The body of the hysterical woman – The feminine body

‘The mystery of the speaking body’: that is the title of our next Rendezvous. These are signifiers that immediately refer us to the mystery of hysteria as well as feminine jouissance—the body is involved in both.

Now, which body? Which one is the body that interests psychoanalysis? From the beginning, Freud emphasized that the unconscious has effects upon the body. So, when we speak of the body, we are not referring to the organism with which we are endowed: we must distinguish the body from the biological organism and from the subject.

We know that one of the effects of language is the separation of the body from the subject. This effect of scission, or separation between subject and body, is only possible by virtue of the intervention of language: the body has to be constructed; one is not born with a body.

This means that the body is constructed secondarily; it is an effect of the word.

Let us bear in mind that Lacan demonstrated, through the study of the mirror stage, that the subject needs an other to recognize himself as a whole and unified body. It is only through the identification of the image of the other that the child acquires the image of his own body.

Yet the access to the structure of language – that is to say, to the symbolic register – is a necessary condition for imaginary identification. Thus, the constitution of the body image is an effect that proceeds from the symbolic.

The hysterical event
The hysterical woman attempts to nominate herself as a woman by means of the image of the body; she tries to resolve with the image the question about femininity.

This is a way of naming the unnameable in the place of the feminine.

As her femininity is foreign to her, by means of her own body she venerates the mystery of the Other woman, who keeps the secret of what she is; she attempts to give a body to what she is through the other woman, through a real other.

On the way from hysteria to femininity, a few things are left behind: symptoms, complaints, pains, oppressive or absent mothers, idealized or impotent fathers, and a jouissance which, on occasions, puts a child in the place of the phallus.

A feminine whole-body minus mother requires an other, which occurs at the time of the analysis. An intervention in the real operates a subtraction of the said jouissance, via the presence of the analyst. Although sometimes hysteria and femininity appear to be united by a certain complicity that entangles them, in the course of an analysis the distinction between them becomes clear.

What does the hysterical woman tell us through her bodily symptoms? The body of
hysteria speaks through its suffering and its conversions, not to mention its singularity as subject.

The hieroglyphs of the body lead us to the somatic mechanism that is central in hysterical symptomatology. The somatic symptom is located at the limit point of the real and language. The whole ‘hysterical operation’ consists in the sliding of its body of symptom into a wrapping.

We could say that hysteria re-invents a body in the body, proceeds as if anatomy did not exist; but, because it knows how to play with anatomy and how to promote symptoms that institute a daring bodily geography, there is an imaginary anatomy that responds to the needs of its symptom. History is inscribed in bodily symptoms.

The purpose of pure hysteria is to make of the real body, the body in which the symptom resides, the physical place of activation of the symptom.

That is the challenge of the hysterical woman: to make a body with her symptom.

This body, the place of the ‘event of the symptom’, is not the same as the body captured in discourse. The body captured in discourse is a spoken body and an enjoyed body; the speaking body is, on the contrary, a body that enjoys.

**Conversion symptom – Psychosomatic phenomenon**

For Freud the conversion symptom is a disturbance of a bodily function. The entire body may be erotogenized without alteration of the organ involved, ‘without an organic cause’, in contradistinction with the psychosomatic phenomenon. In the latter the function is affected; the body is ill; there is no inscription of the signifier in the unconscious but a wound of the letter in the body. Nevertheless, it must be emphasized that not all organic damage can be considered as psychosomatic, nor that the psychosomatic must constitute an analytic specialty.

The psychosomatic phenomenon is the manifestation of a specific modality of satisfaction that is concomitant to a specific choice of the subject by being. The difficulty derives from the fact that in a psychosomatic lesion the desire of the Other is not questioned initially; it appears as an opaque desire that is in the nature of a sign rather than a signifier. It is not a body that constitutes that which could elevate the appropriate mark in order to ordain it in a series of signifiers, but a body that assumes under its command the mode of satisfaction of whom for the subject has the function of an Other.

