However, unfavourable

effects of early sexual stimulation (especially if adults are the source of such stimulation or over-stimulation) have been discussed much further in scientific literature: for instance, Finkelhor's (1988) hypothesis that experiences of child sexual abuse (CSA) result in a traumatic sexualisation which still needs further clarification.

Another important factor may result from the increase of sexual hormones during puberty and the sexual experiences during that time. Freud himself assumed that the increase in sexual hormones in puberty was necessary to give sex-like play activities of childhood their explicit sexual character (Freud, 1912).

### **THE LIBIDO THEORY REVISED**

Whalen (1966) and Bancroft (1989) view hormonal factors (i.e. androgens) as important determinants of sexual arousability and desire. It is, therefore, likely that hormonal factors may represent one aspect of libido.

Another aspect may be represented by the bilateral-bipolar-universal-response-potentiating system, a reticular formation of neurones in the medulla oblongata that contribute both to cerebral cortical arousal and to autonomic arousal respectively. As Pfaff et al. (2007) underline "specifically with respect to psychoanalytic concepts, these networks provide the psychic energy necessary for the expression of libido" (p. 173). However, this system cannot be viewed synonymously with libido, for even though it potentiates all aspects of sexual responsiveness, it also potentiates the actions of all other behavioural systems (Yovell 2008, p. 120). "General brain arousal could be considered an obligatory precursor of libido, necessary but not sufficient" (Pfaff et al., 2007, p. 180). According to Yovell (2008) the drive needs the activity of the SEEKING-system to seek and find its object (Yovell 2008, p. 122).

According to our hypotheses the SEEKING-system may represent the wanting of (more or less exchangeable) incentives, while hormones (and especially testosterone) may be related to the sexual and aggressive underpinnings of all perception and activities. Neither of these hypotheses can grasp all aspects of Freud's depiction of libido, with its implicit meanings. We, therefore, suggest a correspondence of SEEKING with Freud's pleasure principle and refrain from further biological explanations for the concept of libido.

Kernberg (1992) extensively discussed the modern concept of libido, compatible with modern theories of affects, as well as with psychoanalytic clinical experience, and differentiating between libidinal and aggressive attitudes and activities in relation to objects. Kernberg notes that Freud

always referred to *instincts* as discontinuous, inherited behavior patterns that vary little from one member of the species to another. It seems impressive to Kernberg how closely Freud's concept of instinct parallels modern instinct theory in biology (Lorenz, 1963; Tinbergen, 1951; Wilson, 1975). In Kernberg's view "affects are instinctive structures—that is, biologically given and developmentally activated psychophysiological patterns. It is the *psychic* aspect of those patterns that becomes organized to constitute the aggressive and libidinal drives. The partial sexual drives are more limited restricted integrations of corresponding affect states, and libido as a drive is the hierarchically supra-ordinate integration of them—that is, the integration of all erotically centered affect states" (1992, p. 5). That means libido is no longer the source of all affects, but is an expression for their integration into a more highly structured motivational move towards the object. This integration needs a long period of development alongside environmental experiences with affectively important objects. It is not very probable that a material representative for such a high order motivational stance in the brain could easily be found with today's methodology.

In the history of perverse and paraphilic patients, we are often able to reconstruct situations in which sexual games played before puberty, became massively erotized during pubertal masturbation fantasy. Later these games often vary, but they still remain a central theme of sexual stimulation (Stoller, 1975). As an example two of my patients are described: one male patient with a high oral fixation. As a child he licked his older sister's vulva, and this oral stimulation became a pattern of his adult sexuality. He preferred cunnilingus to any other sexual practice. During her childhood a female patient of mine played at being part of a copulating couple with a female friend. Because the patient presumed male part of this couple, she put a small rolled up piece of cloth in her slip, fantasising that it was a penis. In her later sexual life she could not reach orgasm without (at least in fantasy) using a similar piece of cloth.

