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Genealogies of Trauma: The Inheritance Of Hysteria

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Genealogies of Trauma: The Inheritance of Hysteria

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Dedication

To those who feel their stories beneath their skin.
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Abstract

Genealogies of Trauma: The Inheritance of Hysteria

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This thesis explores the ways that sexual violence becomes perceptible through the body. While we are often unable to assimilate trauma into language, we maintain other corporeal systems in which to understand, respond to, and discern it. Looking backwards at historical representations of hysteria opens up new languages, metaphors, and systems of thought when we take seriously the gestures of hysteria as corporeal responses and adaptions to the experience of sexual violence. The excess of performances of hysteria, the coughing, screaming, quaking, and crying, become a means to archive and make visible a violence thought of as unspeakable. The first two chapters of this thesis focus on historical representations of hysteria through the photographs of Louise Augustine Gleizes of the Salpêtrière Hospital, and Ida Bauer, the women behind Sigmund Freud’s Dora. The gestures and ‘symptoms’ of their hysteria are read alongside their experiences of sexual violence. This reading takes seriously the effects of hysteria as a source of embodied knowledge regarding how the body responds to sexual trauma. The third chapter brings this hysterical understanding of the body into the contemporary work of the queer writer, Mattilda Bernstein Sycamore, who makes use of the hysterical body both to make visible unacknowledged sexual violence and trauma, and as a modality for seeing and connecting with other queer survivors of trauma. The repertoire of hysterical gestures becomes an avenue for queer people, gender variant people, and survivors of
Sexual violence to articulate and express both desire and pain in ways that do not present recovery from trauma as an endpoint or static moment to be achieved, nor as a precursor to fulfilling physical and sexual intimacy. The performativity of queer hysteria makes itself visible on bodies through stylization, adornment, and biological and physical gesture. These corporeal gesticulations are created and perceived through and in relation to one’s own experience of trauma. Queerness appears not as a utopian solution to violence and trauma, but a means to use these experiences with a difference.
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**Introduction: Now You Know Someone Has Heard You**

Hysteria is said to be a mystery. Philosophers, scientists, doctors, clinicians, and scholars have all tried to solve the enigma of hysteria. The problem: what caused certain people to suffer from quakes, convulsions, paralysis, vocal tics, nausea, incessant coughing, and a whole host of other symptoms unattributed to any apparent illness or medical condition. While the physicality of hysterical symptoms was overwhelmingly abundant, its maps within the body were not. Techniques to approaching hysteria often went about dissecting it, rendering it lifeless, moving it into theory and away from the corporeal existence of those who have carried its affects. Instead of trying to solve the mystery of hysteria, I seek to explore the interstices between knowing and unknowability that hysteria represents: between the hyper visible shrieks and contortions of hysterical fits and the absent presence of its causes.

A plethora of doctors sought fame and fortune trying to tame and explain the hysterical woman through a variety of chemical, neurological, physical, physiological, and psychological frameworks. Each eventually failed in their pursuit of hysteria, or in attaining sustained credulity for their theories. Hysteria remained “hard to catch”, slipping “through the fingers and comprehension” of those who tried to use that knowledge to contain, discipline, and control hysterics. ¹ While the theories on hysteria waxed and waned in approval, the images of the shrieking and contorting hysterical women remained in the public imaginary, constantly re-imagined through visual art, film, and literature. While images of hysteria cannot be held completely separate from the theorizations derived from them, their lasting hold on our imaginations suggest that there

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is something special about these images, that they hold knowledge about the body that we have not yet fully tapped into. This paper hypothesizes that within the excess of hysteria’s effects: fainting, dizziness, convulsions, aches, pains, digestive issues, etc. lies the multiplicity and endless arrangements of corporeal adaptations to negotiate power and violence. Starting with images of nineteenth-century hysterical women, I trace the gestures of hysteria in relation to gender, sexuality, desire and violence. I look back to these moments of hysteria in order to develop a vocabulary to read contemporary corporeal depictions of sexual violence in the work of Mattilda Bernstein Sycamore. In mapping the gestures within Sycamore’s work to the movements of Victorian hysterics I seek to elucidate a genealogy of traumatic endurance, the forms of somatic based strategies developed to counter, refract, and use experiences of violence as sources of knowledge and power.

**THE HANDMAIDENS OF HYSTERIA**

Among the most famous of doctors of hysteria are Jean Martin Charcot and Sigmund Freud, who introduced the ideas of trauma, gender, and sexuality into the discourses of hysteria. Jean Martin Charcot presided over the Salpêtrière Hospital for over thirty-three years beginning in 1862. The Salpêtrière (which is still a functioning hospital) derives its name from its sixteenth-century origin as an arsenal for gunpowder. By the seventeenth century it was used as a “warehouse for female outcasts” and prison. Burned down in the September 1792 massacre (the women imprisoned were murdered), the prison was shut down and transformed into a repository for elderly or insane women.² By the time Charcot began his tenure, the hospital was only accepting the ‘curable insane, whom he viewed as the the great emporium of human misery’, a population he set about

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to explain and classify. The slippage from prison to psychiatric hospital reveals the punitive origins of the Salpêtrière and confirms the disciplinary cohesion between the prison and the hospital. Charcot weaponized photography in an attempt to solve the mysteries of hysteria and provide a cure for the misbehaving women, producing the three-volume, *Iconographie Photographique de la Salpêtrière* between 1876 and 1880. When I began studying these photographs, a face kept reappearing. Each of her images caught me, forcing my eyes to meet her gaze, pulling me into the image. She commanded every frame through various looks, postures, movements, and gestures of sound. She drew me back again and again to look at her, with the feeling that something about her was looking back. This woman turned out to be called Augustine most commonly, a poorly conceived pseudonym for her given name Louise Augustine Gleizes who is the focus of the first chapter.

In addition to photographs the *Iconographie* included patient case histories, many of which explored histories of sexual and physical violence, like the biography of Gleizes. In this way Charcot linked hysteria to environmental causes beyond his framework of hereditary predisposition. While his understanding of inheritance involved genetics, the heritage of hysteria I wish to invoke throughout this paper bears more resemblance to the Beauvoirian understanding of “becoming a woman.” One is not born hysterical, but learns to become hysterical in reaction to a gendered hierarchy maintained through the threat and actualization of sexual violence. I view histrionics as created through experienced violence as well as the memory of violence embedded within overlapping generations. Histrionics become a form of wisdom perceived through

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witnessing the nuances of resistance and resilience in everyday encounters with violence. Charcot’s focus on the hysterical body ensured that the prevalence of sexual violence within the histories of hysterical patients remained in the background, while the effects of that violence became compounded in the image of the hysterical woman. The images became emblematic of the weakness of women despite the obvious force behind them. Those whose memories of corporeal violence and assault drove them to fits of rage, laughter, and tears became the most photographed, like Gleizes. The development of history into a repertoire of histrionics thus doubled as a tool of visibility.

The images produced at the Salpêtrière circulated in medical journals prior to their publication in the *Iconographie*, drew crowds to the amphitheater Charcot built to deliver his Tuesday lectures, complete with a performance of hysteria by a “hypnotized” hysterical woman. One of the doctors who came to study under Charcot was Sigmund Freud, who arrived at the Salpêtrière in 1885. The influence of these hysterical women on Freud is indisputable. Much like Charcot, Freud became determined to solve the mystery of hysteria. I have referred to Charcot and Freud here as the handmaidens of hysteria to restructure the view of the relationship between hysterical women and the doctors who theorized upon them. While setting out to conquer hysteria through its demystification, both Charcot and Freud were eventually defeated by it, never gaining full or lasting acceptance for their theorizations on hysteria. The legacy of hysteria shadows their accepted accomplishments. In this way their work has unwittingly carried and projected hysteria for over a century, their names forever tied to the continuing discourses on hysteria.

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One of Freud’s most contentious theories on hysteria was delivered as a lecture a year after his tenure at the Salpêtrière in 1896. The paper, *The Aetiology of Hysteria*, has become infamous as Freud quickly worked to distance himself from it in theory and in practice.\(^7\) Within his lecture, Freud theorized that what was known as hysteria (the seemingly random convulsions, screams, and aggression from female patients) derived from their memories of childhood sexual trauma. His hypothesis was instantly rebuked by his colleagues, who consequently shunned him. This estrangement from his peers caused Freud to work hard to discredit the women whose testimonies he privileged in his theory. Freud internalized the charges that he had listened to the “paranoid drivel” of hysterics, integrating the role of fantasy into his later theorizations of trauma as a means to discredit their memories of abuse.\(^8\) The social climate of the time, steeped in male prerogative and privilege could not accept that middle and upper class men “caused” hysteria through their pernicious use of female sexuality. These tensions are palpable throughout his later writings on hysteria, including the famous case history of Ida Bauer published in 1905 as *Dora: An Analysis of a Case of Hysteria*, throughout which Freud insists on the role of fantasy and desire in the origins of her hysteria. (The search for Ida Bauer within Dora becomes the focus of the second chapter.) Despite the widespread acceptance of the prevalence of sexual violence both historically and currently, reports of sexual violence are still considered with an air of suspicion as a remnant of this debate and Freud’s repudiation of his patient’s memories of sexual violence. While hysteria was said to have “disappeared” following the turn of the century, it remained alive and well in

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theoretical discourses, finding its way into structuralism, deconstruction, fine art, and feminist analysis.

While the term hysterical remains amorphous enough to cover a range of behaviors, its definition is concretely tied to ideas of excessive emotionality and deviancy that continued to solidify through both Charcot and Freud’s work on hysteria. During this time images and stories of hysteria were widely circulated throughout Europe and the United States. Coinciding with the growing popularity and accessibility of photography, images of hysteria took on the power of scientific objectivity and the pathology it sought to define. The photographic image was used to classify and visually crystallize the wide range of hysteria’s effects: crying, screaming, tremors, paralysis, jolts, quakes, throes, nausea, etc. During this time period the connections between hysteria, deviant sexual desires, and sexual trauma began to take form, associations which form the branches of hysteria’s inheritance.

THE GEOMETRY OF HYSTERIA

In Michel Foucault’s *History of Madness* he considers hysteria (alongside hypochondria⁹) as one of the “great figures of madness” Foucault describes hysteria as a “catch-all for ignorant doctor[s] who feign[ed] comprehension”, presenting the diagnosis of hysteria as a label assigned to make sense of women whom doctors could make no sense of.¹⁰ Diagnosing a women’s complaint as “hysterical” became an attempt to contain them. Foucault designated hysteria “a diverse, polymorphous malady that seems to spread throughout the body”, “in short, a sickness that could affect the whole corporeal space with such rapidity and cunning that it was virtually present throughout the entirety

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⁹ Foucault considers hypochondria a diagnosis for men, and hysteria a diagnosis for women.
of the body”.11 This image of hysterical affect as cunning, of “getting what is wanted in a clever and deceptive way”12, begins to present histrionics as having a force, or will of their own. Foucault alludes to the easy representability of hysteria, which “was ardent by nature, its symptoms referring more easily to an image than a disease”.13 Foucault’s description of hysteria as a form of possessing and displaying strong emotions underscores its ability to depict feelings and experiences deemed unintelligible. Foucault speaks of hystericists as having an “acute internal sensitivity,” an ability that I contend often grew out of repeated experiences of sexual and/or physical violence.14 He writes, “hysteria is indifferently mobile, immobile, fluid or heavy,” presenting theories on hysteria that attribute it to a fermentation within the body, or the ill nature of an acidic reaction.15 I read these classical theories as a way of trying to comprehend hysteria’s fleshy poetics. The effervescent changes the hysterical body was able to enact to portray strength, power, and fortitude were inadmissible and demonized on feminine bodies, and thus explained away in terms that tried to negate it. The image of fermenting and acidic interiors is the manifestation of the intense agitation of the hysterical woman and how she soured the environment around her. Viewing hysteria as a process of fermentation, as a process of change associated with environmental conditions precipitates the feminist analysis of hysteria, which began to analyze how social and cultural factors lend to hysterical behavior.

15 Foucault writes “For Lange, hysteria is the product of fermentation, or more precisely, a fermentation ‘of the salts, pushed out into different parts of the body’.” He attributes the acidic theory of hysteria to Michael Ettmüller (Foucault and Khalfa, *History of Madness*, 282.)
The mid to late twentieth century saw a rise in feminist theorizing on hysteria, which reclaimed hysteria first as a response to women’s oppression, then as a symbolization of endemic sexual violence within the family. Feminist reclaims of hysteria gained momentum from the 1960’s to the early 2000s. The connections between hysteria and the regulation of women are evident early in feminist reconceptions of hysteria like Ilza Veith’s *Hysteria: The History of a Disease*, published in 1964, which traces how the concept and representation of hysteria was applied to women from Ancient Egypt to the development of psychoanalysis in the nineteenth century.\(^{16}\) During the 1980’s feminists such as Elaine Showalter and Shoshana Felman utilized hysteria in relation to explorations on women’s madness, which they theorized as a reaction to the confined domesticity and idyllic virtue of white femininity women were forced to emulate.\(^{17}\) Madness for Felman, is “quite the opposite of rebellion. Madness is the impasse confronting those whom cultural conditioning has deprived of the very means of protest or self-affirmation.”\(^{18}\) These texts carefully circumvent the ways in which sexual violence is part of the cultural conditioning of women, as well as deny the ways in which dissent and self-affirmation so often arise in those who have been conditioned against these remonstrative qualities, the way these abilities can develop in spite of social and cultural conditioning.

Following the wave of feminist interventions theorizing sexual violence in the 1980’s, in 1992 Judith Herman’s *Trauma and Recovery: The Aftermath of Violence–From Domestic Abuse to Political Terror*, theorized hysteria’s relation to sexual violence

as that of a “forgotten history.”\textsuperscript{19} Herman presents an analysis of hysteria in relation to sexual violence through a lens of male power and patriarchal political control claiming that “hysteria is the combat neurosis of the sex war.”\textsuperscript{20} Coming from a background in clinical psychology, Herman connects manifestations of hysteria with contemporary frameworks of trauma such as Post-Traumatic Stress Disorder (PTSD) and the psychology of incest survivors.\textsuperscript{21} This approach continues to utilize medical and diagnostic frameworks for making sense of the effects of sexual violence, relegating them again to the realm of “illness”. These interpretations of hysteria analyze its construction, representation, and pathologization to build feminist analysis on the condition and status of women during these time periods, yet none take seriously the embodiment of hysteria itself as a source of knowledge about sexual violence and the body.