**Beyond the phallus – feminine jouissance**

In wondering about the feminine, Lacan speaks of a woman as symptom; it is in the symptom that the Other sex finds its support. In the last part of Lacan’s teaching, we can perceive proximity between the symptom and the feminine.

While the woman consents to being ‘the symptom of the other body’ (which does not prevent her from being a subject), i.e. lends her body to the jouissance of another body, the hysterical woman does not lend her body.

This would in part explain the fact that in several places Lacan speaks of the rejection of the body in hysteria. At a late stage he spoke of ‘the body going on strike’. The so called ‘somatic compliance’ of the hysterical woman conceals a rejection of the body. She withdraws her body in so far as it might become the instrument of the master.

Perhaps female anorectics, numerous in our times, present the most paradigmatic modality of the rejection of the body. One might think of anorexia as a modality by means of which the hysterical woman would attempt to nominate herself as woman through the image of her body, thus trying to resolve the question of femininity.

It should be stressed that anorexia is not a functional disturbance: it is a behaviour assumed and vindicated by the subject; it is not a symptom that enters into a conflict with the Other. The anorectic attempts to subtract the excess proper to the flesh from the body, thus
rejecting the body in its real dimension as an enjoying substance. The counterpart to this anorectic ambition is the return of the rejected excess as a distortion of the specular image.

In neurotic anorexia the gaze as object is effectively extracted from the field of perception, and that is why it returns within the frame of the mirror.

In women their own body is the site of the non-existence of the signifier for ‘(The) Woman’: there is nothing that would be universally predicable as being distinctive of the feminine.

For women, it is the body itself that makes the hole of sex present.

Whereas the Freudian woman is localizable on the basis of the phallic lack and everything that comes to compensate for it (motherhood, for instance), the Lacanian woman is particularly distinguished by what in her there exists as a supplementary jouissance: she is inhabited by an extra jouissance.

In his formulas of sexuation, Lacan proposes the feminine jouissance. This marks the difference between the eminently phallic hysterical woman and the feminine jouissance, which is beyond the phallus, comparable with the jouissance of the mystics, an additional, supplementary jouissance, subjected to the not-all. Phallic jouissance, on the other hand, is defined as a jouissance of the organ, outside the body, a rather masturbatory jouissance, autoerotic, para-sexed.

Some women only enjoy in the phallic sense. This is a jouissance tied up with the signifier, to the symbolic, that is to say, tied up with castration. In this position the hysterical woman remains arrested, identified with the man, and from that place she approaches the enigma of what the feminine is. Some obtain only this jouissance; others gain access to the Other jouissance, the feminine jouissance.

As phallic, the woman offers her masquerade to the Other’s desire; she poses as the semblant of an object, and from there she offers herself as a phallus. She accepts to embody this object to offers herself to its delights. But she is not altogether there, and if she is well composed she will not be completely convinced by it: she knows that she is not the object, although she may play at giving what she does not have; even more so if love intervenes, as she may then enjoy being what causes the other’s desire, without the fear of becoming trapped there, on the condition that her jouissance does not get exhausted there. She pretends to be the object that the fantasy of her partner demands of her. To pretend is to play at being it. Tempting from that place, she enjoys, within a feminine position, but she must leave that scene, as she does not incarnate that a all the time. It is not superfluous to say that if she remains as a, as object, she is imprisoned in a kind of masochistic position.

Feminine jouissance is, par excellence, the place from where one can gain access to the experience that there is no Other of the Other, or that there is no sexual relation.

Object a and the feminine jouissance are two modalities of suppletion of the sexual relation that does not exist. They provide an account of an impossible encounter.

The feminine body, therefore, offers itself between love and jouissance. We could then say that a woman situates herself between making enjoy and being loved.

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(translated by Leonardo Rodriguez)

References consulted
