

CONTEMPORARY VICISSITUDES OF THE OEDIPUS COMPLEX IN ADOLESCENCE

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Abstract

This study investigates contemporary developments in sexuality through a theoretical lens grounded in both the Oedipus Complex and the Castration Complex. We analyze data from the Ambulatory for Transgender Care at a public university hospital and conduct clinical observations with five adolescents. While the Oedipus Complex often no longer manifests as it did in Freud's time, associating it with the theory of castration offers a robust framework for understanding unconscious determinations and their role in adolescent experiences today. Three axes structure our research: The first axis is based on a literature review. We refer to psychoanalytic theory on adolescence, positioning it as a critical phase for structuring sexual differentiation and negotiating subjective identity within the division of the sexes, questioning binary identifications. We engage in an in-depth analysis of fundamental concepts by Freud and Lacan to examine the relationship between the Oedipus Complex and the theory of castration. Our hypothesis is that associating these two fundamental concepts provides a better understanding of today's clinical findings. The second axis is clinical. We present five carefully selected clinical vignettes and focus on the narratives of adolescents attending the Ambulatory. Our guiding question is: how does adolescent sexuality, with its contemporary issues of identity and self-construction, contribute new perspectives to psychoanalytic theories of sexuality? We also examine how these cases provide insights into the continued applicability of psychoanalytic concepts to contemporary clinical realities. At the same time, we critically analyze the clinical findings, integrating them with the theoretical framework established in the first axis. The third axis underscores the relevance of classical psychoanalytic theories for understanding the complexities of adolescence in today's context. By linking the Oedipus Complex to the theory of castration, this study addresses cases that raise issues Freud could not have anticipated, given their relative invisibility a century ago. This approach counters criticisms of psychoanalysis as an outdated or obsolete discipline, demonstrating its capacity to engage with and illuminate contemporary clinical challenges.

Keywords: *Psychoanalysis, Oedipus Complex, Castration Complex, adolescence, transgender care.*

1. Introduction

Freud's first reference to Oedipus implies the tragedy long before the complex. Situating it is fundamental to our argument for two reasons: (1) because it allows us to demonstrate that the reduction of the Oedipal novella – distinguished here from the tragedy –, as it came to be read after this initial reference, significantly weakened the force and relevance of what led Freud to make that reference, as we will explain below; (2) because revisiting Oedipus in the context of the tragedy – where it originated with Sophocles – reinforces it as a structure that never ceases to be written, affirming its necessity. As Lacan observes in his 20th Seminar, "the necessary is linked (*conjugué*) to the impossible" (1999, p. 59).

It was in his letter to Fliess on October 15, 1897, that Freud referred to the tragedy *Oedipus Rex* for the first time.

Being totally honest with oneself is a good exercise. A single idea of general value dawned on me. I have found, in my own case too, being in love with my mother and jealous of my father, and I now consider it a universal event in early childhood [...]. If this is so, we can understand the gripping power of *Oedipus Rex*, in spite of all the objections that reason raises against the presupposition of fate; and we can understand why the later "drama of fate" was bound to fail so miserably. Our feelings rise against any arbitrary individual compulsion [...]; but the Greek legend seizes upon a compulsion which everyone recognizes because he senses its existence within himself (Freud, 1897/1985, p. 272).

The association of the Oedipal novella with Sophocles' tragedy allowed Freud to recognize it as preordained as tragic, that is, inherent to the subjective constitution. It derives from what Freud defined as sexuality: also universal to human beings, it begins in childhood – a notion that was highly scandalous at the time – and "if the child has the mother as its greatest and first reference, the mother will also be its first object of sexual investment. In reality, there is nothing particularly surprising about this; what is surprising is that the child does not remain in this sexualized bond with the mother" (Alberti, 2004, p. 17).

Something necessarily intervenes in the child's relationship with the mother, allowing the child to redirect libido investments, find other objects, and experience itself as an object in other relationships. Freud defined this intervening factor as castration. While the clinical cases Freud had access to in his time identified the father as the agent of castration – leading generations of psychoanalysts to reduce the Oedipus complex to love for the mother and hatred for the father – contemporary psychoanalytic clinical practice suggests that the theoretical reference to the tragedy *Oedipus Rex* has far deeper roots than the mere repetition of a binary determination of universal sexual constitution. Upon rereading Freud's first mention of Sophocles' tragedy, it becomes evident that the tragic dimension lies in the miserable outcome of the "later 'drama of fate'" as Freud refers to the consequences of incestuous love: Oedipus blinds himself, castrating himself, and Jocasta takes her own life.

