

Chapter # 18

CONTEMPORARY VICISSITUDES OF THE OEDIPUS COMPLEX IN ADOLESCENCE

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ABSTRACT

This study explores contemporary expressions of sexuality through the theoretical articulation of the Oedipus and Castration complexes. Drawing on data from the Ambulatory for Transgender Care at a public university hospital and clinical observations with five adolescents, it examines how unconscious determinations operate in current experiences of adolescence. The research is organized around three axes. The first is theoretical, based on a psychoanalytic reading of adolescence as a crucial moment in the structuring of sexual difference and subjective identity, revisiting Freud and Lacan to question binary identifications. The second is clinical, presenting five vignettes that illuminate how adolescent sexuality – intersected by issues of identity and self-construction – challenges and reaffirms psychoanalytic conceptions of sexuality. The third axis emphasizes the enduring relevance of classical psychoanalytic concepts in addressing new forms of subjectivity emerging today. By linking the Oedipus Complex to the theory of castration, the study highlights how psychoanalysis remains capable of interpreting experiences that were not visible in Freud's time, reaffirming its theoretical and clinical vitality in contemporary contexts.

Keywords: psychoanalysis, Oedipus complex, castration complex, adolescence, transgender care.

1. INTRODUCTION

Freud's first reference to Oedipus implies tragedy, long before the complex. Placing it is fundamental to our argument, for two reasons: 1) because it allows us to demonstrate that the reduction of the Oedipal novel – and we refer to the novel to distinguish it from tragedy –, as it came to be read after this first reference, greatly reduced the force and relevance of what led Freud to make that reference, as we will explain below; 2) because to revisit Oedipus in the context of tragedy – where it has emerged since Sophocles – is to assert it as a structure of what never ceases to be written, is to assert it as necessary. Now, “the necessary is linked (conjugué) to the impossible”, as Lacan (1999, p. 59) observes in his 20th Seminar.

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

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*, despite 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, 1985, p. 272)

It was the association of the Oedipal novel with Sophocles' tragedy that allowed Freud to recognize it as predetermined as tragic, that is, inherent to subjective constitution. It derives from what Freud defined as sexuality: also universal to human beings, it begins in childhood – which greatly scandalized the time – and

if the child has in the mother its greatest and first reference, the mother will also be its first object of sexual investment. In reality, there is nothing very strange about this; what is strange is that the child does not remain in this sexualized connection with the mother. (Alberti, 2004, p. 17)

Something necessarily intervenes in the child's relationship with the mother in order to allow the child to make other libidinal investments, find other objects, and experience itself as the object of other relationships. What intervenes is defined by Freud as castration. If 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 – what psychoanalytic practice points today is that the theoretical reference to the tragedy *Oedipus Rex* has deeper roots than the possible repetition of a binary determination of universal sexual constitution. Rereading Freud's first mention of Sophocles' tragedy makes it clear that the tragedy resides in the miserable result of the "later 'drama of fate'", as Freud refers to the outcome of incestuous love: *Oedipus Rex* blinds himself, castrating himself, and Jocasta takes her own life.

At the origin of culture lies the tragic, that pound of flesh that needs to be lost, that castrates itself. "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 can constitute itself in culture without remaining in the sexualized connection with the mother. For it is not this connection that would be strange, but the impossibility of advancing towards 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 object in desire. (Lacan, 1958-1959, p. 283)

At the origin of desire lies this tragedy, this dead end that tragedy, as portrayed in Sophocles' writings, so definitively captured, and which is so difficult for each of us to overcome – a difficulty that adolescence witnesses to anyone who wants to, or can, see how much the subjective constitution of each individual is absolutely dependent on what Freud called the malaise in civilization.

In the text *Adolescence and the Assertion of Anticipated Certainty: Sex, Lies, and Rock'n'Roll*, Costa-Moura (2023) states that there is an impasse arising from the need to speak and to make an assertion about oneself – and it is precisely there that the crisis we call adolescence takes place. 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). For choice to occur, indicators, directions, and determinants are essential, which are provided by the culture of an era, by social designs, and by the desire that the Other has for their children.

The subject receives them throughout their childhood, from parents, educators, peers, the media, the world around them, through what is transmitted to them by language, spoken, written, visual, communicative, or even by silence, which is also a form of language. And one can continue receiving these same indications, directions, and determinants throughout the entire adolescent process, provided that there is no lack in someone who can transmit them. (ibid., p. 12)

Now, psychoanalytic practice imposes that “give the psychoanalytic practice up whoever cannot meet at its horizon the subjectivity of his time” (Lacan, 2006, p. 264). Today’s teenagers don’t live in the same cultural immersion as those of Freud’s time. Even so, they face the same challenge those teenagers faced: to accomplish what Freud, in his own words, identified as the work 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, p. 227)