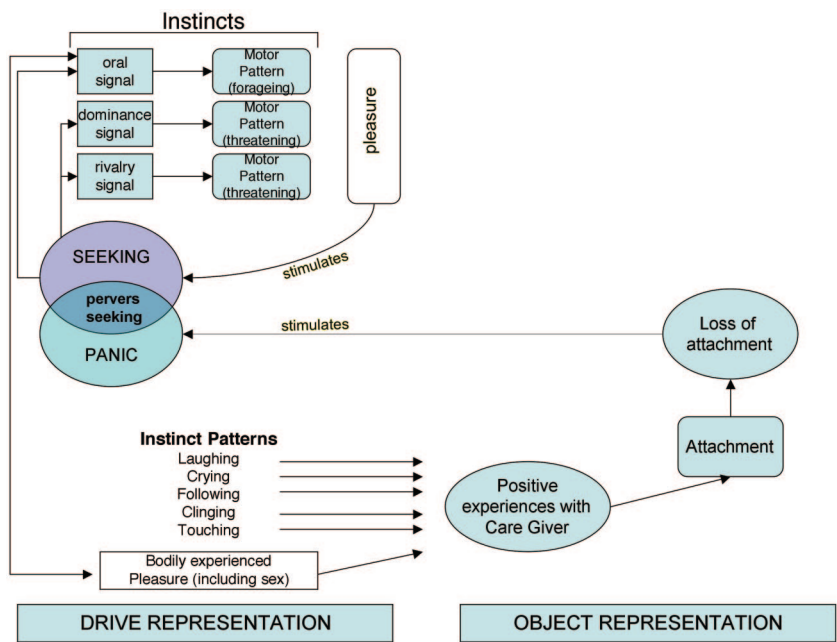
If instinct patterns play an important role in human sexuality, then psychoanalysis has to take more seriously the position developed in modern evolutionary psychology and in the neurosciences that external signals may trigger patterns. The literature indicates that the character of such signals—now called incentives—is a much stronger motivator in animal experiments than the pay off from the pattern itself. Experiments with mice (Sheffield & Roby, 1950; citation from LeDoux, 2002) demonstrate it is not the nourishing quality of sugar (the pay off) found in the goal of a labyrinth that motivates mice to seek it, but rather the taste of sugar

itself. The incentive motivates, not the nourishment (the pay off of the instinct to forage for food). All modern motivational theories concerned with sexuality take incentives (signals) and the elicitation of behaviour systems—or potential actions (Frijda, 1986)—into account. But the interaction of incentives with the “energising” processes from within the body is still under investigation and not really understood. According to Singer and Toates (1987), and later, Toates (2009) sexual motivation, like hunger and thirst, emerges from an interaction of external incentives and internal states, which can be proved by deprivation experiments. Effects of abstinence are reflected in increased efforts to obtain sexual access and a broadening of sexual choice. Lorenz (1963, 1981) in his early studies described doves that became less sexually discriminating as a result of deprivation. In the end even a stuffed pigeon or a rolled up cloth aroused interest (an animal model for the development of fetishes). However, besides all other processes responsible for sexual desire in this paper, we want to stress the influence of incentives and the development of incentive salience (wanting) according to Berridge & Robinson (2003), or of the SEEKING process according to Panksepp (1998). Normally the dopaminergic SEEKING or wanting system, regulating the approach to reward, and the opioid systems, regulating reward consumption, may operate in a symbiotic fashion (Panksepp et al., 2002). Addictive forms of perversions or paraphilias may be viewed as maladaptive disconnections or dysregulated interactions in one or both of these systems. Figure 2 demonstrates how we conceptualise the interaction between object-representation and drive representation in perversion.

## CASE PRESENTATION

Does this theoretical framework have any implications for psychotherapy? As described earlier in this paper, during the last decades psychoanalysis has concentrated almost exclusively on object-relational aspects of perversions. By contrast we think that a reformulation of drives that takes aspects of SEEKING and wanting into account will help to make the addiction-like course in perversions more understandable. In addition, we have stressed the role of incentives in considering the nature and experience of motivation. This implies that stimulus control and exchangeability of stimuli should be recognised and tackled within psychoanalytical psychotherapy’s approach to working with patients suffering from perversions. However, we do not want to underestimate the importance of relational and attachment aspects in the understanding and treatment of perversions. Object relations may be the basis not only for the capacity of

Figure 2  
THEORY OF PERVERSION



an individual’s stimulus control, but also for therapeutic endeavours. This is especially true when engaging with negative affects resulting from stimulus control, which can be overwhelming for the patient.