Feminist interventions into the discourse of hysteria delved deeply into Freudian psychoanalysis. Juliet Mitchell’s work in these field spans several decades; from her 1974 book \textit{Psychoanalysis and Feminism} to \textit{Mad Men and Medusas: Reclaiming Hysteria}, published in 2000. While I find myself drawn to Mitchell’s durational academic interest, she seems to retain Freud’s skepticism of the hysteric in relation to the role of phantasy in psychoanalysis claiming, “whatever the facts and figures of the situation, the desire was far more prevalent than the act.”\textsuperscript{22} While Mitchell does not ignore the prevalence of sexual violence, she refuses to entertain the notion of hysteria as a developed defense mechanism, instead continuing to engage with it as a form of pathology. She writes, “hysteria is the alternative, or the other side of what is regarded as normative behavior” and that, “As has been said, femininity is the good end and hysteria

\textsuperscript{19} Judith Lewis Herman, \textit{Trauma and Recovery} (London: Pandora, 2001), 10.
\textsuperscript{20} Herman, Trauma and Recovery, 28.
\textsuperscript{21} Herman, Trauma and Recovery, 32.
the bad end of this Oedipal trajectory. The hysteric refuses to settle for her role as object of desire for a man (initially the father), but instead roams ceaselessly between this feminine identification as object of desire and the masculine position of subject of desire.” Her analysis of hysterical women is based off their supposed failure along the Oedipal path of heterosexual desire, Mitchell reads hysteria as a form of regression, infantilizing those with hysterical affects. Mitchell’s continual reliance on the Oedipal forecloses queerness and pigeonholes her analysis within the confines of cissexism. The language of hysteria’s bisexuality can be read as a manifestation of anxiety over hysteria’s disturbance of dichotomous gender. Mitchell locates hysteria both at the “bad end of femininity” as well as the “charm of the feminine in excess.” Within this view, hysteria becomes both the overabundance of femininity as well as its complete opposite and negative end. While invariably seen as a gendered behavior, hysteria opens a range of feminine affect, rupturing the notion of femininity as a centralized location. Even hysteria seen in male patients (whom both Charcot and Freud believed existed) became read under a rubric of effeminacy, that which is ‘not manly’. Hysteria can be seen to enact a threat to one-dimensional, static understandings of gender. While Mitchell’s work challenges the idea that hysteria has “disappeared”, her foregrounding of the Oedipal complex in her analysis of hysteria both creates a connection between hysteria and queerness (that which does not follow the normative heterosexual Oedipal trajectory) and contains it within the legend of masculine subject of desire/feminine object of desire. The hysterical subjects I have chosen to write about in the next three chapters all display the

24 Mitchell, Mad Men and Medusas, 323.
25 Mitchell, Mad Men and Medusas, 292.
26 Mitchell, Psychoanalysis and Feminism, 115.
mischievous gender of the hysteric, crafting multiple gender embodiments that fluctuate over time.

Work in feminist anti-psychiatry studies and madness studies has built on identifications with historical figures deemed “hysterical”, “crazy”, “mad” and “insane”. These fields of study have pushed to understand the breadth of human emotional experiences beyond the pathologizing framework constituted by the psy-complex’s diagnostic standard, *The Diagnostic and Statistical Manual of Disorders* (DSM). The “epistemological violence of diagnosis” is unpacked by dismantling the “understanding [of] women’s experiences as a constellation of symptoms that are indicative of mental illness… [reframing] these experiences as reasonable responses to material inequalities; oppressive gender role expectations that limit women’s choices; and pervasive rates of sexual, physical, and emotional abuse.” Through this lens histrionics can be read as “understandable reactions, means of coping, surviving, and resisting oppressive conditions.” The urge to apply this lens to hysteria is not a simple recuperation of hysteria’s demonized theatricality, as much as an interrogation into what ‘non-normal health’ looks and feels like, and how “the hegemony of “normality” [is used] as a value judgement against the full range of human diversity.”

the hysteric’s complaints can still be perceived when doctors continue to take women’s pain less seriously and women are not seen as having autonomy over their bodies. Contemporary debates over abortion and birth control rights, fetal person-hood bills, and the criminalization of pregnant women all perpetuate understandings of women not having full understanding or ownership over their bodies. Similarly, identities or identifications that have or continue to be pathologized in the DSM (including current diagnoses of mental illness and removed diagnoses like Gender Identity Disorder) continue to fight for the rights to their own bodies in terms of HRT and SRS, involuntary incarceration in mental hospitals, and consent to medical treatments like psychotropic medications and shock treatments.

While this body of feminist work is invaluable to my readings of hysteria, they rely heavily on the textual presence of hysteria, the diagnostic dialectic which at its core holds the hysteric at bay as it tries to contain, control, discipline and pathologize her. By turning back to the hysterical gestures of Louise Augustine Gleizes and Ida Bauer I seek to underscore their performances as a source of knowledge production about the body, gender, and violence as well as connect these to other hysterical acts across time. In suturing together this view of hysteria, I hope to create a different, moving image of hysteria as opposed to the entombed version found within its canonized archive. In this regard, Diana Taylor’s work in The Archive and the Repertoire: Performing Cultural Memory in the Americas, offers an alternative lens for viewing performances of hysteria as a form of embodied knowledge surrounding sexual violence. Taylor explores how “performance functions as an episteme, a way of knowing, not simply an object of

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analysis” and how “we learn and transmit knowledge through embodied action”. The violent movements of histrionics showcase the power, force, agitation, and determinate resistance compelled through the constant navigation of violence. The performances of hysteria enacted by Gleizes’s and her peers became lodged in the lens of the camera, a series of repeated gestures and embodied actions that have stayed, unmoving throughout time. The clarity of many of these images attests to the determination of the women to have their pose recorded, which had to be held between 20 seconds and 5 minutes depending on the amount of light entering the lens and illuminating the subject. The dark images of the Icongraphie photographique de la Salpetriere suggest that these poses were held for significant periods of time, highlighting the will of the subject to have a particular movement recorded. Their performances of hysteria functioned as an embodied reaction to both past memories of sexual violence and ongoing threats to bodily sovereignty. Histrionics thus function as a source of knowledge about the corporeal capacities for surviving, resisting, and living through experiences of sexual violence. The records of these reactions, don’t betray whether they are conscious or not, and numerous scholars have entered the debate of whether these women were “faking” it. Within this debate I see the possibility of understanding hysterical acts as existing in a liminal space between unconsciously motivated and consciously acted upon. The gestures of hysteria seem to suture a place of understanding between psyche and soma, where the memories of mind and body join.

The medical documents of hysteria unintentionally inscribed the embodied knowledges of hysterical women. The poses and contortions of the body seem to be

34Hustvedt, Medical Muses,178.
saying something about how the body responds and adapts to violence. The range of gestures from catatonic to flailing reflects the methodologies of the body to endure violence. A repertoire of hysteria, defined by Taylor would consist of “embodied memory: performances, gestures, orality, movement, dance, singing—in short, all those acts usually thought of as ephemeral, non-reproducible knowledge.” The archive of hysteria treats the movements of histrionics–the jumping, shaking, quaking, screaming, crying, staring, and stammering as the evidence of symptoms, as supplements to the numerous written material in the archive. This paper tries to imagine a hysterical repertoire–that focuses closely on the minute movements and gestures of hysteria as a source of knowledge about the effects of sexual violence on the body and mind. Despite the seeming “disappearance” of hysteria, the embodied movements of hysteria as Taylor reminds us have disappeared only to hover, promising or threatening to reappear in another shape or form. My process looks backwards to images of hysteria as a way to illuminate the new shapes and forms that visceral intelligence about sexual violence takes. The gestures of hysteria, imagined and reimagined over centuries, can be utilized as a set of descriptive tools to communicate knowledge about sexual violence, to study its outlines, patterns, configurations, and compositions. In this way, hysteria becomes a modality to study the geometry of sexual violence and trauma.

**HYSTERICAL READING, READING HYSTERICALLY**

If hysteria can be viewed as a manifestation of extreme or excessive emotion projected both within and outside the body, reading hysterically would entail an overabundance of identification with the subject of the reading and the excessive cathexis

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36 Ibid., 144.
and physicality that those identificatory processes might entail. Reading hysterically might feel like the war that Dora leaves Cixous with, an overabundance of affect that cannot be forgotten or disavowed. My understanding of what hysterical reading might feel like is crafted in relation to Eve Sedgwick’s notion of reparative reading, which she articulated over the course of several essays and book chapters. She bases her analysis on Melanie Klein’s depressive/reparative position which Sedgwick describes as an “anxiety-mitigating achievement...from which it is possible to use one’s own resources to assemble or ‘repair’...once assembled to one’s own specifications, the more satisfying object is available both to be identified with and to offer one nourishment in return.” The hysteretic is in the constant reparative position, using her own corporeal resources to alter her interactions with others, to become the embodiment of power she is thought to not have. Histrionics become a form of sustenance, a way to counteract the lack of control over one’s body. One of Klein’s names for this reparative position, Sedgwick informs us, is “love.”

The root of my impulse to study the images of hysterical women seems to come from a love of this sort. My obsession with hysterical women began when I was twelve years old, and was handed a tattered coverless copy of Freud’s Dora: An Analysis of a Case of Hysteria, voluminous with water damage. I loved her instantly. The book itself, contraband in the psychiatric hospital where I found it, was hidden amongst secret pockets, and read out loud in hushed tones hidden behind issues of Seventeen magazine. Dora became our hero, and a way to both simultaneously resist the psychiatric confines.

38 It is important to note here that adolescent psychiatric wards tend to censor reading materials that are not for school assignments or considered “light reading” like magazines. Nevertheless, the heterosexist agenda of magazines like Seventeen magazine can hardly be considered “light reading”. Also, the impression that those who may be depressed cannot handle “strenuous” mental activity harkens back to ideas surrounding female mental inferiority and the “rest cure” as a solution for an incarnation of hysteria.
of “healing” and speak its language as a means to secure release from the hospital. Dora never left me, and I sought out images of her likeness in film, painting, photography, and literature. These images of hysteria lead me back through the aesthetic history of hysteria and I found myself amidst the screaming, contorting women of the Salpêtrière, and Louise Augustine Gleizes. I connected with these images in the way I instantly connected with Dora, feeling that spark and instant rush of identification. I cannot help feeling that these women are part of me, or that I am part of them.

In order to write about hysterical women within the scholarly forums in which it exists, one has to be familiar with the massive scholarly vault of theorizing on hysteria. I have endured this often misogynistic and heterosexist literature to be able to write about these women. I love the hysterics that much. Sedgwick writes, “Love of a book, even a sinister book, love that generates out of concentrated mediation on its pieces a different and needed book; the transformative, frankly instrumental love of the artifacts of a culture, threatening though that culture itself may be…”39 The history of hysteria that I have found is indeed sinister, full of manipulative doctors, coerced treatments, damaging drugs, bizarre experiments, sexual violence and deceit. These things can still be said in some way of the psy-complex today.40 These images of hysteria come out of a time period where white imperial power was struggling to support its thesis of dominance. Classifying, categorizing, and generalizing were used as tools to bestow pathology on groups of people, races, and classes deemed inferior. The consolidation of power through scientific racism and eugenics that occurred over the nineteenth century continue to haunt. Despite how threatening the culture that gave rise to the Victorian madwomen may

40 The development of disciplinary fields such as madness studies and anti-psychiatry studies centers around a critique of psychology as a disciplinary project.
be, I cannot help but love her. I have concentrated on the fragments of hysteria since the first moment I met Dora, whose real name (Ida Bauer) I didn’t know until years later. From that initial introduction I saw her ability to alter people’s doubts about their bodies and experiences, doubts that did not exist before psychiatric intervention. My hysterically reparative position on hysterics is as much about their transformation of me as my transformation of them.41 I just cannot let them go.

My obsessional interest in representations of hysteria, and the relationships I have developed with my favorite hysterics have enabled me to indulge in my own hysterical tendencies, and to hysterically invest in the texts and theorists I use throughout this paper.42 I have chosen the works of queer and feminist thinkers and writers whose books engage me in the same way as performances of hysteria. These texts subsume temporality, making time feel endlessly suspended until I can finish that sentence, paragraph, section, chapter. These works make my heart beat fast, as I trip through them both trying to finish the thought and simultaneously dragging my heels to savor every delicious moment. I feel these texts throughout my body, they cause sparks, stings, glimmers, pinches, caresses, pokes, whispers, vibrations and hums as I read. To engage in hysterical reading is to allow oneself to indulge in the full pleasures within the body of the text, to give in to the corporeal pleasures of reading. These texts reflect the push and pull of hysterical performances, the coming together and forcing apart of the psyche and body. Reading these theories makes me feel my body, where it does not line up, make

41 In Willful Subjects (Ahmed writes, “Research involves being open to being transformed by what we encounter.” (13)
42 Sedgwick pushes me here as well, a whisper in my ear reminding me in Touching Feeling: Affect, Pedagogy, Performativity (Duke University Press, 2003) how she was “fond of observing how obsession is the most durable form of intellectual capital” (2).
sense, or fit into the narrative it is supposed to. The theory that drives me never feels disembodied, since it has been a place where I have been able to find my body.  

In the photographs of Gleizes, her body is always the main focal point. The photography studio at the Salpêtrière was equipped with a bed and backdrop to allow the sole focus to be on the hysterical body. Thus we view Gleizes in a series of isolated images, framed by doctors; devoid of the context of her daily life. Her body her only tool.

Sedgwick writes:
“…the reparatively positioned reader tries to organize the fragments and part-objects she encounters or creates. Because the reader has room to realize that the future may be different from the present, it is also possible for her to entertain such profoundly painful, profoundly relieving, ethically crucial possibilities as that the past, in turn, could have happened differently from the way it did.”

The biographical tidbits and context-devoid images of Gleizes become the ‘fragments’ and ‘part-objects’ that exist among the tidal wave of the sinister nineteenth century discourses on hysteria. In viewing the differences and convergences along the continuum of hysteria through time, one understands these images as contextual, situational, and almost infinite in their theoretical and interpretative outcomes. Part of the extraordinariness of hysteria is its ability to ‘ceaselessly roam’, becoming many different things to many different people. “The urgencies and pleasures of reading against the grain of any influential text,” such as the dangerous discourses of hysteria come from the crucial possibility that “the past…could have happened differently from the way it did.”

As I followed the traces of the hysterical women throughout hysteria’s archive,

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43 In elementary school, kids used to tease me because I was so small that they could barely see me. As a queer femme, I am most often read as straight. These readings tend to erase both me, and my partner.


the ambiguous pieces I collected seemed to create the possibility that when they disappeared from the archive, they crafted whole new lives out of their hysterics.

I Promise I’ll Never Stop Looking

The following three chapters chart the paths I have taken following hysterical performances. Within each of the corporeal maps laid out in the accounts of Gleizes, Bauer, and Sycamore sexual violence becomes part of the legend, not a transparency to be laid over but a structuring force in the self-conceptions of these hysterical figures. Alongside Gleizes’s screams, Bauer’s perpetual revolt, and Sycamore’s shards lay a new language for articulating the ‘unspeakable’ qualities of sexual violence. While their experiences of sexual violence are always a product of the culture and context through which they occur, the corporeal responses to this type of violence can be remarkably similar. While sexual violence can have deadly consequences, these experiences have the power to push the body beyond its limits, creating an unseen reservoir of strength. Recurrences of sexual violence drive the development of corporeal strategies of resistance, a repertoire of embodiments that build and sustain the endurance to experience overt sexual violence as well as the many insidious forms it takes. These bodily engagements in learning to endure, withstand, and survive sexual violence produce distinctive and remarkable ways of existing in the world.