The psychoanalysis founded by Freud and taken up again by Lacan in his project of rereading, articulated with an epistemology that respects the singularity of its ethics, demands that we situate ourselves, as researchers and psychoanalysts, on the sharp edge of the clinic, considering that, according to this epistemology, there is no possible psychoanalysis that is not guided by the clinic itself. Now, Lacan identifies the clinic as the real that surprises the psychoanalyst, and clinical work with adolescents is perhaps one of the most striking experiences in which this is experienced. Probably because the adolescent himself, when he comes to talk to the psychoanalyst, is experiencing his encounter with the unnamable and enigmatic reality regarding his place in the world. The real, which never ceases to not be written, is associated with the impossible we initially referred to when we said it was combined with the necessary. The impossibility of endure for the subject, inherent to psychoanalysis, and the impossibility of resistance for the social body, are present in the clinical setting with transgender adolescent subjects. Moreover, “trans adolescence” is not only a phenomenon neglected by science but also one that remains inexplicable to it. In this sense, these are elements that produce a rupture in knowledge. To be relegated, therefore, is an expression of a “not wanting to know anything about it” (Ferreira da Silva, 2021).

We hypothesize that it is through questions about sexual positioning that the adolescent subject today seeks to deal with what needs to lose in order to move towards something else as a subject of desire.

Sophocles’ tragedy revolves around the fundamental enigma that every adolescent faces. If Freud originally associated it with the childhood question “where do babies come from?” – which, in the tragedy, appears in the question Oedipus answers to the Sphinx, “what is man?”, that is, the deadly enigma of origin – the question about sexual positioning implies the enigma of sexual identity with which adolescents confront themselves. Today, however, they find multiple ways to answer it, as will be discussed in the Discussion section.

2. DESIGN

Our research is based on therapeutic interaction, approaching action research in which analyst and patient work together on the issues that emerge from each patient's speech. The research is developed within the interdisciplinary team of the Identity-Transdiversity Service PPC/UERJ. Two fundamental rules guide this care, identified by Sigmund Freud (1912/2025) in "Recommendations to Physicians Practicing Psychoanalysis": free-floating attention on the part of the analyst, and free association on the part of the patient, family member, or team member. No other rule is considered for the simple reason that there is no psychoanalytic research that goes beyond those two rules.

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

The methodology used in constructing this qualitative theoretical-clinical research with transgender adolescent subjects is based on clinical experience at the Identity-Transdiversity Service PPC/UERJ, which we have been conducting since 2022, and on a detailed review of psychoanalytic literature and bibliographies related to the topic. The clinical vignettes we present, focus on the narratives of adolescents attending the Ambulatory. We also examine how these cases provide insights into the continued applicability of psychoanalytic concepts to contemporary clinical realities.

Based on a qualitative and interdisciplinary approach, centered on psychoanalytic listening and dialogue with medicine and other disciplines, this methodology aims to explore the subjective experiences of transgender adolescents, articulating them with the theoretical formulations of psychoanalysis. This provides a solid theoretical foundation for investigating the complex dynamics involving castration, transgenderism, and adolescence.

5. DISCUSSION

Adolescence is marked by puberty and, in addition to the accompanying bodily transformations, involves a process of separation from parental authority. Alberti (2009) describes this process as follows: "the adolescent subject experiences himself in attempts to elaborate the castration of the Other and the encounters he has with the real, now without the childhood illusion that parents can protect him" (Alberti, 2009, p. 276).

This is where psychoanalytic listening can intervene, inviting the adolescent to speak as another resource for dealing with dysphoria. It is evident in their discourse: "Do you think it's okay to look in the mirror and have a bulge there where there shouldn't be anything?", asks a transgender teenager, while a transgender teenager puts it this way: "this bulge [pointing to their breasts] shouldn't be here! I dream of the day I won't have this anymore and I can walk freely without a shirt". This "volume" that appears in the mirror blurs the image and throws the adolescent into a re-architecture of their being.

By articulating the issues of sex through the logical path of the real of castration, we can affirm with Lacan that castration is real: it is something one must go through. This makes it “unsustainable to remain in this duality, somehow as sufficient [...] This function of the *phallus* makes sexual bipolarity untenable henceforth, and untenable in a way that literally volatilizes what happens with what can be written about this relationship” (Lacan, 2006, p. 67). Being able to listen to adolescents from a different perspective than that dictated by medical discourse has already allowed us to hear an adolescent say: “It’s sad to talk about these things with people who minimize our pain. People who believe that all this will pass... I’m living through it and I know that what I feel won’t go away, but coming here to talk to you makes a difference because in your eyes it’s like a whole new world exists for me”. Thus, we ask ourselves: what space is there in our clinics to sustain the unrepresentable of sex, whatever age it may appear at? (Alberti & Ferreira da Silva, 2020).

Alberti and Ferreira da Silva (2019) point out that it is important to identify how psychoanalysis advances with the questions that different realities and different discourses weave into experiences and knowledge about being-for-sex, and to bet on the capacity of the speaking being to deal with the malaise in civilization. There is no single signifier that can account for enjoyment, and the sexual act itself is an experience of incompleteness: the partner is not there where I experience it, nor am I where he experiences me, which is why it remains enigmatic. The speaking being has a more elaborate relationship with *jouissance* than other animal species. This takes place from the fact that sexual *jouissance* emerges earlier than sexual maturity. The speaking being possesses a body of *jouissance* affected by language.