At the origin of culture lies the tragic – the *pound of flesh*¹ that must be lost, castrated: "To be an object of desire is something essentially different from being an object of any need." This is what is masked and repressed so that a subject may constitute itself within a culture without remaining in a sexualized bond with the mother. For it is not this bond that would be strange, but rather the impossibility of advancing toward something else as a subject of desire: "It is this subsistence of the object as such, of the object in desire, in time, that it has taken the place of what to the subject remains masked by its very nature. This sacrifice of himself, this *pound of flesh* engaged in its relationship to the signifier, it is because something comes to take the place of that, that this something becomes the object in desire" (Lacan, 1958-1959 /unpublished, p. 283).

At the origin of desire lies the tragic, this deadlock that Sophocles' tragedy so definitively narrates and that is so difficult for each of us to traverse. Adolescence bears witness to this difficulty for those who are willing—or able—to see how deeply subjective constitution depends on what Freud called civilization and its discontents.

We define adolescence as (1) "a long process of elaborating choices and (2) a long process of elaborating the lack in the Other" (Alberti, 2004/2016, p. 10, *Our Translation*). For choices to exist, indicators, directions, and determinants are essential, as they are provided by the culture of a given era, by social imperatives, and by the desire that the Other has for their children: "The subject receives them throughout childhood from parents, educators, peers, the media, and ultimately from the world around them, through what is transmitted by language – spoken, written, visual, communicative, or even through silence, which is also a form of language. They may continue to receive these same indicators, directions, and determinants throughout the entire adolescent process, as long as there is someone available to transmit them" (idem, p. 3). Psychoanalytic clinical practice imposes that whoever "cannot meet at its horizon the subjectivity of his time" should give up the psychoanalytic practice (Lacan, 1953/2006, p. 264). Adolescents today do not live in the same cultural milieu as those in Freud's time. Nevertheless, they face the same challenge: accomplishing what Freud explicitly identified as the fundamental task of the adolescent subject. After latency, "[...] one of the most significant, but also one of the most painful, psychical achievements of the pubertal period is completed: detachment from parental authority, a process that alone makes possible the opposition, which is so important for the progress of civilization, between the new generation and the old" (Freud, 1905/1949, p. 227).

Psychoanalysis, founded by Freud and later revisited by Lacan in his rereading project, is articulated with an epistemology that respects the singularity of its ethics. It demands that we, as researchers and psychoanalysts, position ourselves at the cutting edge of clinical practice, considering that, according to this epistemology, no psychoanalysis is possible unless the clinic itself guides it. Lacan identifies the clinic as the real that surprises the psychoanalyst, and working with adolescents is perhaps

¹ Lacan revisits it from Molière's play *The Merchant of Venice* in the lesson of April 22, 1959, in his 6th Seminar.

one of the most striking experiences of this encounter. This is likely because the adolescent, when speaking to the psychoanalyst, is confronting an unnameable and enigmatic Real regarding their place in the world. The Real, which does not cease not to be written, is intertwined with the impossible – just as we previously noted that it's conjugated with the necessary. The impossible to bear for the subject, which is inherent to psychoanalysis, and the impossible to bear for the social body manifest themselves in the clinic when working with transgender adolescents.

We propose the hypothesis that it is through questions about sexual positioning that today, the adolescent subject seeks to come to terms with what must be lost in order to move toward something else – as a subject of desire.

Sophocles' tragedy revolves around the fundamental enigma that every adolescent subject encounters. While Freud originally associated this enigma with the childhood question, "Where do babies come from?" – which, in the tragedy, appears in the riddle of Oedipus' answers to the Sphinx, "What is the man?" that is, the deadly enigma of origin – the question of sexual positioning entails the enigma of sexual identity, which adolescents must confront. Today, however, they encounter multiple ways to respond to it, as will be discussed in the Discussion section.

2. Design

Our research is based on therapeutic interaction, closely resembling an action-research approach in which the analyst and the patient work together on the issues that emerge from the patient's speech. The study is conducted in collaboration with the interdisciplinary team of the Identity Service – Transdiversity Outpatient Clinic at the Policlínica Piquet Carneiro of the State University of Rio de Janeiro.