In the first chapter, I apply a hysterical reading method to images of Louise Augustine Gleizes, understanding the moments captured as records of her embodied theorizations on enduring violence. Her hollow gaze, echoing scream, and careful display of hysterical limbs archive her bodily response to violence, and the defensive repertoire that grows beneath the skin. I follow Gleizes till she slips from the archive, connecting the power of her hysterical performances with her emboldened escape from the
Salpêtrière. In the second chapter, I connect the hyperbolical actions of Gleizes’s to the case history of Ida Bauer, understanding her more subdued gestures as a response to her particular circumstances. I hysterically read for Bauer in both Freud’s case study as well as an examination of her that took place decades later. While not written by her, these works describe Bauer’s physical symptoms in a way that evokes her body enough for us to feel her— the incessant coughing, the abdominal pain, the unshakeable feeling in the throat. These actions too begin to materialize the modalities the body has of clearing out the remnants that sexual violence can leave on and within the skin. This understanding of hysteria creates avenues to discuss the visceral ways the body creates knowledge after enduring sexual violence. In the final chapter I utilize this dynamic view of the body to hysterically read the work of Mattilda Bernstein Sycamore, attentive to the ways she utilizes the language of somatic survival to continue the hysterical tradition of utilizing the body to manifest the effects of sexual trauma. Sycamore’s work explores how memories of sexual violence get embedded through the skin, and the material effects of this corporeal archive. I explore how the tension of this lived record continues to produce alternate forms of knowledge regarding the body’s capacity for enduring violence. The privileging of these visceral forms of knowledge allows Sycamore to connect with others who hold a repertoire of survival skills within them. The relationships Sycamore creates with other survivors, based in the “rigorous intimacy of understanding,” create modalities of kinship and relationality enabled to be in tune with the trauma within the everyday. 47

Since sexual violence is often only witnessed by the people involved, the aftermath has the ability to cause isolation and alienation for those who experience it. When violence is ignored or swept under the rug this sense of seclusion increases. People

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47 Mattilda Bernstein Sycamore, personal correspondence with author, March 31 2016.
who experience sexual violence often bear the tremendous weight of these remembrances alone, causing these impactful events seemingly to exist only in their memories. Recognizing other survivors of violence has the potential to counter these feelings of sequestration. Discerning the signs of sexual violence opens up moments of identification where the burden of these memories can be shared. Despite the individuality and distance of experiences, these recollections of sexual violence have the potential to produce sparks of intimacy and attachment. These moments of connection work through theorizations of sexual violence as a trauma defined in essence as resistant to representation, as that which is unspeakable, untouchable, and utterly unknowable. This thesis re-introduces the language of hysteria and its recognizable affects to re-work the model of sexual trauma as incomprehensible and doomed to imperceptibility. The lasting images of hysterical women promise that sexual violence can always be seen and understood when there are those who are willing to recognize it.
Chapter One: The Extraordinary Hysteria of Louise Augustine Gleizes

Louise Augustine Gleizes is one of the most famous models of hysteria. I am not the first to be captivated by Gleizes, who was included in twenty-two of the illustrations within the *Iconographie Photographique de la Salpêtrière*, Charcot’s massive treatise documenting, categorizing, and charting hysterical attacks. It is clear to many the influence she had on Charcot’s photographic technician, Regnard P. Bourneville, who transcribed the bulk of her case history that accompanies her images. She has continued to influence those who have come into contact with her, like the feminist historiographers who have searched for her in the archives. While little is known about the life of Gleizes, Asti Hustvedt’s biographic accounts of Charcot’s most famous hysterics has been useful for contextualizing Gleizes’s hysterics with what is known about her. The title of Hustvedt’s book, *Medical Muses: Hysteria in Nineteenth Century Paris* illustrates the relationship she depicts between the images of hysteria produced by the bodies of Gleizes and her peers, and the psychiatric fields of inquiry they ‘inspired’. The archive of hysteria, dominated by the voices and perspectives of male clinicians and doctors, tends to obscure the contributions and knowledge that hysterical women brought with them into the hospital. The working class women of the Salpêtrière experienced a continuum of sexual violence at work, at home, and on the streets. Sexual violence and harassment were key to challenging the autonomy of self-supporting and wage earning

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50 Hustvedt also writes about Blanche Wittman (Marie Wittman), famously inscribed in the Andre Brouillet painting, *A Clinical Lesson at the Salpêtrière* and Genevieve (Jeanne des Agnes) who experienced religious hallucinations.
women. With limited social or institutional supports to counter this violence, women utilized their embodied knowledge to create strategies of resistance and resilience to the perpetual onslaught of sexual violence. I read Gleizes’s bodily performances of hysteria as a physical manifestation and condensation of these strategies of resistance.

The images I have chosen to use in this chapter provoke in me what I would like to call a hysterical reading practice. Something about these pictures incites an instant recognition in me, I cannot help but see myself in them. Looking at Gleizes makes parts of my body ache, my limbs start to feel restless, my body sometimes quivers a little. The physicality of Gleizes’s emotions sparks a physicality in mine. Looking at her makes me feel (like) her, a point of contact that exists beyond the case history that accompanies her image. Drawing on scarce biographical information about Gleizes culled from feminist historiographies of hysteria, I read the images of Gleizes as a documentation of her performances of hysteria, which she vigorously engaged to produce and visualize the effects of sexual violence. To this extent, I explore her hysterical symptoms—fainting, screaming, crying, convulsions, paralysis, and nausea, as an articulation of the corporeal memory of sexual violence, a performance enacted to insist upon the realities of this violence in a context that disregarded it. I use the language of performance to describe Gleizes’s hysterical fits to illustrate the ways in which she actively produced these images of herself. Gleizes was known for her “unique ability to hold dramatic and physically demanding ‘hysteric’ poses for long periods of time that led to her continued and frequently employ. This ability….obtain[ed] comparatively consistent results…”

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Gleizes’s hysterical labor and endurance were thus viewed and recognized as her unique abilities and contribution to the images by the doctors of the Salpêtrière.

Listening to Gleizes’s within these images entails paying careful consideration to the lived realities of her working-class life and institutionalization within a hospital system meant to criminalize and pathologize working-class women. Placed within the Salpêtrière when her symptoms could no longer be managed by her family, her successful treatment would have entailed the return of Gleizes back inside the confines of the nuclear family. As Michel Foucault writes, “The supervision of normality [became] firmly encased in a medicine or a psychiatry that provided it with a sort of ‘scientificity’; it was supported by a judicial apparatus which, directly or indirectly, gave it legal justification.” The psychiatric hospital, and soon after, the psychoanalyst, psychiatrist (and even later the pharmacologist) became the arbiters of acceptability, normality, deviance, and pathology. This newfound power utilized hysteria to create a gendered niche in the pathologization of the poor in nineteenth century France which utilized the rhetoric of hereditary madness to control a population of women who resided outside the increasingly defined and enclosing confines of white feminine behavior. While the photographs of Gleizes have outlived the eugenics-derived theorizations built upon them, the discourse aimed to regulate, contain, and control the accusations of hysterical women must be seen as lurking in the shadows of these performances of hysteria.

The readings of Louise Augustine Gleizes’s photographs come out of my concentrated exchange with these images, the effects of feminist and queer theory sparking behind my eyes. This exchange is a dialogue, as Gleizes always meets my gaze, whenever I look at her. Wherever she is, on my computer screen or within the pages of a

book, I am amazed at the ability of the photographs to transcend all the layers of their reproduction and pull me in, as if I’m holding an “original” nineteenth century print. The images of her shrieking make my throat feel hoarse, depictions of frozen limbs bring tingles to mine, as if they’ve been trapped underneath something heavy. When I see images of the full on “arch of hysteria”, a familiar pain along my lower back creeps up along my spine, forcing my body to twist and arch to relieve the pressure. These photographs chill over me, goosebumps prickling my skin, hair standing on end. There is no doubt these reactions seem hysterical. A doctor might call them conversion symptoms. However, something about looking at her body makes me feel mine in ways I often ignore.

A STAR IS BORN: THE HEROIC AGE OF HYSTERIA

Louise Augustine Gleizes was born August 21, 1861, and admitted to the Salpêtrière on October 21, 1875, the year photography was introduced into the hospital as a tool of pseudo-science, enabling her to take full advantage of the photographic economy that was quick to develop. (During her youth, the carte-de-visite became ever more popular and accessible, and she would have been familiar with the process of sitting and posing in front of a camera.) After spending her infancy with a wet nurse, Gleizes was sent to live with relatives as a young child, and then a covenant school where she resided until she was thirteen. During this time, Gleizes befriended a young married

55 Judith Lewis Herman, Trauma and Recovery (London: Pandora, 2001), 8.
56 Details from Gleizes bibliography are taken from the account of her life included in Asti Hustvedt Medical Muses: Hysteria in Nineteenth Century Paris (2011), as well as the following texts historicizing and analyzing hysteria: Ilza Veith’s Hysteria: The History of a Disease (University of Chicago Press, 1970), Georges Didi-Huberman’s Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière (MIT Press, 2013).
couple. The arguments and violence Gleizes witnessed here culminated in the husbands attempt to assault her at the age of ten, a memory that she brought up frequently during her time at the Salpêtrière. After withdrawing her from school, Gleizes’s mother placed her in a job as nanny for a man known as Mr. C. Throughout her time in this job, her employer, who she was forced to call “Father”, attempted to attack her several times before finally managing to complete an assault, after which she managed to leave the job permanently and secure employment elsewhere.58

This experience of sexual violence produced physical effects in Gleizes such as severe abdominal cramps and vomiting. These conditions were diagnosed by a physician as her first menstrual period, rather than a traumatic injury. Following the assault, despite the fact that Gleizes continued to suffer from “nervous attacks”, her mother found her a new job as a chambermaid for an elderly woman. The newfound lack of constraint in her employment (the elderly woman was unimposing as she was not trying to assault her like Mr. C) allowed Gleizes to begin exploring her sexuality, which caused an explosive cascade of family secrets concerning Gleizes’s rapist, Mr. C, her brother’s paternity (he was the child of Mr. C), and the economic transaction (that included Gleizes’s sexual services) between her mother and Mr. C that precluded her assignment to his household.59 Following these revelations, Gleizes’s hysterical symptoms worsened until her mother eventually admitted her to the Salpêtrière in 1875 to treat both paralysis and convulsions. While I am interested in the background and life history of Gleizes, my identification with her preceded any of this knowledge of her life history. Something about the stiffness of her body, the drilling intensity of her stare invited me to begin

58 Hustvedt, Medical Muses, 152.
59 While there is no written evidence that this particular employer was abusive in any way, I would like to stress the possibility of an elderly female employer also being a cause of sexual danger. This does not seem to have been the case here though.
thinking of the possibility that she knew how lasting these photographs would be, the indelible effect they might have on those who viewed them.

In viewing Gleizes’s abbreviated life history, I contend that a few factors within her narrative coincide with my understanding of hysteria in relation to sexual violence. Her hysterics appear after scenes of sexual violence, and reoccur in relation to violent events. Her resourcefulness and ability to thwart this danger is evidenced in the failed attack by her friend’s husband and the multiple futile assaults of Mr. C. There is a refusal by doctors and her family to recognize the impacts of the sexual violence, even when manifested in physical symptoms, causing these signs to worsen until they could not be ignored. Gleizes’s sexuality is also an underlying structure of her case since developments in her sexuality become a defining feature in her recorded case history. In my hysterical reading of Gleizes’s images, I utilize her history of sexual violence as a tool to understand the knowledge embedded within her gestures. In telling “a feminist story about hysteria”, which Sarah Ahmed views as a “part of a willful feminist inheritance,” I understand the violent elements of Gleizes’s experiences that willed her to develop survival strategies for bodily autonomy, modalities for feeling freedom within constraint, and the ability to listen to her body despite the disbelief of her family and doctors.60

Gleizes’s ability to endure both the initial attacks and their denial as well as insist on their effects through her histrionics exemplifies the type of willfulness that Ahmed studies in Willful Subjects. She writes, “The willed and voluntary assumption of stigma can be understood as political art: a way of performing the body…”61 Gleizes’s performance of hysteria carry the stigma of the acidic hysterical woman, something she

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61 Ahmed, Willful Subjects, 162.
appears to wear with pride, as we find pictures of her smiling amidst her dark surroundings. “For some, willfulness might be necessary for an existence to be possible. When willfulness is necessary another world becomes possible.” For Gleizes’s, her willfulness is what made her survival of the Salpêtrière possible, channeling the lessons her body learned through enduring sexual violence to tolerate the multitude of “therapies” for hysteria including hypnosis and drug interventions (specifically ether and chloroform.)

Gleizes’s performances of hysteria, her over-the-top emotions and gestures underscores how “willfulness can be deposited in our bodies,” how “perhaps willful parts queer the whole body,” and how “willfulness can be a trace left behind, a reopening of what might have been closed down, a modification of what seems reachable, a revitalization of the question of what it is to be for.” The persistence of Gleizes’s images, the way they disappear and reappear in different types of theoretical thought, can be understood as a trace of her willfulness. Although it is impossible to ever know her true intent as she sat in front of the camera, the fact that she posed so professionally, made herself such a perfect model, opens up the possibility that Gleizes’s was drawn to the potential wide-scale circulation of these images. As she eternally stares back at her viewers there is “a sense of [her] being in charge of what [she] is charged with.”

Her story, published alongside her images in the *Iconographie Photographique*, was no longer contained within the confines of her family or inside the walls of the Salpêtrière. Ahmed writes, “…the diagnosis of willfulness is a way of creating strangers, those who are not part, although as we have learned, those who come ‘apart’ can become

62 Ibid., 60.
63 On chloroform addiction see Hustvedt, *Medical Muses*, 45.
65 Ibid., 168.
parts of a new whole.” The new whole that Gleizes’s becomes a part of is the “willful feminist inheritance”, the circuits of knowledge production and theorizing that take her in as part of their genealogy. The limitless gestures of hysteria seem open to endless revitalization, a constant question to what these gestures can be used for.

The intended purpose of the photographs of Gleizes was to provide a guise of empiricism to Charcot’s classification and schematization of hysterical affects, the recorded photographic image supposedly betraying the ‘truth’ of the hysterical woman. These photographs however, instead of being solidly empirical, seem endlessly open to different theoretical purposes. What one person sees as an image of a powerlessness, another sees as a negotiation and wielding of power. Charcot’s constant demand for hysterical performances created a mode of currency for institutionalized women to draw upon and “negotiate power within circumstances of great limitations.” A diagnosis of hysteria carried certain privileges, including forms of better treatment and the opportunity for those diagnosed as hysterical to leave the hospital for periods of time, something hysterical women did to earn money using their talents as mystics and performers. While the stakes in hysterical performances carefully mitigated daily existence, it is hard to read the images of Gleizes as empty gestures void of emotion due to her undeniable presence within the photographs, her willful intent to be seen.

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66 Ibid., 126.
67 Herman, Trauma and Recovery, 11.
68 Anne McClintock, Imperial Leather: Race, Gender, and Sexuality in the Colonial Contest (New York: Routledge, 1995), 140.
69 Hustvedt, Medical Muses, 47.
The first photograph of her in the *Iconographie* is her in a “normal” state, the day she arrived at the Salpêtrière. Her pose reflects an accomplished portrait sitter as she tilts her head slightly onto the fingers of a raised hand, the other placed in her lap. Her gaze acknowledges the camera, accentuating that she knows she is being recorded, and the potential the camera holds to circulate her image beyond the hospital, outside her family, and through time as we look at her now, her knowing gaze meeting ours. The text that accompanies this image revolves around her “ribbons” and love of adornment. Her hyper-attention to self-presentation is seen as evidence of her hysterical pathology by her doctors. I read the pleasure Gleizes’s takes in adorning her body as indicative of her desire to play with gendered embodiment, her inclinations towards finding pleasure

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within the play and display of gender. This attention to appearance can still be read as a trace in the images that follow when Gleizes is in a hospital gown, the formless shape of which allows her to experience her gendered embodiment in new arrangements. What the hospital gown lacks in aesthetic quality it made up for in the utility of movement, lacking the “bones” of more traditional female clothing, and as such opened up room for her body to move in new ways.

The careful refinement of hysterical performances reveals the layers of meaning that hysteria presented to the women who cultivated it, like Gleizes. Initially, Gleizes’s hysterical symptoms (paralysis, convulsions) manifested during a time when she was, or felt herself to be, in physical danger. The histrionics began after the initial attack by her friend’s husband, and appeared again during the period where she was under the threat of sexual violence from Mr. C. Her initial resistance was culled from the experiences of watching the couple and internalizing the means by which her friend endured her abusive husband, she was then able to leverage this knowledge when he tried to attack her. By the time she started work for Mr. C, she had corporeal knowledge about both the warning signs of violence, and the means to skirt and endure it. Gleizes’s histrionics, heightened through experiences of attempted assaults, became a means to protect herself from the continuous threat of sexual violence. The quakes, convulsions, and screams of hysteria could potentially protect her body from becoming a target for sexual violence, allowing her to thwart numerous attempts at sexual violence over Mr. C. Although he did manage to finally attack her, she was able to recognize this violence, and put a stop to it by leaving her job. The fact that her mother found her employment with an elderly woman suggests that Gleizes may have had a hand in looking for an employer from whom the
threat of sexual violence would be less.\footnote{Although it is entirely possible for Gleizes to suffer sexual violence at the hands of a female employer, the description of this woman as “elderly” suggests that she genuinely appeared less physically as a threat.} Her success in leaving Mr. C’s employment displays a sense of agency despite the ways in which her body had been used as a method of transaction. Gleizes had learned to adapt herself to the politics of the transactional.