The issues of adolescence, therefore, paradigmatically imply that unease about one’s own sex is the rule for everyone. A transgender teenager, who has already begun his transition with hormone therapy, which gave him “a beard and a deeper voice”, still feels “an emptiness” and affirms: “nonconformity is inherent to identity”. In his words, regarding gender self-affirmation, we are all “dissatisfied”. This corroborates Lacan’s assertion that sexual meaning “indicates the direction in which it fails” (Lacan, 1999, p. 79). Lacan will say: “what analytic discourse brings forth is precisely the idea that this meaning is semblance”. In relation to *jouissance*, it is speech that guarantees the dimension of truth, however it can only half-say the relationship and with it “forge the semblance, the semblance of what is called a man or a woman” (Lacan, 1971-72/2011, p. 60).

Lacan (1973-74/2018) points out that in the face of these encounters with the real, which never cease to be written, “we all invent a trick to fill the hole of the Real. Where there is no sexual relationship, this produces, this produces a hole that traumatizes (*troumatisme*). We invent!” (p. 144). The adolescent subject, when confronted with the impossible to be said due to a lack of signifiers to express it, invents! By literally “naming themselves”, since they consider their given name a “dead name”, trans adolescents find a way of “knowing how to do” with it. “I don’t want to be called by my dead name”, a transgender teenager tells us with great sadness. In his words, hearing his dead name reminds him of everything he wants to forget. Another teenager emphasizes the profound disrespect felt when someone calls him 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 clinic often find themselves in situations of great helplessness due to their histories of vulnerability, transsexuality, dysphoria, and all the experiences of daily transphobia. Being a teenager for them is more than a transition; they find themselves paralyzed, consciously or unconsciously, in the face of the question: “What if I were cis?” Many have been abandoned by their families and rejected by their parents who do not accept their condition. Young people who do not receive family support

experience transsexuality with more anguish and helplessness and often idealize a cisgender adolescence: “If I were cis, everything would be different”. Speech that veils the castration which the adolescent must deal with, as adolescence is a time when it’s impossible to avoid the loss of a pound of flesh, the object of their anguish. This ever-present real denaturalizes what can be conceived as man and woman and points out that “there is no sexual relationship”, meaning there is no proportion between the sexes, just as they do not complement each other.

A transgender adolescent, who says she is very satisfied with her body even in her first consultation, explains: it is society that considers it a “wrong body”, and that is why she needs to transition, so that she can “pass” as a woman, use the women’s restroom without risking being assaulted. In her words, if we lived in another society, a society that supports dissident and disruptive bodies in its structure, that “conversation” with a psychologist wouldn’t even be happening, because she could be a woman with a penis and a beard. This fragment makes evident the discursive shift that adolescents bring and transforms the old “I was born in the wrong body” into a denunciation: society does not accept my dissident body! Even less its form of enjoyment. In *The Seminar*, book 19: *...or worse*, Lacan (1971-72) declares that discourses imprison bodies. Sexual *enjoyment* is the enjoyment of body to body, but as long as there are two bodies, or more, it is impossible to say which one enjoys. “That is what makes it possible for there to be, in this story, several imprisoned bodies, even a series of bodies” (Lacan, 2011, p. 225, *Our translation*).

The imprisonment of bodies, which can be experienced both by adolescents involved with castration anguish by the need to lose something, and by those subjected to normative discourse, often leads to segregation. The adolescent who questions is segregated. This is not new; what is new are the different ways of questioning, which center on the issue, as mentioned, of sexual identity.

“Sexuality digs a hole in the real”, Lacan (2001, p. 562) will say only in the text preceding the staging of Wedekind’s play *The Awakening of Spring* (1891), which has as its central theme the sexuality of adolescents. *Troumatisme*, hole + trauma, the tragic as a hole in meaning penetrates the meaninglessness of the real. The subject is left speechless and seeks, through the act, in his own agitated body, to forge his response that separates him. However, finds the segregation of one’s own form of enjoyment, unacceptable to the social body that repels and violates it. The question then arises, deceptively, as to what would be an acceptable loss. What “volume” should let fall? What (trans)formation would bring back what was forever lost?

A transgender adolescent, who has undergone a good course of analysis, formulates the following metaphor: “I always hated this idea that being trans is like 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. There’s something squeezing me and I need to let it go, but it’s not easy. I don’t fit in here anymore, but I don’t know what awaits me without this exoskeleton that’s already familiar. In any case, even changing my shell, I’ll continue to be myself. 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, in which analytical work plays a fundamental role in creating new meanings and possibilities for these subjects. It is when the adolescent questions what is conjugated from the necessary to the impossible that the tragedy of the speaking being condition can be elaborated, and for

this we can be willing to listen to them. The speeches of these adolescents reveal that transsexuality can be, at the same time, a source of suffering and a way of inventing a new form of life, in which name, body and gender take on a new meaning. Structural tragedy will always exist, the discourses that imprison change over time, and the adolescent is the one who awakens. Not like Oedipus who needs to gouge out his own eyes to avoid seeing, but like the one who reveals and questions.

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