Two fundamental principles guide this clinical practice, as identified by Sigmund Freud in *Recommendations to Physicians Practising Psychoanalysis* (1912/1924): free-floating attention on the part of the analyst and free association on the part of the patient, family members, and team members. No other rule is considered for the simple reason that no psychoanalytic research can extend beyond these two fundamental principles.

3. Objectives

This study aims to investigate contemporary developments in sexuality through a theoretical lens grounded in both the Oedipus Complex and the Castration Complex. By exploring how adolescent sexuality, with its contemporary issues of identity and self-construction, contributes to new perspectives on psychoanalytic theories of sexuality, we seek to deepen our understanding of these evolving concepts.

4. Methods

We ground the methodology used in the construction of this theoretical-clinical qualitative research with transgender adolescent subjects on clinical experience at the Identity Service – Transdiversity Outpatient Clinic of the Policlínica Piquet Carneiro (PPC-UERJ), which we have conducted since 2022, as well as on a detailed review of the psychoanalytic literature and related bibliographies. The clinical vignettes we present focus on the narratives of adolescents attending the outpatient clinic. We also examine how these cases provide insights into the ongoing relevance of psychoanalytic concepts in contemporary clinical realities. We base our methodology upon a qualitative and interdisciplinary approach centered on psychoanalytic listening and dialogue with medicine and other disciplines; this methodology seeks to foster the subjective experiences of transgender adolescents, articulating them with psychoanalytic theoretical formulations. The articulation provides a solid theoretical foundation for investigating the complex dynamics involving castration, transgender identity, and adolescence.

5. Discussion

There is no adolescence without puberty and, in addition to the bodily transformations accompanying it, involves a process of separation from parental authority. Alberti describes this process as follows: "The adolescent subject experiences themselves in attempts to elaborate the castration of the Other and the encounters they have with the real, no longer under the childhood illusion that their parents can protect them" (Alberti, 2009, p. 276, *Our Translation*).

At the outpatient clinic where we work with the adolescents mentioned in this study, their primary demand is medical intervention for gender affirmation. Subjective constructions of themselves often take a secondary place since they perceive the hormonal treatment as the primary solution for gender dysphoria, which generates intense estrangement concerning their own body.

Here is where psychoanalytic listening can intervene, inviting the adolescent to speak as an alternative resource for dealing with dysphoria. The distress is evident in their discourse: "Do you think it's nice to look in the mirror and see a bulge where there shouldn't be anything?" asks a transgender girl, while another adolescent expresses: "This bulge [pointing to the breasts] shouldn't be here! I dream of the day when I won't have this anymore and can walk around freely without a shirt". This "bulge" in the mirror distorts the image and propels the adolescent into a reconfiguration of their being. When we approach the question of sex through the logical framework of the Real of castration, we can affirm, with Lacan, that castration is Real: it is something one must go through. Being able to listen to adolescents from a position different from that dictated by medical discourse has already allowed us to hear statements such as: "It's sad to talk about these things with people who minimize our pain, who believe all of this will just pass. I am living it, and I know that what I feel does not go away, but coming here to talk to you makes a difference because, in your eyes, it's as if a new world exists for me".

Alberti and Ferreira (2019) highlight the importance of identifying how psychoanalysis advances in addressing the questions woven by different realities and discourses into experiences and knowledge about being for sex. They emphasize the need to trust in the speaking subject's ability to navigate the discontent of civilization. No signifier fully accounts for *jouissance*, and sexual relations themselves embody an experience of incompleteness: the partners are not where I experience them, nor am I where they experience me, which is why it remains enigmatic.

Therefore, adolescence implies paradigmatically the fact that unease regarding one's sex is the rule for everyone. A transgender adolescent who has already begun their transition through hormone therapy – resulting in "a beard and a deeper voice" – still experiences "a void" and states: "Inconformity is inherent to identity." In their own words, regarding gender self-affirmation, "For all of us rules the non-conformity." This statement aligns with Lacan's assertion that "sexual meaning (*sens*) indicates the direction toward which it fails (*échoue*)" (Lacan, 1999, p. 79). Lacan further states: "What analytic discourse brings forth is precisely the idea that this meaning is *semblant*" – the *semblant* of what is usually called a man or a woman.