Once institutionalized within the hospital, the threat of violence took on new and shifting forms. The fear of sexual violence was not displaced, as there were no morality clauses over doctors having sexual relations with their patients. In addition to the threat of physical and sexual violence, women institutionalized at the Salpêtrière had to contend with a varying array of treatments constituting a spectrum of harm. In this way the hysterical performances of Gleizes integrated her corporeal memories of sexual violence and learned survival strategies in an environment that put her in constant threat of physical, sexual, and medical disciplinary measures. Histrionics, the elaborate performance of hysterical affects, enabled Gleizes both a method to navigate her daily existence, and to perpetuate an image of herself as a visible survivor of sexual violence, a defining aspect of her personhood that was constantly negated within the confines of her family.

**TOUCHING TRAUMA, OR IS IT HYSTERICAL I CAN FEEL THAT?**

The photography of Gleizes enacted a crystallization of her corporeal memories of trauma. The range of emotions within her hysterical images highlights the “repetition with difference”, she employed to gain control of her histrionics, taking charge of what she charged with.\footnote{Donna Minkowitz, ”My Father, My Self,” *The Village Voice* (New York City, NY), April 3, 1993, 17-18, Alt-PressWatch.} The constant performances she enacted allowed her to to visualize the different emotions and physical effects that derived from her memories of abuse.
Removed from their original context, Gleizes’s defensive reactions became a source of power as the recorded images validated her understandings of the effects of sexual violence on her body. The second image of her in the *Iconographie*, immediately following her “normal” phase, exemplifies the dimensions of her corporeal emotionality. The image of Gleizes highlights her terror, her mouth frozen in a perpetual roar, terrorized by an unknown, her arms pulled down out of frame. Her gaping mouth is the focal point of the image, where the viewer is drawn in, almost feeling the reverberations of her scream omitting from the darkness. In this image of Gleizes, we do not know what terrorizes her, if the downward force of her arms is self-propelled or if she is being restricted beyond the band around her waist. The containment of the band is palpable in the tension felt as her body pushes against the constraint, the growing gap underneath her casting shadows onto her white uniform. Despite these attempts to control her, her bellowing scream animates the image, forced on by the willful intent of her eyes, two things she is able to control. The scream opens up the potentialities within the constrained, controlled body, a body in danger. The gesture of the scream enacts the struggle her body cannot. Her isolation is evident through her stark surroundings, which become voided through the darkness and shadows of the image. Her silent scream feels distinctly recognizable as an evocation of the memory of sexual trauma, a corporeal terror that often there is no defense for besides noise. A shriek can produce a show of force, constructing an extreme contradiction of puissance— the strength of the cry has the potential to overwhelm the vulnerability of the body, either by confusing the assailant or by summoning help. The excessive visuality of the scream makes her mouth seem almost as if it is pried open by the force of its intent to be heard. Her barred bottom teeth, poised within the threshold of masticatory force, evoke the danger of spikes. The power within her mouth is visceral, physical, and auditory. The sound of sexual trauma is so often the
unheard screech, a privatized terror that haunts through its continual reverberations. With Gleizes’s recorded scream, her terror leaves the realms of the private and becomes continually re-seen.

Figure 2: Image of Louise Augustine Gleizes screaming.

When I see this image of Gleizes’s screaming, it is as though I can hear it, the echoes reverberating around my body collecting in places where my body screams as well. To feel the force of her scream is to reckon with the way sexual violence is absorbed into the body through touch. This violence sears the skin often only invisibly recording the incision. This corporeal trace is often the only evidence that sexual violence occurred. Ann Cvetkovich, in An Archive of Feelings: Trauma, Sexuality and Lesbian Public Cultures explores “the possibility that touch can be so affecting as to be traumatic”, and how these “affective experiences can provide the basis for new cultures.”74 The physicality of sexual violence ruptures somatic forms of intimacy, igniting forms of association between violence and touch that opens the formation of

alternative pathways to intimacy. The inscription of the ephemeral effects of sexual violence take on a concrete form through this photographic recording, creating a physical imprint of sexual violence. The weight of a limb frozen in fear, the emptiness of an endless scream, a hollowness that feels massive, solidify when they become inscribed in an image (or story). These representations create a material form to grasp, crafted through layers of repetitive difference. To manifest sexual violence in this way makes it tangible, relatable, and shareable, crafting the perceptibility of sexual violence. To feel the echo of her gestures, the vibration of her scream is to recognize this unconscious inheritance of hysterical resistance to being unseen. The fashioning of visible survivorship creates new cultural and familial forms that recognize the range of effects of sexual violence and the ways in which these have been renegotiated into an epistemology of endurance. These connotations have the potential to reduce the scorch of hysterical memory through repeated forms of touch that do not harm.
Figure 3: Louise Augustine Gleizes in bed.

Despite the skulking dangers that we cannot see on the other side of the camera, I also feel the intimate and joyful pangs of recognition, the way my own body seems to push up against the pressures around it. These images seem to fight. Gleizes combats obscurity, against being theorized away, subsumed under classifications and diagnosis. Gleizes’s intent controls the scene even within images where she seems seemingly has no power. One image shows her peering out of a bed, the bottom bars just barely perceptible, her body surrounded and absorbed by a mass of white linens. One half of her face is cast in shadow as she leans into her own body, one eye piercing through the camera lens. While her body is diminished within the gaze of the camera, hidden and flattened under the sheets, her head, hair and expression are in focus. Her gaze seems to look at and
through both the photographer and viewer of the image. A slightly raised eyebrow suggests a command over the frame, as she invites us to look at her. This determined gaze governs the image, despite the seeming incomprehensibility of her body amidst the blankets. The corporeal memory of defenselessness is envisioned in this picture of Gleizes, alongside a potential power invoked through the navigation of traumatic situations. Sexual violence forces the body to develop new ways to resist, to go numb, to not feel. Initially this ineffectiveness of the body, being frozen in fear, feels like betrayal. Through repeated use, this sensory deprivation can develop into armor, allowing the body to withstand pain and violence beyond its limits. When Gleizes’ appears stiff, her body is enacting a shield against those who who are trying to control her. This armored quality of stone reflects what Ahmed describes as the queer “history of those who have become unyielding as a way of surviving, a history of those who might have to protect themselves by becoming stones.”

The stony qualities of numbness, its potentialities of protection, become a form of visceral knowledge in enduring a multitude of violences. Gleizes’s histrionics allowed her to turn herself into an impenetrable wall against the onslaught of violence within the hospital’s disciplinary regime, which becomes key to her ability to imagine her life outside its walls. The hardness of stone becomes what is necessary to eventually break down the walls surrounding her.

Every time I look at these images, I feel the violence that lurks inside Gleizes’s gestures. It’s absent presence seems to evacuate my insides causing a hollow pit to form in my stomach. Yet, I love looking at them, and despite the pit, they give me a sense of an uneasy yet comforting calm. The movements of Gleizes in the pictures form a set of embodied theorizations on the incorporation of sexual violence within the body. Cathy

Ahmed, Willful Subjects, 189.
Caruth, in her introduction to the anthology *Trauma: Explorations in Memory* writes, “the impact of the traumatic event lies precisely in its belatedness, in its refusal to be simply located, in its insistent appearance outside the boundaries of any single place or time.” 76 In the event of sexual violence, its refusal to “be simply located” stems in part from the fear that it will happen again. While exact statistics regarding prevalence of sexual violence can never be fully known, the pervasiveness of sexual and domestic violence throughout history makes the fear of it occurring justifiable. The fear of constant corporeal danger makes the memory of sexual violence haunt those who have endured it outside of any physical space or time. The inability of sexual violence to be simply located belies how it “takes place outside the realm of socially validated reality” 77. When sexual violence is denied like in the case of Gleizes (by her mother and her physician), the way it inhabits the body changes. Histrionics become shaped as reactions to the societal denial of sexual violence. Hysteria enabled the effects of sexual violence on the body to become visible in a way that could not be denied. Caruth writes, “The flashback, or traumatic reenactment conveys, both the truth of an event, and the truth of its incomprehensibility”. 78 Gleizes’s performances of hysteria work as traumatic reenactments designed to make visible bodily affect (pain, terror, emptiness, constraint, power, fury, rage, etc.) and present the limits of that knowingness. 79 Violence is never enacted in precise terms within Gleizes’s repertoire, but becomes that which we can feel, but never fully grasp. In this way the aesthetics of hysteria reformulates understandings of sexual violence as traumatic unknowingness. Sexual violence does not lie beyond

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77 Herman, *Trauma and Recovery*, 8.
78 Caruth, *Trauma: Explorations*, 153.
79 Etcetera is important here since I do not think (or wish to imply) that there is a capped set of reactions one can have towards sexual violence. Hysteria presents to me an infinite set of corporeal positions that body might take.
comprehension, especially for those who have endured it repeatedly, like Gleizes. In her performances of hysteria, Gleizes’s works through and crafts ways to represent sexual violence on her body.

As her images progress through the *Iconographie*, Gleizes’s appears to gain more confidence in her performances. One image of Gleizes shows her coyly in control of her body, eyes gazing directly into the camera lens, confronting again both the man who recorded her image, as well as her future viewers. The prolonged exposure times common to collodion photography, “a notoriously fickle process that also demanded extremely long sittings”, exemplify the amount of control she utilized to create these images, holding her body taunt to create crisp, legible photographs.80 Turned to the side, her head slightly tilted and downcast, Gleizes displays a slightly twisted arm, rigid and straight. This image presents her hysterical paralysis, which she displays seductively, her head tilt mimicking the angle of her very first photograph. She has learned to harness this movement even more here as it invites us to look at the same time that her hand threatens to poke through the photograph. Her fingers curl into a slightly open fist at the bottom edge of the frame, the tilt of her head and the angle of her arm meeting to push the eye down toward the curling fingers. I read this almost-fist is a trace of the defensive mechanism that I argue yielded the paralysis, the use of her arm and hand to hit, punch, and scratch. The muscles of an arm always ready to fight and rigid with strength and anticipation, learns and remembers that movement and tension. Gleizes’s control and display of her paralyzed limb underscores my construction of these images as a form of self-representation. She looks like she is someone who knows what she is doing, completely acclimated to her frozen limb. Her penetrating gaze as she looks down into

the camera reflects the relationship she developed with the new technology that recorded her performative labor. While she had no control over the circulation of her images, Gleizes’s knowledgeable stare reflects a potential desire to create representations of herself that would circulate outside the confines of her family. The tight cropping of the photographs created a border within which everything was hers to control. She appears to have known that the focus of the camera was on her. Under the guise of scientific objectivity, the men who photographed Gleizes’s hysterical attacks were there to record her and document her actions in a ‘neutral’ way, which she actively engaged through her conscious performances of self-representation. Her dynamic construction of corporeal memories of violence refracted her imposed passivity onto the men who stood by and watched her. Gleizes’s intent and focus in these photographs emphasize how photography provided her a platform to re-create her own subjectivity. The reproducibility of the photograph allowed Gleizes’s image and story to circulate beyond the Iconographie. Once published, they entered public circulation, and the hysterics of Gleizes’s become a part of the public debates on hysteria. No longer a purely private matter, Gleizes’s experiences of sexual violence moved forever outside the confines of the nuclear family. The palpable recognition of her emotions, the tangibility of sexual violence becomes a new type of bond between Gleizes’s and those who find her unforgettable.
INHERITING Hysteria

To become a part of a genealogy outside her nuclear family Gleizes’s story and her embodied knowledge had to leave the enclosing confines of the family, where sexual violence so often goes ignored, silenced, and repudiated. The sexual terror that pervaded the lives of many hysterical patients often displayed no physical trace, and when it did it was often dismissed, similar to Gleizes. Bleeding caused by sexual violence was often misdiagnosed as menstrual bleeding so as to disguise its actual source. \textsuperscript{81} Physicians went so far as to insist that diseases now confirmed to be sexually transmitted could be spread through non-sexual contact to protect the innocence of fathers in spreading diseases to

\textsuperscript{81} Hustvedt, \textit{Medical Muses}, 152. This was the case with Gleizes, who suffered from severe abdominal pain and cramps following a sexual assault by her employer. A physician diagnosed these symptoms as her first menstrual period instead of a traumatic injury.
their children.\textsuperscript{82} Despite the unspeakability of sexual violence through its constant denial, it nevertheless began to take a palpable shape through the externalization of emotion enabled through hysterics, and the public circulation of these images. The ‘health concern’ over hysteria enabled the privatized nature of sexual violence to begin to move into the public. This recalls Ahmed’s discussion of the “wandering womb” of hysteria, “that in leaving its place allows the woman to lose her place.”\textsuperscript{83} In this re-conception of the Ancient Greek view on hysteria Ahmed understands the disturbances caused by the wandering womb to become a productive site of contestation, for women to lose their place within a kinship economy that demands both their silence in matters of sexual violence and their sworn allegiance to the reproductive economy of the family.\textsuperscript{84} This re-thinking of archaic descriptions of hysteria opens up a new language to talk about the body and its internal and external processes of endurance. In Elizabeth A. Wilson’s \textit{Psychosomatic: Feminism and the Neurological Body} she also uses the wandering womb of hysteria as a way to open up discussions about the potentialities within corporeal systems:

The notion of a roaming uterus contains within it a sense of organic matter that disseminates, strays, and deviates from its proper place. \textit{Perhaps all biology wanders}. Formulated this way, hysterical diversion is not forced on the throat, legs, or eyes from the outside, it is already part of the natural repertoire of biological matter. A more sustained focus on the biology of hysteria would allow us to see that the proclivity to conversion (diversion, perversion) is native to biochemical, physiological, and nervous systems.

\textsuperscript{83} Ahmed, \textit{Willful Subjects}, 118.
Wilson utilizes the language and gestures of hysteria to allow “the reader to receive in biology a complexity usually attributed to nonbiological domains.” Wilson reads hysteria as a part of a “the natural repertoire” of biological matter, an ability already inherent in bodies, just waiting to be needed. One of Wilson’s examples of the extraordinary ability of the hysterical body is of course, Louise Augustine Gleizes. Wilson discusses a hysterical ability that Gleizes developed during her time at the Salpêtrière, a capacity to see in black-and-white. She asks, “Why is the astonishment of Augustine’s symptom attributed only to Charcot and not also to the remarkable, hysterical, vicissitudes of Augustine’s eyes and brain?”

When I first read the sentence above, I felt my body crackle with attention, my knuckles cracking with connection. Gleizes’s hysteria was being evoked as remarkable, almost extraordinary, the intonation of her hysterical attributes unquestionably positive. When I bring my astonishment to bear on this aspect of Gleizes’s hysteria, it seems quite easy to connect this ‘symptom’ to her seduction of the camera in the images featured in the *Iconographie*. Determined to be featured in these photographs, it seems likely that Gleizes’s could have spent copious amounts of time thinking about them, composing them in her head, and begin to try to see the world as the camera did. Thinking about the hysterical manifestation of black and white vision as a corporeal adaptation to the constant presence of photography and (with its particular lighting, chemicals, etc.) aligns itself with an understanding of hysteria as that which pushes and pulls the body into new figurations, revealing new capacities, abilities, and resources. Hysterical bodies, like Gleizes’s open up ways to unhinge the body from a concrete set of actions that define it

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86 Ibid., 6.
towards an open-ended system of infinite possibilities. When hysteria wanders (quite willfully) outside the family it presents a diverse array of corporalities for experiencing the world.