A 46-year-old married Protestant pastor requested psychotherapy shortly after he turned himself in to the police for viewing child pornography on the Internet. He was tipped off to possible police action by another user of Internet pornography whose computer had been confiscated by the police. A month after his turning himself in, the police screened the pastor’s computer and found recently downloaded child pornographic pictures, offers by the pastor to share the pictures with other users, and obscene comments. During the first counseling interview, he was asked why he did not stop his Internet activities even after knowing how dangerous it might become for him; he answered that he thought he might have developed a sort of addiction. He had to pay a fine of 6000€ and step down as a pastor, a provisional retirement being ordered by the church. In this situation he was eager to start psychotherapy. In the years before he had reluctantly tried to come into contact with psychotherapists and failed because he was simultaneously afraid to open up to other

persons and hopeful that God would help him out of his strange double life. When he read his punishment order and realised the obscenity of his comments on the little girls' genitals and his invitations to others to look at them, he became deeply ashamed and wanted to do penance for his crime. He felt that his new job—delivering a morning newspaper, running from house to house as an anonymous person—was part of a penance, and he felt relieved by this fact.

This was the situation when the patient came for his first interview and treatment commenced. The first author became his therapist shortly afterwards. In the first interview the patient seemed authentically irritated by his own incapacity to overcome his addictive pleasure in pornography and inability to realize what he had intended to do to children. He was eager to comprehend how he became an outcast of the type he had always thought only his father was. He recalled that as a child he wanted so much to be different from his father. At the same time there was a sort of roguish twinkle in the patient's eye—as if he were asking for some understanding of his infantile monkeyshines—thus heralding a splitting in his ego, which would be a theme in the following analysis. A borderline structure to his personality soon became apparent. However, patient's life history elicited the psychoanalyst's compassion and capacity to identify with the patient's problematic situation, and therapy could commence: the patient's father was a sailor and drunkard. He described his mother as a simple person from the countryside, but intelligent and smart. His sister, who was three years older, developed an alcohol dependency like her father, forcing her into treatment for years.

He recounted that his childhood was marked by his father's alcoholism and violence. His father had thrown furniture out of the window, beat a guest at a New Year's party, argued aggressively with his wife, and had an epileptic seizure on the street, as his son brought him home from the pub. Although he never beat his wife or the children, they were, nevertheless, afraid of him. The patient recalled feeling like an underdog at school as well as at home. His mother took care of the children, but seemed to despise him (as did his father) for his red hair and for not being a "rough boy." His mother divorced from her husband but never ceased to support him till he died. Perhaps—the therapist supposed—there might have been a twinkle in her eyes with regard to his father's monkeyshines. When the patient was 17 years old he left his parents' home and came into contact with church institutions as well as discovering the possibility of studying protestant theology. The post of pastor became more and more fascinating to him. He had a talent for caring for and preparing children for



confirmation, something for which he was praised. He felt that his post was a source of self-confidence, that which he had been missing in childhood. He called it “borrowed self-confidence,” however, because he was never self-assured enough, always wondering if he was an impostor. The obligations of his post brought him into conflict with his wife, who had lived with him in a good relationship since their student days. But after they celebrated their marriage (more out of an obligation to his role as pastor than as a fulfillment of an authentic wish) the couple grew apart, sexuality deteriorated, and his secret internet pornography viewing began.

During the opening phase of treatment, the mechanisms driving him in the consummation of pornography became apparent. As an adolescent he had sometimes (about every half year) taken a look at a journal published for friends of nudist camps, which had pictures of naked adults and children. Later he used pornographic videos to “slow down” when he felt frustrated, and still later he found pictures on the Internet of “Naomi,” a Japanese child posing like an adult pin-up. This was his “gateway-drug.” He instantly felt a strong palpitation of the heart and became aroused. Again and again he wanted a repeat of these elated feelings to overcome stress and feelings of defeat. He realized that this sort of gratification was neither compatible with the moral demands he proposed in church nor with his feeling of attachment to his wife. Actually once his wife recognized her husband’s preoccupation with child pornography she felt deeply abandoned, but as a result of her own problematic upbringing, was unable to confront him with her feelings of abandonment. Their estrangement increased and he “went down,” and became “little 9/11”—his code name on the Internet, which both hinted at his age preference, and was a conscious reference to terrorism and the destructiveness of his actions. Slowly, he began to understand that not stopping his dangerous Internet activities in the face of looming criminal prosecution had aspects of defiance and a tendency to self-harm.