In his Seminar *Les Non Dupes Errent*, the lesson from February 19th, 1974, Lacan points out that, when faced with these encounters with the real, which do not cease not to be written, "we all invent a trick to fill the hole of the Real" (Lacan, 1973-1974). This hole – Lacan also calls it "there is no sexual relation" – traumatizes (*troumatisme*), and at its place, "We invent!" (*idem*). When the adolescent subject encounters the impossible to be said due to a lack of signifiers to name it, they invent! By literally "naming themselves", as they consider their birth name a "dead name", transgender adolescents find a way to "know-how" (*savoir-faire*) to deal with the impossible. "I don't want to be called by my dead name," a transgender adolescent tells us with deep sadness. In their words, hearing their dead name reminds them of everything they wish to forget. Another adolescent emphasizes the profound sense of disrespect they feel when someone calls them by "the name of someone who doesn't exist": "I suffer when they call me by my dead name."

Transgender adolescents who arrive at the outpatient clinic often find themselves in a state of profound vulnerability, shaped by their histories of marginalization, their trans identity, gender dysphoria, and the daily experiences of transphobia. For them, adolescence is more than just a transition – it is a state of paralysis as they consciously or unconsciously confront the question: "What if I were cis?" Many have been abandoned by their families and rejected by parents who do not accept their condition. Those who lack family support experience their transgender identity with more remarkable anguish and helplessness, often idealizing cisgender adolescence: "If I were cis, everything would be different." This statement veils the castration with which the adolescent must come to terms, as adolescence is when one cannot escape the loss of the *pound of flesh*, the object of anguish. This Real, always at play, denaturalizes what can be conceived as man and woman and points to the fundamental Lacanian assertion that "there is no sexual relation" – meaning there is no proportion between the sexes, just as they do not complement one another.

A transgender adolescent who expressed satisfaction with her body during her very first consultation explains it is a society that considers it a "wrong body," and that is why she needs to transition – so she can be "passable" as a woman, use the women's restroom without the risk of being attacked. In her words, if we lived in a different society – one that could accommodate dissident and disruptive bodies – that "conversation" with the psychologist would not even be happening because she could simply be a woman with a penis and a beard. This statement makes evident the shift in discourse that adolescents bring forward, transforming the old narrative of "I was born in the wrong body" into a denunciation: "Society does not accept my dissident body!".

In the lesson of June 21, 1972, in his 19th Seminar, Lacan declares that discourses imprison bodies. Sexual *jouissance* is the *jouissance* of the body-to-body encounter. However, as long as there are two or more bodies, it is impossible to say which one enjoys: "This is what makes it possible here, for multiple bodies to be imprisoned, even making entire series of bodies possible." (Lacan, 2011, p. 225).

The imprisonment of bodies can be experienced both by the adolescent struggling with castration anguish, facing the necessity of losing something, and by those subjected to normative discourse, often leading to segregation. The adolescent who questions is segregated, nothing is new in that. What is new

are the different ways of questioning, which now center, as mentioned, on the issue of sexual identity. *Troumatisme* – hole + trauma – the tragic as a rupture in meaning penetrates the meaninglessness of the real. The subject is left speechless and seeks, through the act, within their own agitated body, to forge a response that separates them. They then ask themselves, deceptively, what loss would be acceptable: Which “bulge” should fall away? What (trans)formation could restore what has been lost forever?

A transgender adolescent who has undergone a meaningful analytic process formulates the following metaphor: “I have always hated this idea that being trans is like being a butterfly! That doesn’t exist! No one is one thing and then becomes something completely different. I prefer to say that I have an exoskeleton. Something is constraining me, and I need to shed it, but it’s not easy. I no longer fit inside it, but I don’t know what awaits me without this exoskeleton that is already familiar. In any case, even if I change my shell, I will still be myself. There’s no chance of becoming something else”.

6. Final considerations

Clinical work with transgender adolescents, marked by intense challenges related to gender identity and the body, requires attentive and interdisciplinary listening, where the analytic process plays a fundamental role in creating new meanings and possibilities for these subjects. When the adolescent questions the conjunction between the necessary and the impossible, the tragic dimension of the human condition can be elaborated—and for this, we must make ourselves available to listen. The words of these adolescents reveal that trans identity can be both a source of suffering and a path for the invention of a new way of life, where name, body, and gender take on new meanings. The structural tragic will always persist; the discourses that imprison may shift over time, and the adolescent is the one who awakens. Not like Oedipus, who had to blind himself to avoid seeing, but as the one who makes things visible and questions them.

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