![Figure 5: Louise Augustine Gleizes during a hysterical fit.](image)

The performances of Gleizes’s and her peers developed a visual vernacular of the body that could not be altered by the theories of pathology and deviancy developed to contain them. As you progress through Gleizes images in the *Iconographie*, more and more of them appear to show her smiling, as if she is pleased with herself, with the images, with the fame she is already accumulating. One of these images shows her consumed in “passion” her head and eyes tilted upward outside of the frame, her arms thrown up in the air and her dress hanging off her shoulder. The upward motion of her arm keeps the gown in place, protecting her body from the gaze of the technicians and viewer. Her body is closed in on itself, sitting on her folded right leg, her left bent at the
knee producing a patch of darkness underneath her upper thigh. The shadow between Gleizes’s legs is only matched in tone with the darkness surrounding her. What we cannot see, the darkness she creates, she yields to present the limits of both knowing and visualizing her body.

Within her vigilantly constructed self-portraits, Louise Augustine Gleizes crafted a legacy as a visible survivor of sexual violence. Her photographs, to this day, remain a visual testimony of her experiences of sexual violence and its affects. While her performances vanished the second they ended, her photographs act as documentation, capturing the ephemeral moment as it slipped away. The act of documentation prolongs the temporality of the event, allowing us to see a version of Gleizes over a century later. As we view these photographs, we become witnesses to her pain and participants in her performances. The viewer of performative photographs becomes a co-collaborator as they read it and imbue it with meaning, as I have done above. Based in her interpretation of Lacanian thought, Marianne Hirsch describes the power photography has on those who witness it: “Interpolated by the photograph, its viewers become part of the network of looks exchanged within the image and beyond. The viewer both participates in and observes the photograph’s inscription in the gaze and the look that structures it.”

When we view the images of Gleizes, we meet her gaze, continuing her project of visibility. We recognize in Gleizes the feeling of discomfort, fear, anger, terror, anticipation, power and maybe even joy. These images of Gleizes “… can communicate an emotional or bodily experience by evoking the viewer’s own emotional and bodily memories. They produce affect in the viewer, speaking from the body’s sensations, rather than speaking of or

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Since bodies are the scenes of sexual violence, they function in Ann Cvetkovich’s terms as an archive of trauma, recording stress, fright, rage, tension, and control. Gleizes’s paralyzed arm is indicative of such forms of corporeal memory. The physicality of sexual violence is recorded in the body as it resists and endures it. Under attack, Gleizes’s arm could be used as a weapon she could strengthen by stiffening her muscles. This response became engrained within Gleizes’s body, etched in through every experience of corporeal fear. In viewing this manifestation of Gleizes’s hysterical memory, survivors of sexual violence can feel their own stiffness, where their bodies have grown tense under the stress of their memories. The recognition of another’s experience of violence however, can also cause a sense of relief. Finding images of survivorship has the potential to counter feelings of isolation pervasive to experiences of sexual violence. The viscera of Gleizes’s histrionics has the potential to invoke the corporeal memories of viewers, especially those who have endured experiences of sexual violence. This produces a form of legibility and perception for the incoherency of traumatic memory, creating a genealogy of sexual violence through the inheritance of the hysterical body.

These memories of sexual violence seem to exist within the realm of what is deemed hysterical; they can occur erratically seemingly through a will of their own, they produce corporeal affects that seem over-the-top, exaggerated, and extreme, and have the potential to stretch, twist, and transform the body through the physicality of emotion. This excess embedded within the memory of sexual violence finds a reserve within the gestures of hysteria. The corporality of hysterical memory enables the effects of trauma to become perceptible and conspicuous, unwilling to be denied. The visibility of the

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hysterical body—where it doesn’t fit within the hegemony of the normal has created space for the visibility of those who have experienced sexual violence. Mechanisms of control are used defiantly to craft images that exist beyond representations of pathology and deviancy. To craft something is an activity that requires a special skill, a nonverbal sense, a “practical intelligence, something generally attributed to classes, genders, races, and ages hegemonically deemed ‘inferior’.”

Gleizes’s craftiness, cultivated through her experiences of violence helped her develop an ability to see both within her situation and beyond it, to develop a will that would enable her to remove herself from violence. To constantly deny the powerlessness imposed by the ideology of the victimized body becomes an artillery of subjectivity. Gleizes’s careful self-representations built around and through her memories offer a counterpoint to the helpless body frequently evoked in depictions of sexual violence, and tidy understandings of survivors that disavow any negative feelings. In crafting images of herself, she refuses to be unseen and unheard. Originating from and through the hysterical body, Gleizes’s representational inheritances have the potential to enact forms of corporeal recognition in the present.

While sexual violence does not occur in a vacuum, its existence, like in Gleizes’s case, is rarely validated. People who experience sexual violence are frequently not believed and thus forced to create their own forms of authenticating what has occurred. Finding other survivors of sexual violence is one way in which this can be accomplished. The acknowledgement of sexual violence within someone else’s story creates the possibility to see the same effects within oneself. In the text, *Feeling Backwards: Loss and the Politics of Queer History*, Heather Love describes the “trauma of queer

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89 Burstow and LeFrançois, impassioned praxis: an introduction to theorizing resistance to psychiatry to *Psychiatry Disrupted*, 14.
90 Herman, *Trauma and Recovery*, 8.
spectatorship—most often articulated as an isolated and uninformed viewing of negative images of homosexuality.”91 This kind of traumatic spectatorship resembles the onslaught of images depicting sexual violence pervasive in today’s media that both glorify sexual violence and perpetuate imaginings of people who experience sexual violence as defiled, contaminated, and doomed victims. The repetition of these negative representations of sexual violence communicate its aftermath solely through experiences of shame, disgrace, and destruction similar to the damaging illustrations described by Love. The performance and documentation of histrionics can be utilized as a mechanism both to resist these depictions of experiencing sexual violence, and create room to recognize the wide range of possible results.

The dislocating effects of sexual violence become re-embodied witnessing Gleizes’s performances of hysterics. The heightened and exaggerated emotions she displays provides a basis of affinity for those who recognize themselves in her portraits. This apprehension provides new ways of seeing, relating, and connecting to others based off the acknowledgment of similar experiences. To match in this way, to feel the clench of your fist when viewing the image of Gleizes’s paralyzed arm, turns this corporeal memory of self-defense into a gesture of intimacy and attachment. Recognizing the aftermath of sexual trauma in Gleizes self-portraits helps uncover the concealed lineage of survivors throughout history. Their record of resilience attests to the extraordinary ability of the body to overcome violence and devise corporeal strategies to resist victimization. Seeing images of powerful survivorship counter mainstream portrayals of sexual violence that promote notions of innocence, purity, and irrevocable damage. To

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read sexual violence in Gleizes’s images is to regenerate the initial power of her performances. As she fights against diminishment amidst the white mass of sheets, and meets the gaze of viewers, the power of survivors becomes re-inscribed.

The privatized nature of sexual violence becomes communal when people who endure violence bear witness to another’s memories. The stigma attached to sexual violence pervades its media representation, relegating experiences of sexual violence solely through feelings of shame and disgrace. Gleizes’s lasting image ruptures this notion of fragility and dishonor. Her bold exclamations of survivor-hood become a modality of escape from those who sought to control her, use her sexuality, or force her into a model of feminine respectability. Gleizes’s power, control, and ability to overcome contrasts representations of helpless victims that re-envision what is possible from experiencing sexual violence, and the potentialities embedded within resilience.

WHAT SURVIVES: QUEERNESS AS ESCAPE

As hysterical diagnoses became the means to extinguish the complaints of women, and a proven means of obscuring allegations of sexual violence, the hysterical women was seen as the ultimate ruse, a problem of malingering and fantasy. Hysterics became the problem to be cured, not the conditions that brought upon the histrionics. The language of hysteria thus took on two divergent but constitutive paths, the pathologizing language of diagnosis, and the corporeal epistemology of survival, the willfulness of the hysteric. Once hysteria was no longer a useful tool for communication, hysterics had to utilize their hysterical embodiment to create new lives away from the psychiatric and disciplinary control.92 I believe that hysteria enabled the cultivation of skills, confidence,  

92 Other famous hysterics, like Anna O (Bertha Pappenheim) also went on to create new worlds outside of diagnosis. Pappenheim became a well-known feminist, translating Mary Wollstonecraft’s *The Vindication of the Rights of Women* (See Herman, *Trauma and Recovery*, 19).
and command that enabled hysterics to find ways to live outside of patriarchal power and control. During her first attempt at escape, Gleizes’ managed to pull off the bars on her window, exemplifying the power of the hysterical will. Gleizes’s careful cultivation of histrionics developed her methods to control and feel power, the redistribution of which carved enough space her to for her in the world to craft an entirely new figure of embodiment. Her meticulous display of histrionics, allowed her to distort, manipulate and reconfigure her feminine excess into a male avatar suitable to escape the disciplinary gaze of the Salpêtrière. This detail of her biography appears as a footnote in the Iconographie, simply stating “Today Augustine ran away as a man.” The culmination of Gleizes performances of hysteria generated “… not only a particular perspective or way of seeing, but also a specific world or way of being in it.” By crafting herself an entirely new life through a recreation of her gender, Gleizes created a new realm for herself by removing herself from medical and disciplinary surveillance. Her disappearance from the archive marks the queer potentialities within hysteria. The moment of Gleizes’s evanescence from the archive is marked by her ghost, whose female masculinity becomes the culmination of power she imbued herself with through her hysterical performances. The queerness embodied within hysteria is envisioned as utopic possibility in Gleizes’s gender play. Female masculinity created an opening to a

93 Hustvedt, Medical Muses, 207.
95 Hustvedt, Medical Muses, 208.
new world in which Gleizes’s vanishes. In the development of her personal histrionics, the demands placed on femininity were destroyed, allowing that which lay under the imposed docility to emerge. The rage, anger, and pain of repeated victimization became the trigger necessary to lay claim to power (male in the sense that it was thought only men could have power of this sort) and privilege, which she than harnessed to create a new life outside the gaze of medical surveillance.

No image of Gleizes’s exists from her escape, becoming a spectral event in the genealogy of hysteria. By a strategic deployment of masculinity, Gleizes’s was able to open up avenues of economic and emotional survival. In utilizing masculinity, Gleizes’s would have been able to increase the amount of jobs available to her and the amount of money she would be paid, regardless of the work. Masculinity could provide a form of protection in travel, enabling her freedom of movement. This increase of livelihood strategies also opened up the possibility for Gleizes to engage in relationships not based in economic factors, giving her the power to choose and create her own forms of kinship. An embodiment of masculinity offered modalities for different life choices than those open to Gleizes in the Salpêtrière, where being cured of hysteria would have entailed a return to her family and a commitment matrimony, motherhood and feminine respectability.

While there is little information about Gleizes’s life after her escape it is known that she resided with someone who she had met at the Salpêtrière. The case history in the Iconographie, does not gender this person, which comes as shock considering how sexual deviance was seen as a hysterical trait. Before her escape, Gleizes’s tells her doctors about this person, referring to them only with a letter. While Gleizes’s doctors read this

as an immature sign of mirroring them (as they refer to her by a letter), it seems possible this way of naming was chosen by Gleizes’s for its gender ambiguity. At the very least, it opens up the possibility that Gleizes’s chose to create a life for herself with another hysterical patient from the Salpêtrière.

Louise Augustine Gleizes’s escape from the Salpêtrière articulates a queer lineage of survivorship and resilience. The performativity of Gleizes’s escape symbolizes the queer potentiality for gender to enact new lives and new selves. Gleizes’s hysterical performances enabled her to undo a hierarchical understanding of gender that placed femininity as masculinities aberrant other, producing forms of queer gender. Gleizes’s female masculinity engages a modality of butch aesthetics that cultivates masculinity in relation to, in respect of, and in collaboration with the excesses of queer femininity. Gleizes’s disappearance marks the shift towards the end of hysteria as a modality of communication to the male medical world. Her recorded performances of hysteria nevertheless created a visual epistemology of sexual violence, and the beginnings of new languages of embodiment. The violence summoned by Gleizes is the irresolution at the core of sexual trauma. Within the transfiguration of violence lies the potentiality within enduring, when the the corporeal effects of trauma become strategies for resisting narratives of victimhood and finding strength from what it took to survive, the new ways of seeing, being, and relating that this entails. The following chapter continues to build on these methodologies of resistance through a reading of Ida Bauer, and the means by which she created her own tactical escape.
Chapter Two: Ida Bauer, A Fragment of Analysis of a Case of Queer Hysteria

Ida Bauer, persistently known as Dora, may be the most notorious of the Victorian hysterics. Ida Bauer began her analysis with Sigmund Freud four years after his contentious claim that the cause of hysteria was childhood memories of sexual violence. Freud’s case study of Bauer is thus littered with the trails he created to twist the reality of sexual violence into the fantasy of seduction, which he set ablaze with his theory of the sexual stages of children. Beginning in October 1900, Bauer terminated the treatment after just three months. While Freud wrote up her case in the two weeks following the end of her treatment, Dora: A Fragment of Analysis of a Case of Hysteria would not be published until five years later in 1905. The book is hailed as one of the founding texts of psychoanalysis, Freudian interpretation of dreams, and the development of the theory of infantile sexuality. While much of the interpretative work done on Dora occurred after the reveal of her identity as Ida Bauer, she remains, steadfastly, as Dora. Much of this has to do with the fact that Bauer’s presence in the archive is mediated by Freud’s text and his rendition of her story. The character of Dora and her dreams of jewel boxes and fire subsumes the waking life of the person beneath the mystique. While feminists theorizing on Bauer’s case are quick to underscore her implication in the sexual transactions of her father, they leave the analysis of these embodied experiences of sexual


101 While Freud first submitted Dora immediately after writing her word, he withdrew the publication only to re-submit it four years later. Jacqueline Rose, in “Dora: A Fragment of Analysis” marks this hesitation by the transitional stage of Dora as between the Freudian understanding of the unconscious developed in The Interpretation of Dreams and the Freudian theory of sexuality developed in Three Essays.

102 Patrick Mahoney in Freud’s Dora describes Dora (the text) as being bounded by Freud’s The Interpretation of Dreams (1900) and Three Essays on the Theory of Sexuality (1905).

103 The exception seems to be Maria Ramas’s “Freud’s Dora, Dora’s Hysteria”, which despite its title uses the name Ida Bauer throughout.
violence to create psychoanalytic accounts of Bauer’s symptoms in relation to the symbolic realm of exchange. This chapter builds upon this feminist work on Dora to picture what an analysis of Ida Bauer might look like, positioning what we know of her lived experiences in relation to Freud’s interpretation of her, in hopes of finding Ida within Dora.104

Beyond the small amount of biographical information culled around Ida Bauer, her presence in the archive of hysteria is mainly relegated to the seventy hours she spent in therapy with Freud.105 In order to find Bauer within Freud’s text one has to read Dora with what I am calling a hysterical reading practice; with an over-identification towards the person behind the pseudonym, a gut feeling of connection, and an unruly appetite to make Freud a side character in Bauer’s story. Following my readings of the theatrical performances of the Salpêtrière, this entails a sustained focus on Bauer’s hysterical symptoms, and a reading of these as an embodied form of knowledge regarding sexual violence and coercion. Bauer was diagnosed with what Freud called ‘petite hysterie’, a form of hysteria with less theatrical and excessive gestures.106 These less extreme symptoms were considered “boring” alongside the grander gestures of hysteria found within psychiatric photography and the cultural representations it inspired. I understand the minutia of Bauer’s hysteria to be a reaction towards the particular types of sexual violence she faced. Unlike Louise Augustine Gleizes (discussed in the first chapter) whose experiences of sexual violence consisted of sexually aggressive physical attacks,

104 Hannah S. Deckler’s Freud, Dora, and Vienna 1900 (Free Press, 1991) is one of the most influential texts in this regard, as embeds biography of Dora’s case in the social, cultural, and political climate of Vienna, where the analysis took place.
Bauer’s experiences of sexual violence were more bound up in intimidation and manipulation, the relationship between her father, and his mistress and her husband.