Besides these addictive aspects of his pornography consumption, the history of his relationships shed light on the peculiar preference he developed. Because he and his family lived in a cramped, small flat, he slept in his parents’ bedroom till age 14. Additionally he was ashamed about being small and awkward, he did not dare rival other boys or date girls. However, there was one boy who found him (the patient) attractive, and he had his first sexual experience, mutual masturbation. Before puberty he had one or two volatile sexual experiences with little girls, who, he found, were much less inhibited than he was. From this time on masturbation became an important source of relief for him.



He had three important relationships prior to meeting his wife (all three were with girls/women). In the first relationship it took him a long time to overcome his sexual inhibitions, and he often struggled with feelings of impotence. The second relationship lasted only a few weeks, because again he had difficulties to overcome erection problems when trying to penetrate her. The third relationship with a girl, X, who later identified herself as a lesbian; X was sexually very gratifying for him because tender touching was much more important than intercourse.

He shared a great deal of insecurities with the woman who would become his wife; she had a mother who was alcoholic and felt abandoned by both parents. Her job as a solicitor for psychiatric patients fitted well with his interests and they felt tuned to the same wavelength. Sexuality with her was wonderful in the beginning because she could show him her exclusive interest. The first ten years were gratifying for both, but the relationship deteriorated massively with his increased working hours as a pastor. She had an early abortion early in her marriage but even then the couple was not able to discuss their conflicts and both retreated into their work obligations. An important compensation for all the troubles he had was the way the little girls glanced at him with lighthearted joy during church service and leisure time activities, admiring him in a way, and he idealized every contact with them. He never touched a child, but was sometimes criticized by other clergy members for surrendering all his authority and behaving like a child himself.

The therapist's first countertransference feelings were a sneaking suspicion that he was becoming the victim of an impostor pastor. However, by repeatedly confronting the patient about the double strategies he used with his best friend and his wife (who felt simultaneously captured by his charm and betrayed by incapacity to recognize their real needs and feelings) the therapist increased the patient's efforts to overcome his own "being artificial." The patient spoke honestly about his mother's lying and sometimes even shoplifting, of which he was very ashamed, but on the other hand he could understand her and he identified ambivalently with her hidden aggression towards society's norms. It did not take much to make the patient consider the split in his inner representation of female children: on one hand he admired and even envied them for their optimistic view of the world and on the other hand fantasized about aggressively breaking these small and fragile objects. It took much longer to relate this splitting to other splits, especially in his attitude towards his mother and father. He was aware of his refusal to identify with his father and his interests, being himself the fragile and intellectual boy, who later

became the priest who idealized nonviolence. Yet he had to admit that there was a lot of defiance in him. And he had a tendency to protest against society's demands that connected him with his father's violence and his mother's hidden criminality. As he became aware of this split, he remembered his teddy bear, on which he alternately inflicted injuries and treated, "reversing" operations he (circumcision) and his sister (appendectomy) had undergone.

It seemed apparent that the little boy had developed an insecure attachment style, which influenced massively ambivalent, and sometimes even paranoid, transference feelings in relation to the therapist. To avoid suspiciousness from both sides contaminating the situation it was necessary to question the patient's tendency to impress his environment without disturbing his narcissistic balance. This was only possible if a narcissistic mirror-transference had been accepted in the first phase of treatment (compare Morgenthaler 1974 and Stein 2005). The tendency to split, to relate in a narcissistic way to objects, and to prefer immediate pleasure and aggressive triumph to shared gratification with a loved object, may be a consequence of insecure attachment-development.