Bauer’s symptoms included dysponoea (shortness of breath), tussis (violent/nervous coughs), nervosa, aphonia (loss of ability to speak), depression, and hysterical unsociability. I read these symptoms hysterically with a dramatically different view from Freud of what these gestures could have been used for. While Freud wrote *Dora* in a move to distance himself from Ida Bauer (a familiarity I will discuss later), my analysis comes from a desire to bring Bauer closer, to build on the intimate forms of connection I already feel towards her. I return the gestures within *Dora* to what is generally seen as the bare bones of her story considering the ways in which her hysterical symptoms were developed as survival mechanisms towards the specific threats of sexual violence in her life. Ida Bauer cannot be read as a passive victim of Freud’s theorizations on her as she eventually agreed to his treatment two years after she initially refused it. In this way, she can be seen like Louise Augustine Gleizes’s, actively seeking tools of visibility to craft a lasting version of herself, a story that would be circulated beyond the confines of her family. I read Bauer’s hysteria as a form of willfulness that enabled her to escape the grips of Freud’s disciplinary and diagnostic fascination with her. The willfulness of Ida Bauer, and the potentiality within this willfulness for creation could not be more evident in the number of artists and writers who have not been able to let *Dora* (and Ida) go.

The excessive physicality of hysteria found in the performances of Louise Augustine Gleizes created a sustained spotlight and focus on the hysterical body that

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magnified the less severe symptoms of cases like Bauer’s. The threat of sexual violence hovers in the stories of Gleizes’s and Bauer, despite the different cultural and class backgrounds of the protagonists. The ways in which Bauer and Gleizes’s both fell outside the confines of “respectable” sexuality reflects the ways in which the trans-historical phenomenon of hysteria chronicles a history of queerness. Those diagnosed as hysterical, like Gleizes and Bauer, were often unwilling to participate in the heterosexual economy forced upon them. A hysterics true cure could only be evidenced by her willingness to fulfill normative ideals of matrimony and motherhood, a return to the insular nuclear family. The diagnosis of hysteria thus became a means both to name those who had stepped out of their place, and a modality for those diagnosed to do just that. The psychiatric literature surrounding both Gleizes and Bauer enabled their escape from the family, as information about them became a matter of communal knowledge through the circulation of this literature into the public domain. As various figures take up their stories, and build off each other’s interpretations, the lineages of Bauer and Gleizes create hysterical genealogies. This existence outside of normative kinship, where stories are carried on by those outside the family, positions hysteria within a lineage of queer embodiment and knowledge production. After discussing the background to Bauer’s story, I will present a reading of her symptoms that underscores the way in which they transmit embodied knowledges regarding sexual violence. The plurality of different types and forms of knowledge that hysteria conveys opens up to an analysis of Ida Bauer as a queer figure, and hysteria as a modality of queer expression. Ida Bauer, like Louise Augustine Gleizes’s exists within fragments, slivers, and pieces in the archive of hysteria. I follow the splinters lodged under the skin of the text by Bauer to look for the potentialities in the new growth that occurs over it.
Ida Bauer began treatment with Freud at the age of eighteen at the bequest of her father, who wished Freud to dissuade her of the notion that he was having an affair with the wife of a family friend. The details of this affair, and how it played out among family members was clearly stimulating to Freud in relation to his interest on developmental theories of sexuality, the unconscious, and desire. The background of Bauer’s case mainly exists within the section of the text entitled ‘The Clinical Picture’, where sexual violence becomes not what is disavowed, but that which is turned back onto Bauer to ‘discover’ the causes of her hysteria. Freud plots out the characters in Bauer’s family drama as follows: Bauer’s father, Philip, has been having a prolonged (and as Freud notes quite obvious) affair with a married woman, Peppina Zellenka (known as Frau K in Dora). Ida describes to Freud two scenes in which Peppina’s husband, Hans Zellenka (known as Herr K) tried to sexually assault her, once at the age of fourteen at his place of business and once at sixteen when the two families were vacationing at a lake house. Bauer had become convinced that Hans Zellenka’s behavior towards her was some kind of retribution for her father’s affair. While Bauer had been quite vocal about the second attack, bringing it to the attention of both her parents and Hans Zellenka, she was dismissed by all involved. As Freud actually appears to listen to Bauer’s complaints, she is able to tell him about the first attack, which she had kept secret for years. Bauer was thus able to use Freud’s desire to uncover the origins of her hysteria in her favor to put words to a story she had never been able to tell before.

Freud accepted that Bauer was being used as an object of exchange between the two men, giving her the pseudonym “Dora” which means present in Greek. The ‘present’ that is Ida/Dora has been commonly theorized by feminists utilizing Gayle Rubin’s analysis of the “traffic in women” in relation to the transactions between her father and
Hans Zellenka. In turning this reading toward Freud, how can we understand the ways he exchanged Ida Bauer for Dora? In naming Bauer Dora, was Freud somehow acknowledging the gift her story was to him, the way he would turn her family history into a playground for his theoretical work? The following reading intends to return to the corporeal reality of Ida Bauer, relegating Freud’s theoretical dreamscape of her to the background. I return to the events in Bauer’s life that Freud treats as focal points of trauma, which he understands in relation to Bauer’s pathology. Instead, I present these experiences of Bauer’s as ordinary events relative to the sustained attention and fear that accompanied all her interactions with Hans Zellenka. In understanding these experiences of sexual violence as moments on a continua of Bauer’s encounters with Zellenka, they become occasions for elucidating the ways in which people learn and adapt to sexually violent circumstances.

**FEELING QUEERLY HYSТЕРИЧАЛЬНО**

Ida Bauer began treatment with Freud at the age of eighteen at the bequest of her father, who wished Freud to dissuade her of the notion that he was having an affair with the wife of a family friend. The details of this affair, and how it played out among family members was clearly stimulating to Freud in relation to his interest on developmental theories of sexuality, the unconscious, and desire. The background of Bauer’s case mainly exists within the section of the text entitled ‘The Clinical Picture’, where sexual

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110 It is also noted by many that the name Dora was also the name of a servant during Freud’s childhood. This servant, whose name was Rosa, was forced to change her name to Dora to be employed in the household, as Freud’s sister was also named Dora.

111 Freud’s analysis of Bauer focuses on her dreams, the thus moves the details of her daily life and embodied reality to the margins of her story. Jeffrey Masson’s *The Assault on Truth: Freud’s Suppression of the Seduction Theory* argues that this move from external event to internal fantasy was a defensive reaction of Freud’s in correlation to the disapproval he received for positing the relation between hysteria and child sexual abuse.
violence becomes not what is disavowed, but that which is turned back onto Bauer to 'discover' the causes of her hysteria. Freud plots out the characters in Bauer’s family drama as follows: Bauer’s father, Philip, has been having a prolonged (and as Freud notes quite obvious) affair with a married woman, Peppina Zellenka (known as Frau K in Dora). Ida describes to Freud two scenes in which Peppina’s husband, Hans Zellenka (known as Herr K) tried to sexually assault her, once at the age of fourteen at his place of business and once at sixteen when the two families were vacationing at a lake house. Bauer had become convinced that Hans Zellenka’s behavior towards her was some kind of retribution for her father’s affair. While Bauer had been quite vocal about the second attack, bringing it to the attention of both her parents and Hans Zellenka, she was dismissed by all involved. As Freud actually appears to listen to Bauer’s complaints, she is able to tell him about the first attack, which she had kept secret for years. Bauer was thus able to use Freud’s desire to uncover the origins of her hysteria in her favor to put words to a story she had never been able to tell before.

Freud accepted that Bauer was being used as an object of exchange between the two men, giving her the pseudonym “Dora” which means present in Greek. The ‘present’ that is Ida/Dora has been commonly theorized by feminists utilizing Gayle Rubin’s analysis of the “traffic in women” in relation to the transactions between her father and Hans Zellenka.112 In turning this reading toward Freud, how can we understand the ways he exchanged Ida Bauer for Dora? In naming Bauer Dora, was Freud somehow acknowledging the gift her story was to him, the way he would turn her family history

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into a playground for his theoretical work? The following reading intends to return to the corporeal reality of Ida Bauer, relegating Freud’s theoretical dreamscape of her to the background. I return to the events in Bauer’s life that Freud treats as focal points of trauma, which he understands in relation to Bauer’s pathology. Instead, I present these experiences of Bauer’s as ordinary events relative to the sustained attention and fear that accompanied all her interactions with Hans Zellenka. In understanding these experiences of sexual violence as moments on a continua of Bauer’s encounters with Zellenka, they become occasions for elucidating the ways in which people learn and adapt to sexually violent circumstances.

While Freud seems to believe Bauer’s descriptions of the incidents with Zellenka, he utilizes her reactions to these experiences against Bauer in theorizing the causes of her hysteria. Freud deduces that, “I should without question consider a person hysterical in whom an occasion for sexual excitement elicited feelings that were preponderantly or exclusively unpleasurable.” His footnote on the page suggests that Bauer had no reason for not responding to the older man’s advances since, “…he was still quite young and of prepossessing appearance.” Bauer’s hysterical behavior in Freud’s eyes stemmed from her rejection of Zellenka’s advances, which in enacting a dismissal of heterosexuality, becomes hysterical.

113 It is also noted by many that the name Dora was also the name of a servant during Freud’s childhood. This servant, whose name was Rosa, was forced to change her name to Dora to be employed in the household, as Freud’s sister was also named Dora.

114 Freud’s analysis of Bauer focuses on her dreams, the thus moves the details of her daily life and embodied reality to the margins of her story. Jeffrey Masson’s The Assault on Truth: Freud’s Suppression of the Seduction Theory argues that this move from external event to internal fantasy was a defensive reaction of Freud’s in correlation to the disapproval he received for positing the relation between hysteria and child sexual abuse.

115 Freud and Rieff, Dora: An Analysis, 44.
As Freud describes the situation of the attempted kiss, he cannot grasp the ways in which Bauer has experienced it as unwanted. He writes, “This was surely just the situation to call up a distinct feeling of sexual excitement in a girl of fourteen who had never before been approached.” Thus while Freud describes the scene with Zellenka as “even better calculated to act as a sexual trauma” he positions Bauer’s reaction to it as as her own failure to comply with the normative timetable of heterosexuality. Freud continues to insist on Bauer’s desire for Hans Zellenka, despite her protestation. Heterosexuality in this sense becomes compulsory as even the age and power difference between Bauer and Zellenka cannot account for Bauer’s disapproval in Freud’s eyes.

In trying to cure Bauer’s hysteria, Freud tries to lead her towards accepting Zellenka’s advances. While feminists have long criticized Freud’s move to push his patient towards the middle-aged man who was trying to assault her, I would like to consider how this move of Freud’s would have ‘cured’ Bauer’s hysteria through her reclosure within the family. Freud, in essence, wanted what Philip Bauer wanted out of the analysis, Ida’s complacency as an object of exchange. Freud’s insistence on this matter is what caused Bauer to terminate her treatment and for her case to be considered a flop. Despite his failure, Freud seemed to be determined to make something of Bauer’s case, and through his analysis moves the embodied violence in her life to the theoretical realms of the unconscious and fantasy. Freud theorizes that the source of Bauer’s dissatisfaction in the circumstances of the affair stems not from the ways in which she was being used by the by both men (her father and Hans Zellenka) but from her dissatisfaction as a scorned lover. Freud is quite confident in this assertion stating:

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I believe, therefore, that I am not mistaken in supposing that Dora’s supervalent train of thought, which was concerned with her father’s relations with Frau K., was designed not only for the purpose of suppressing her love for Herr K., which had once been conscious, but also to conceal her love for Frau K., which was in a deeper sense unconscious.\textsuperscript{117}

Even though Bauer tells Freud of her relationship with Peppina (more on this later), and to visibly dislike Zellenka (whose attentions included sending her flowers every day for a year, seem quite obsessive), Freud’s analysis seem to turn theoretical cartwheels to force Bauer into heterosexist boxes of desire.\textsuperscript{118} Freud thus sees Bauer’s appalled reactions to Zellenka not as a logical response towards unwanted and non-consensual sexual experience, but her unconscious process of suppressing her “love” for him. In “Queer Dora: Hysteria, Sexual Politics, and Lacan’s “Intervention on Transference”, Heather Findley reformulates Freud’s notion of Bauer’s case as a failure.\textsuperscript{119} She writes “Freud fails…not because he gives Dora’s desire the wrong object (heterosexual rather than homosexual) but because he gives her an end to her desire- he fails to pose her desire as a question.”\textsuperscript{120} I agree with Findley that Freud utilizes Bauer’s desire through her case as a sort of predetermined key to unlock the doors he wishes to open. Indeed Freud had written in a letter in early October that, “the case has opened smoothly to my collection of picklocks.”\textsuperscript{121} While Findley’s discussion of Dora’s queerness focuses on Dora’s femme in a reading of Lacan through a lesbian-feminist framework, I hysterically read Bauer’s gender within the same open-ended queer structure that Findley advocates for her desire. Similar to the histrionics of Gleizes

\textsuperscript{117} Freud and Rieff, \textit{Dora: An Analysis}, 80.
\textsuperscript{118} This behavior would probably classify as “stalking” today.
\textsuperscript{120} Findley, "Queer Dora," 331.
\textsuperscript{121} Marcus, "Freud and Dora," in \textit{In Dora’s}, 61.
discussed in the first chapter, I would like to consider the possibility that Bauer’s hysteric opened up similar avenues of multiple and complexly gendered embodiments.

Through her repeated performances of hysteria, Bauer was able to develop methodologies of control over her own life. Her insistence on the violence invoked by Zellenka’s attacks and her successful resistance to his continuing assaults enacted a form of power and authority generally associated and embodied within masculinity. In Freud’s analysis of Bauer, these agentic intentions and non-compliance become an expression of what he can only read as masculine power, which he translates as her desire for Peppina. Unfortunately, what we know about the relationship between Ida Bauer and Peppina Zellenka we must hear from others, as neither of them appear to have left written evidence describing their friendship. When Freud inquires about their relationship he finds that, “the young woman and the scarcely grown girl had lived for years on a footing of the closest intimacy. When Dora stayed with the K.’s she used to share a bedroom with Frau K., and the husband used to be quartered elsewhere. She had been the wife’s confidante and adviser in all the difficulties of her married life.” (79) Within this description of their relationship, I cannot help but feel pangs of hidden queer recognition. The ambiguity within this perception opens up the speculation of a variety of forms the connection between Bauer and Peppina could have taken (much like the ambiguity within Gleizes’s choice to name her partner with a letter). I do not intend for this potentiality to consist of an insistence on a sexual relationship between the two, yet I also do not wish to foreclose this possibility. Reading the relationship between Bauer and Peppina queerly recognizes the many intimate forms that friendship can take, possibly expanding understandings of the romance and sexuality within friendships. *(The world-making and

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122 It is less my understanding that this material never existed than that it was hidden or otherwise destroyed, like the fate of may historical queer materials.
expanding potentiality of such friendships will be discussed later in the final section of this chapter in relation to the indurative nature of the friendship between Ida Bauer and Peppina Zellenka. When Ida Bauer becomes Dora, the complexity of these relationships with her parents and the Zellenka’s gets flattened. They become what Freud needs them to be, despite Bauer’s reality. The story he writes, however twisted it may be, has strands of her in it. Ida Bauer remains in these twirled fragments, waiting for us to find her behind commas and at the end of sentences, in the relationships she forged and the memories she shared with Freud.

**The Vortex of Hysteria**

Feminists have long debated the efficiency of Bauer’s hysterical revolt, exemplified in the debate between Hélène Cixous and Catherine Clément. Even Cixous, who argues for Bauer’s contestation, nevertheless characterizes her revolt as silent. The ability of Bauer to get Zellenka to admit to his assaults on her suggests silence might not be the most accurate characterization of her histrionics. Not only did Bauer not stay silent during Freud’s treatment, refusing to let herself get subsumed under his assertions, she was not reticent with her family, as she accused her father of condoning/encouraging Hans Zellenka’s behavior. While mainly nonverbal, Bauer’s hysterical protests should not be read as non-communicative. Her symptoms exist in the embodied repertoire of hysteria; the movements, gestures, sounds, and intonations of the body in response to violence. Bauer’s histrionics enact both transformations in her life and present a manifestation of her knowledge regarding sexual violence. While feminists have often discussed Bauer’s symptoms as a type of unnamable reaction to an all-consuming patriarchy, I would like to shift the focus from the symbolism of the symptoms to the
realities they may have presented as gestures, what physical and material effects they may have had on Bauer’s everyday life.

From an early age Bauer had role models for the purposes hysterical illness could be put towards. Freud claimed Bauer’s mother had a form of “housewife’s psychosis”, which consisted of a fervor for household cleanliness. Peppina Zellenka as well was also diagnosed with “nervous disorders”, and spent a period of time in a sanatorium. As Patrick J. Mahoney notes on the women in *Dora*, “the otherwise disparate wives resembled each other in their strategic relapses into illness as a way of avoiding sex with their husbands. Peppina in particular grew healthy when Hans was away on business trips but, more often than chance would have it, become ill on his return.” These fluctuations of health appear to have been consciously noted by Bauer as Freud tells us that, “Dora realized that the presence of the husband had the effect of making his wife ill, and that she was glad to be ill so as to be able to escape the conjugal duties which she so much detested….Dora suddenly brought in an allusion to her own alternations between good and bad health…” Bauer was thus clearly conscious of the ways in which both her mother and Peppina used illness as a way to escape heterosexual labor. In performing illness Bauer watched both women continuously elude the conjugal duties of the marriage bed, a skill she seems to have picked up on and adapted to her own circumstances. Hysteria was thus used as an unspoken mode of transmission used to model defensive corporeal responses towards heterosexual labor.

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124 Patrick Mahony, *Freud’s Dora: A Psychoanalytic, Historical, and Textual Study* (New Haven: Yale University), 9.
When we think back to Bauer’s symptoms with this in mind her ‘violent/nervous
coughs’ begin to take shape as an embodied reaction against Hans Zellenka and the
sexual violence he tried to levy against her. The first incident with Zellenka, an attempted
kiss, Bauer immediately responded to with disgust. Unable to do anything with her
situation (or so she thought), Bauer had told no one of this incident until Freud. While
Bauer did not instantly communicate her experience in language, she did absorb and react
to the incident immediately, evident in her narrated memories of disgust. The
development of Bauer’s symptoms following these experiences presents hysteria as a
framework for understanding and responding to sexual violence instantly, destroying the
notion that trauma can only be understood belatedly. In learning to protect herself from
Hans Zellenka, Bauer dips into the hysterical knowledge of her mother and Peppina to
adapt corporeal forms of protection. I view Bauer’s violent coughing as a trace of this
initial attack by Hans, a violent cough to refract a violent kiss. It’s easy to envision this
kind of hacking cough as disgusting to the germ-conscious Victorian ‘gentlemen’, afraid
of the pathogens and bacteria that get expelled through the mouth.\textsuperscript{126} This image of
Bauer’s violent cough recalls the screaming image of Gleizes discussed in the first
chapter, where the mouth, throat, and lungs become part of a repertoire utilized to
respond to sexual violence. Can violent coughing be understood as part of the body’s
natural repertoire of defense, as a mechanism to keep one’s bodily threshold safe from
invasion? The common description of the hysterical cough (it was a very frequent
symptom of hysteria) was typically described in medical manuals as “a harsh, loud,
monotonous bleat or bark, with a hollow, metallic quality, repeated in the same key for

\textsuperscript{126} Anne McClintock’s \textit{Imperial Leather: Race, Gender and Sexuality in the Colonial Context} explores the
importance of hygiene, germs, and cleanliness to the Victorian imaginary and its uses in creating raced and
gendered others.
hours during the day without any expectoration.” Could the harsh, repetitious nature of this cough have been a way of both enacting a bodily distance from others and a way of constantly reasserting the bodily reality of such an unwanted kiss, of trying to rid oneself of the feeling that such vicious touch leaves on and within the body? While Bauer first exhibited “nervous” asthmatic conditions around the age of six, it is easy to imagine this early cough also functioning to mimic her mother’s repertoire of corporeal defense strategies against unwanted physicality.

When Bauer stressed to Freud the way she still felt the weight of Zellenka’s attack on her body, this feels to me like a preemptive fear of reoccurring advances, the memory of the attack weighing on her as well as the constant threat of being open to Zellenka’s violence. This perpetual tension could have easily (and quite frankly, I feel rationally) have occurred throughout the years Zellenka pursued her. Through her constant and aggressive coughing, Bauer could have been repeatedly ridding herself of the feeling of Zellenka’s touch. When I feel Bauer’s cough, I think of the expulsive forces of this movement, the way it is an action meant to cleanse the body of something that is irritating it. I see Bauer’s cough as trying to cleanse her body of Zellenka. The jolt that the hacking cough brings to the body also shakes into relief the materiality of the body in space, where it is situated, what and who it is touching. The cough in this way can be seen as a repeated attempt to ground her body in the moment, to what and who was around her. The relentless attentions of Hans Zellenka, and the fear of his assaults caused Bauer to develop methodologies for discerning the threat of sexual danger, mechanisms for deflating the risk, and dealing with the aftermath of such a heightened state of anxiety.

127 Decker, Freud, Dora, 11.
In coughing out the contours of what she needed to feel safe, Bauer was able to handle Zellenka’s next assault with more power than before. Following this attack, Bauer was able to both inform her family, and leave the lake vacation where the attempted assault took place. Despite the tremendous willpower Bauer shows in telling her family about the incidence with Zellenka, she was, as we know completely rebuked by all sides, with both families denying any wrongdoing. Bauer remained convinced of both the violence Zellenka had attempted to inflict, and the affair between her father and Peppina that she believed to be the cause of the former man’s violence. She continued to develop her hysterical symptoms such as the loss of the ability to speak. Could such a loss be a sort of willful silencing? An adaption towards a constant suppression, denial, and disregard? A response to her constant coughing? As Bauer’s symptoms developed, and everyone engaged as if nothing had happened, Bauer developed a ‘hysterical unsociability’, migraines, and digestive issues refusing to participate in events between the two families. By crafting her dissent towards her father and Zellenka as illness, Bauer was able to create a more concrete sense of distance between herself and the man attempting to attack her. Her ‘hysterical unsociability’ thus helped her avoid the possibility of being alone with Zellenka. Bauer’s developed resistances then seem much indebted to her mother and Peppina’s performances of illness, with hysteria acting as a modality of pedagogic diffusion used to inculcate resistance to the oppressive physical demands of heterosexuality.

By the time Ida Bauer arrived at Freud’s door two years later, she like Louise Augustine Gleizes arriving at the Salpêtrière, had already adapted herself to the politics of the transactional, knew how to recognize the ebbs and flows of power. Bauer was thus able to easily spot Freud’s move to return her to her place in the patriarchal family through a sexual relationship with Zellenka, and resist it. Her seemingly small acts of
hysteria built up a feeling of power that enabled her to make a bold declaration to terminate her treatment. With this rejection (which Freud viewed as an act of revenge), it doesn’t seem out of place to consider that Freud wrote *Dora* out of a place of rage, trying to quickly rid himself of the taste of Bauer. The years that Bauer spent developing resiliencies against Zellenka seemed to create a hysterical endurance that easily outstripped Freud’s intellectual rigor and enabled her to gain control over the dynamic of their relationship. This refusal of Bauer to acquiesce to Freud, to normalize her emotions through pathology has thus appropriately been dubbed a “battle of wits.”

There is something about Bauer’s story that, like Gleizes’s catches me and takes hold of my body, an un-scratchable itch in my throat. Ida Bauer too has that ability to catch people, forming connections with them across time. Hélène Cixous and Catherine Clément discuss the tension of these relationship with Bauer in a dialogue titled “The Untenable.” The conversation starts with Cixous mystically relating how she “got into the sphere of hysteria because [she] was drawn–called.” Despite the way she suggests how the text *Dora* spoke to her she simultaneously disavows these feelings. Cixous counters this identification with *Dora* declaring next that she “didn’t see myself in it.” (276) Crossing over again, Cixous explains “one never reads except by identification”, not a loss of self, but a becoming, inhabiting, entering. (277) The reading process she describes is a hysterical one, where the reader is taken over by identification with the text and the ways they become a part of it. Cixous describes this sense of altered embodiment created through the identifactory processes in reading through somatic terms. She reads

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129 The transcription of the oral exchange in “The Untenable” is the second section of a chapter titled “Exchange” in their book *The Newly Born Women*, the translation of which was published by Betsy Wing in 1986. My citations come from the version of the essay published in the 1990 edition of *In Dora’s Case: Freud-Hysteria-Feminism*
Dora “in a sort of dizziness exploding over the situation presented,” turning, “round and round”, “caught up in those characters’ same state.” (277, 278) The dizziness of reading Dora, the many paths it presents to understanding and identifying, make it “impossible to have a single, rigid point about it.” (277) Here we can glimpse Cixous’s understanding of the transformative potential in Dora, encapsulated in the fluid nature of the text and the vertiginous array of possibilities it presents. By both repudiating and highlighting her felt associations with Dora, Cixous exposes the danger she feels by the potential contamination of this connection, the way she too may be deemed excessive and illogical under the charge of hysteria.

The power of Bauer in Dora feels intoxicating, gripping, and overabundant making it almost impossible to not read the text hysterically. Cixous describes the overwhelming pleasure she finds within Dora as she “could not keep from laughing from one end to another, because, despite [Bauer’s] powerlessness (and with thanks to) that powerlessness, here is a kid who successfully jams all the little adulterous wheels that are turning around her, and one after the other, they break down.” (279) Cixous finds Bauer’s hysterics, well, hysterical. Cixous reads Bauer’s actions in a similar way that I do, her hysteria occurring both because of and despite the powerlessness imposed by her family and Hans Zellenka. Bauer, to Cixous is “the one who resists the system, the one who cannot stand that the family and society are founded on the body of women, on bodies despised, rejected bodies that are humiliating once they have been used.” (285) While Bauer was rebuked by her family, she continued to insist on Zellenka’s attacks. She refused to go back on her story or to bend to the pressure of Zellenka’s advances, undergoing both hydrotherapy and electrotherapy before her analysis with Freud. The
strength of her convictions about Zellenka could neither be sprayed away by hoses, nor brushed away by electricity. Even the harsh and painful physicality of these treatments could not discipline Bauer, only strengthening her will to resist them. As Freud noted, by the time she met him, Bauer had “grown accustomed to laugh at the efforts of doctors.” Thus by the time she met Freud, Bauer had thoroughly learned the means by which medical pathology could turn women into despised, rejected, humiliated bodies through medicine and psychiatry, and resist it, honing the resiliencies she first developed through her encounters with Zellenka.

While Cixous continues to laud Bauer and the disturbances she caused through their conversation, Clément positions Bauer’s hysteria as “always reclosable, always reclosed.” In her view, hysteria “mimics, it metaphorizes destruction, but the family reconstitutes around it.” For Clément, hysteria must accomplish all or nothing, the bourgeois family must be instantly destroyed for the hysterics to have served a purpose. Cixous pushes back against this dichotomous mentality offering an understanding of hysteria through degrees, thinking of “hysteria as distributing itself along a scale of the possible intensity of disturbance.” Here, Cixous understands the knowledge of hysteria as chipping away at a bigger problem, a foundation that cannot be undone with one person. The two never agree on Bauer, with Cixous maintaining that “Bauer broke something” alongside Clément’s “I don’t think so.” It appears that Bauer’s hysteria is not always as closable as Clément tries to maintain. Arguing against this resolution, Cixous maintains that the publication of Dora marks the end of Bauer’s hysteria.

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130 Bauer’s hydrotherapy regimes either consisted of treatments of high pressure cold water sprayed on her at intervals, or alternatively, being wrapped up in cold wet sheets and rubbed until they become warm. It is unclear which treatment she underwent, though her parents wealth point to the first type of treatment. For more information, see footnote below.

131 Decker, Freud, Dora, 13.
containment within the family, as the publication ‘disperses’ her hysterical affects. The fact that hysteria is still a lively object of scholarly engagement reinforces Cixous’s argument, especially as Bauer in particular has become a subject of books, plays, and movies, forever multiplying the reach of her story.

In contrast to Clément’s argument, even her engagement with Dora seem endlessly circuitous as loops within other writing on Dora. Jane Gallop situates the argument between the two within the longer text it is found within, La jeune née (the English translation published as The Newly Born Women), in which the conversation is preceded by two sections each authored individually by Clément or Cixous. Gallop introduces Clément’s opening argument that, “Every hysteric ends up inuring the others to her symptoms, and the family closes up once more around her.” Gallop finds that as the text continues however, “the ambiguity defined by Clément seems not so stable, not so easy to declare and accept as much.” Gallop opens up the possibility that hysteria might disturb the authorial mastery in the book, the ambiguity opened up in the debate when the two never agree. Gallop’s view of each of their relation to the hysterics of Bauer opens up a discussion of backwardness, when she points out the temporal locations of their identification with Dora. Clément’s “I really liked them” located in the past, highlights the present identification placed on Cixous as really liking Dora. Gallop locates this disagreement as “a struggle to keep the hysteric an ‘obsolete figure’, to keep the hysterical identification in the past.” Clément too appears to mark this desire as backward as she presents her identification with Dora as something she has moved beyond, overcome in a sense of a linear forward moving trajectory. Cixous, on the other

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hand, cannot let Dora go, cannot keep her solidly in the past, declaring, “it is very
difficult to block this sort of person who leaves you no peace, who makes permanent war
against you.” Cixous cannot stop looking back at her, the hysterical identification is
overpowering, and thus she reads Dora hysterically, finding pleasure in the disturbances
in the text. Despite her initial reluctance, Cixous claims the inheritance to this disorder
through her insistence that “the hysteric are my sisters.” This reclamation of Bauer
creates a jagged line of genealogy that moves the hysteric outside the theoretical confines
of the family and into an alternative realm of genealogy.

I see the basis for such genealogical links existing within the physicality of
hysterical gesture, the ability to feel these bodies through time. Seeing the pictures of
Gleizes’s and reading about Bauer become ways of making contact with the tangible
relics they formed through their hysteric. In connecting Gleizes’s and Bauer I seek to
refine the threads of hysterical resistance that connect them, the way their fragmented
stories line up to create endless reiterations of their subjectivities. In Feeling Medieval:
Sexualities and Communities Pre- and Postmodern, Carolyn Dinshaw describes this
yearning towards trans-temporal connectivity as “…a consistent impulse to make
contact… a desire for bodies to touch across time.” To engage with the photographs of
Gleizes or the fragments within Dora is to participate in forms of contact with their
memories and knowledges regarding sexual violence. These forms of touching, spurned
by a craving to find the shape of similarity within memories and feelings, creates a
foundation for the perception of the effects of violence. The dissociative abilities of the
body and psyche often exist beyond the limits of linguistics. The legibility of hysteria

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134 Rose, "Dora: Fragment," in In Dora’s, 134.
135 Carolyn Dinshaw, Getting Medieval: Sexualities and Communities, Pre- and Postmodern (Durham,
widens the ability to depict the corporeal memory and the transgenerational inheritance of sexual violence.