## DISCUSSION

We do not want to elaborate further on the well-known psychoanalytic handling of splitting of object relations in transference and reality, but rather to point out that certain signals and incentives to pleasure may become so overwhelming that they are reminiscent of the defense mechanisms of addiction. Abstinence from sexualized externalization may enable the person concerned to feel the anxieties and depression he is defending against with his arousal and pleasure. A slightly narcissistic gratifying mirror-transference—stressing the patient's capacities and resources—may help to make these anxieties and depressions tolerable. Nevertheless, the necessity of abstinence must be discussed, especially in cases where the pleasure of perverse activities may harm the patient or his environment. Taken from a psychoanalytic point of view, it may be a helpful tool to compare the fetishistic character of such incentives with drug effects, especially if the patient uses these behaviors as compensations when feeling defeated or during breaks between treatment sessions. This vignette also demonstrates vividly how a balance between instinctual wishes and defenses against them may be influenced by an excessive supply of incentives (the pictures and films available on the Internet) and may result in an absolute or relative breakdown of defense mechanisms. The latent pedosexual tendencies of the patient would perhaps never have

become manifest, had the Internet not offered the possibility of easy release.

Today, abundant empirical data corroborate the idea that adverse childhood experiences influence later sexual performance in animals (Harlow, 1946; Twigg et al., 1978) as well as in human beings (Smallbone & Cabe, 2003; Smallbone & Dadds, 2000; Feeney & Noller, 2004; Roisman et al., 2005).

If bodily experiences are exclusively valued with regard to their relevance for object relationships, the directly gratifying aspect of stimulating feelings and their effect on psychic structures may be overlooked. Solms' and Turnbull's (2002) idea of connecting Panksepp's SEEKING-system with Freud's libido theory may encourage a new conceptualisation of sexual desire and their pleasure aspect. However, even this idea needs clarification, since the SEEKING-system is used to anticipate varieties of pleasure with different connotations. Of course, memories of positively experienced relationships with primal caretakers in direct and indirect form (via attachment patterns) must have a strong influence on the assessment of such actual incentives as promising pleasure or displeasure. However, taking another perspective, the structure of the SEEKING-system itself may have an influence on the anticipation of pleasure. Under certain circumstances distinct incentives may become overwhelmingly important for the SEEKING-system, repelling all other possibilities of gaining pleasure. Sexual incentives may take this position. A stable and secure attachment may serve as one protective factor against such hijacking of the SEEKING-system. Both of these factors may play a role in the development of paraphilias or perversions. Insecure attachment patterns may increase the vulnerability to traumatic experiences in early, and later, close relationships. Their impact may result in the client's unconsciously anticipating that the object of desire will be hostile or dangerous. Fetishes are used as protection against such hostilities. Characteristics of fetishes and other sexual incentives might be at least partly preprogrammed in a way similar to other instinct patterns. These incentives, with their ability to anticipate pleasure, may change the activity of the SEEKING-system whilst, at the same time, resulting in a more addictive pattern of wanting. Freud's polarity between "drive representation" and "object representation" (for example in Freud 1933, lectures 32 and 33, and Freud 1940a, chapters 2, 3, and 4) may correspond to the contemporary conceptualisation of a polarity between, on the one hand, the addictive vicissitudes of sexual gratification that are, under certain conditions, caused by the structure of the SEEKING-system (drive representation), and the influ-

ence of the history of early object representation on the later ability to control and integrate instinctual wishes in relationships on the other (object representation). Further data from neurobiological research and experiences of psychoanalytically oriented psychotherapy that consider the emotive systems are necessary to corroborate this hypothesis.

This paper has emphasised the importance of instinct patterns and attachment constellations for the development and maintenance of perversion and paraphilias. There are many other influences and issues that have to be considered in a theory of perversion and in clinical practice. These influences are based on individual constitutional factors shaped by life experiences and on sociocultural factors in interaction with and individual's environment. Such constitutional factors are impulsiveness, the ability to control tension and affect, a propensity to depression (Rathbone, 2001; Bancroft et al., 2003b), as well as certain coping strategies and personality traits such as antisocial tendencies (Hanson et al., 2003).

Of course different cultures condone different forms of sexual activity and offer different channels for gratification. It is outside the scope of this paper to explore all these possibilities. We are far from being able to quantify these influences in practice as well as in theory.

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