Within a single sentence from *Dora* or an image from the *Iconographie* lies a world of fleeting gestures carving out the representation of sexual violence. Gesture allows the body to transmit the corporeal memory of this violence outward and across time. Gesture becomes a modality of claiming the inheritance of hysteria to both defend and attract. The histrionics of Gleizes and Bauer, described in the last two chapters both repel unwanted contact as well as draw in those who recognize these signs in themselves, who over identify with them, who see and read them hysterically. In *Cruising Utopia: The Then and There of Queer Futurity*, José Esteban Muñoz writes “Concentrating on gesture atomizes movement. These atomized and particular movements tell the story of historical becoming. Gestures transmit ephemeral knowledge of lost queer histories and possibilities…”136 To study these gestures is to be touched by them. The gesticulations of Gleizes’s and Bauer’s hysteria become the transmission of their knowledge. To feel them, muscles clenched, prickly skin, hair standing on end, stomach in knots, is to feel their affects collide with yours, affirming the existence of the continual push and pull of violence’s effects. The remainders of Gleizes and Bauer enact recognition of the transhistorical nature of sexual violence. Gleizes’s grandiose movements and Bauer’s intimate ones create a moment that seizes you, “the vortex this mobility creates draws in those around the hysteric, whose own potential hysterical vortex (which we all have) responds.”137 Their gestures form the core of empathetic corporeality when they seem to reach out and touch you. For survivors and queer people “our existence in the present

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137 Mitchell, *Mad Men and Medusas*, 42.
depends on being able to imagine these figures reaching out to us,” telling us that the violence we’ve experienced is real, that the pain we feel is theirs too.  

**WHAT SURVIVES: BINDS THAT TIE**

The repertoire of hysteria is composed of these intricate body choreographies, which come alive when they are activated through a hysterical reading. What was once seen as symptoms of a disease transform into the magic within bodies, their ability to respond, adapt, and endure the conditions around them. Hysterics construct a sensorial confrontation with the effects of sexual violence, making a modality of contact beyond words and time, which could not be altered by doctors. This hysterical epistemology renegotiated the corporeal effects of sexual violence into a vernacular of the unspeakable, that which is transmitted through a cough, an unmovable limb, a scream, a stare, any motion of the body designed to communicate. In this view unmovable limbs become a way of recognizing the bodies strength, of representing the hardness and walls developed by those who are constantly threatened, of feeling the way that tension, stress, anxiety and fear get stored in the muscles. Violent coughs become a cathartic apparatus of evasion and expulsion, helping the body feel autonomous. Hysterics provide the body with new methods of seeing, being, and relating in space based in the knowledge imbued through understanding how and what sexual violence looks and feels like. This is not to imply that all experiences of sexual violence feel the same, but that how the body recognizes and deals with violence might produce similar configurations.

While the bodies of hysterics have been continuously evoked as symbols, their materiality as bodies is what makes them so relatable. Tobin Siebers describes this “material-semiotic body” as “complex embodiment”, which sees “the body and its

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138 Love, Feeling Backward, 40.
representations as mutually transformative. Social representations obviously affect the experience of the body… but the body possesses the ability to determine its social representation as well.”

Complex embodiment positions representations of hysteria as fabricated as much as in the movements, and motions of hysterical bodies as through the medical discourse of doctors like Freud and Charcot. The hysterical body I invoke learns from experiences of sexual violence and forms responses to it with the tools it has available: the biological body.

In Victoria Pitts-Taylor’s *The Brain’s Body: Neuroscience and Corporeal Politics*, she explores scientific research on the neurobiological body utilizing a feminist lens to build an analysis of brain-body interaction, and how this effects identification and recognition amongst and between bodies. Pitts-Taylor surveys the literature on synaptic plasticity which “suggests that the brain can change and adapt as a function of learning while remaining structurally stable.”

Similar to Elizabeth Wilson’s concept of wandering biology, Pitts-Taylor hypothesizes this “may suggest that biology itself entails a kind of freedom, which is found in the multiplicity of its potential and the unpredictability of its actualization.”

The ideas surrounding the plastic brain feel hysterical in the sense that they are open to divergent implications and consequences. “Plasticity is neither an undisputable fact with a singular meaning nor a mere social construction.” This understanding of plasticity underscores my construction of hysteria as adaption of the mind and body towards recognizing and dealing with sexual violence.

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141 Ibid., 22.
142 Ibid., 23.
In a chapter entitled “I Feel Your Pain”, Pitts-Taylor explores the research on mirror neurons, “neurons that fire both when an individual makes a motor action and when she sees another performing the same action.”\textsuperscript{143} This large body of research, while beyond the scope of this paper, nevertheless seems to grounds some of my hysterical readings within bodily processes. Why when I see images of Gleizes’s screaming, the voice I hear my own, how when I read about Bauer’s coughing, my own throat starts to itch, the ways in which my body hysterically enters and inhabits these texts. Pitts-Wilson argues that these theories of mirroring must also include the social, “a sense of how different patterns of experience shape different bodies’ relations to other bodies and objects in the world.”\textsuperscript{144} In the cases of hysteria that I have been studying, sexual violence appears as a pattern of experience, altering and transforming Gleizes’s and Bauer’s relation to the world around them. This is not meant to imply that sexual violence is always the same, but maybe exists in patterns like snowflakes; no two the same, yet recognizable as related and relative to each other. This understanding foregrounds that there is not a predetermined arrangement that the effects of sexual violence may take, that it remains dependent in the situation, where it crystallizes and lands, what surfaces and accumulations already exist there. However, the potential is there for recognition, for the configurations of these experiences to match up with each other, and create new patterns of embodiment through their intermingling. The physicality of Bauer and Gleizes’s hysterics have enabled us to feel something of their pain, and recognize similar aches within ourselves.

To identify with the hysterics in this way is to make them your sisters, like Cixous. These ties have already become forms of kinship, which Pitts-Wilson describes

\textsuperscript{143} Pitts-Taylor, \textit{The Brain's}, 67.
\textsuperscript{144} Ibid., 84.
as built “on the body’s capacities for generating intercorporeal bonds.” This “focus on felt ties” could be called affective kinship, where “kinship becomes a matter of lived feeling that requires intercorporeal contact.” As hysterical performance has transmitted itself through its documentation (its photographs, case histories, drawings) the hysterical body has become a place to develop these felt ties, to create a lineage patterned around experiences of sexual violence.

The last paragraph in the postscript to Dora tells us that she has since married and “been reclaimed once more by the realities of life.” Freud thus tries to end his account of Bauer through the triumph of heterosexuality. This victory is called into question in an essay published in 1957 in Psychoanalytic Quarterly by Felix Deutsch, a physician who attended to Bauer in 1922. Deutsch lists Bauer’s age as forty-two instead of forty, betraying the fact that his viewing (or at least writing) about Bauer was inevitably bound up within Freud’s descriptions of her. The impetus for Deutsch’s essay is to reveal that he is the physician to whom Freud makes reference to in a footnote added to the Prefactory Remarks of Dora in 1923. Deutsch, who had recently read (in a biography of Freud, no less) that Bauer had died a few years prior in New York, is now able to reveal his role in her case “without transgressing the discretion that protected her anonymity.” Thus, once again, we find Bauer queerly in the fragments, distortions, and segments again provided by a physician, who also happened to be Freud’s personal doctor.

145 Pitts-Taylor, The Brain’s, 98.
146 Freud and Rieff, Dora: An Analysis, 144.
147 The version I refer to here is found in the anthology In Dora’s Case, mentioned above.
148 Since Deutsch recognized the story of Dora within Bauer the first time he met her, it is hard to image Freud’s write up of Dora discrete or particularly adept at hiding her identity. Felix Deutsch, M.D., "A Footnote to Freud's 'Fragment of an Analysis of a Case of Hysteria,'" in In Dora's Case: Freud--hysteria--feminism, by Charles Bernheimer and Claire Kahane (New York: Columbia University Press, 1985), 36. Decker, Freud, Dora, 171.
Deutsch’s disgust for Bauer is apparent throughout the essay, culminating with his final remark provided by an “informant”, that Bauer was “one of the most repulsive hysterics” he had ever met. In Deutsch’s quite negative review of Bauer’s current symptoms what appear to him as problems read to me as examples of Bauer’s beautiful, resilient, and demanding queerness. During his interview with Bauer she told Deutsch about “how unfortunate her marital life had been” and about “her own frustrated love life and her frigidity.” She expressed “that she had considered divorce”, and “tearfully...denounced all men in general as selfish, demanding and un-giving.”¹⁵⁰ She “released a great amount of hostile feeling toward her husband, especially disgust with her marital life.”¹⁵¹ The one statement Deutsch attributes directly to Bauer in quotes is one he says she “stated unequivocally”: “Men are all so detestable that I would rather not marry. This is my revenge.” It is here that Deutsch hypothesizes that Bauer’s marriage had thus “served only to cover up her distaste of men.”¹⁵² Within these statements hides some of Bauer’s dissatisfaction with the heterosexual labors of marriage. Her designation of herself as ‘frigid’ accentuates her lack of desire and satisfaction with her sex life, and supposes that she may associated this condition not only within herself, but with her husband, who she speaks about with distaste. The view that Deutsch unwittingly paints is of a woman who felt forced to marry, and subsequently trapped within that union. Within Bauer’s statements seems to be a desire for something more, for a different type of relationship then the one she gained through marriage. Bauer had been bullied and abused by multiple men in her life, including her father, Hans Zellenka, Freud, and the other nameless doctors who treated her throughout her life. Could her disgust thus be less

¹⁵⁰ Deutsch, "A Footnote," in In Dora's, 37.
¹⁵¹ Ibid., 39.
¹⁵² Ibid., 42.
with men than with the form of corrupted power men had held over her? Could the unhappiness in her marriage have been caused by her refusal, and ability to stand by that refusal, to obey her husband in the way he saw fit?

Deutsch apparently does not ask about other aspects of her current life and the discussion inevitably turns to her past, which he instantly recognizes from *Dora*. This moment of recognition seems to provoke him to provide a particular picture of the adult “Dora” to fit as a complement to Freud’s analysis. Deutsch’s focus on Bauer’s marriage and motherhood reflects this particular desire to continue Freud’s story. Deutsch focuses on his own image of a miserable, dejected Dora, ignoring both the social and political tensions in 1920’s Vienna, and the vibrant life that Bauer forged for herself outside of her marriage. In *Freud, Dora, and Vienna 1900*, Hannah S. Decker explores the social, cultural and political conditions of Freud and Bauer’s lives that are left out of accounts like Deutsch’s. Bauer, she learned, apparently had found a niche playing and teaching bridge between the two world wars, with her partner, Peppina Zellenka.\(^\text{153}\) Peppina hovers like a specter in Decker’s text, only described as Mrs. K., and hidden in the index under an entry for the “K family”. Despite the prolonged nature of their friendship, Peppina’s role and influence on Bauer’s life is disavowed and relegated underneath the Oedipal family. Unlike Hans Zellenka who appears in the index under his given name, Peppina remains spectral in the account of Bauer’s life, despite the tremendous impact she had on it. Again, we can only speculate about the forms this friendship could have taken, but the bridge partners had clearly come to trust one another again.

While Bauer was continuously estranged and ostracized from her family due to her hysterical symptoms in the same way she had while she was a teenager, her

\(^{153}\) Decker, *Freud, Dora*, 175.
familiarity with these circumstances enabled her to move beyond them and forge (or re-forge) friendships outside her family. With Hans Zellenka dead, could her relationship with Peppina once again been kindled through both women’s experiences of being used/abused by Zellenka? The depths of this friendship is underscored by a discovery made by Patrick Mahoney that Peppina Zellenka hid Bauer from the Nazi’s during the 1930s, enabling her to emigrate to France, and then the United States.\textsuperscript{154} He writes in a footnote, “Again, they were accomplices, but now against the Nazis.”\textsuperscript{155} The risk Peppina Zellenka took to hide Bauer suggests that she had both deep and loving feelings towards her. The literal escape that their relationship enacted represents the transformative potentiality of alternative modes of kinship developed through the sharing of embodied and visceral knowledge regarding sexual violence and coercion.

The relationship between Bauer and Peppina formed a kind of queer kinship not premised on traditional forms of lineage, but on experiences and lives that feel familial. This type of queer kinship is transmitted across time on relations that feel close, figures and images that we see and feel ourselves in. Experiences of sexual violence thus contour a genealogy in which the effects of that violence produce strains of relationality between those who have endured it. In the cases of both Gleizes and Bauer, hysteria enabled an impression of the tactility of sexual violence to be crafted. Hysterics thus enact the crystallization of traumas effects into ways that allow an encounter that fractures the incomprehensibility of sexual trauma through gesture. The somatic registers of hysteria enable something about the sexual violence to be communicated, to be transmitted over

\textsuperscript{154} Mahoney attributes this discovery to material found in the International Institute for Social History, where Bauer is found by her married name, Ida Adler.
\textsuperscript{155} Mahoney, \textit{Freud's Dora}, 17.
generations, to be debated, discussed, and argued over. The ruptures caused by hysteria catalyze an inheritance that cannot obstructed or foreclosed.

Upon Bauer’s questioning, Deutsch reveals that he knows “Professor Freud”, with Bauer responding, “as if having waited for this cue...that she was the “Dora” case”. She is, he says quite proud of her role in Dora and quite keenly discusses her analyses of Freud’s interpretation of her dreams. Here we see Bauer as delighting in the depiction of herself in Dora, the circulation of her story outside of her family, and the havoc she caused Freud. The pride Ida Bauer took in the story of Dora is like the smiling images of Louise Augustine Gleizes, finally feeling in charge of what they are charged with.

This genealogy of hysteria constructed through the records of movements and gestures become inheritances when they are picked up and reworked in contemporary accounts of sexual violence. When I first read the works of Mattilda Bernstein Sycamore discussed in the next chapter, I instantly felt the hysterical recognition of affective kinship. The potentialities left open in the relationships that Bauer and Gleizes formed become the focal point of Sycamore’s work and the potentialities within bodies to create new ways of seeing, feeling and relating to others.

156 Deutsch, "A Footnote," in In Dora's, 38.
157 Unfortunately, Deutsch does not reveal any of Bauer’s thoughts on this matter.
Chapter Three: Mattilda Bernstein Sycamore and the Shards of Kinship

Throughout the writing of this thesis, I have struggled with the inadequacies of language to describe what I feel so strongly. Words like “survivor” barely touch the complexly embodied subjectivities I attempted to describe, and the repetition of the phrase “sexual violence” haunts the text, exposing the ways in which different forms of knowledge often lie outside of what can be described by language. While at times my writing flowed, at others it felt like my body and mind were sinking into the mud of obscurity. The lack of language overwhelmed and exhausted me, and writing started to cause both mental and physical fatigue. At times like these, I would think about a conversation I had with Mattilda Bernstein Sycamore, where she pushed me to consider the ways in which I might re-embody this text, to insert the matter and materiality of my body into a theoretical language that can often feel disembodied. When my words felt caught in my throat, my fingers frozen above the keyboard, I began to take my own body seriously, to consider the ways in which it matters to this text. To feel myself within my words, I began to write by hand, and indeed, large portions of this text were first written by hand and then transcribed into a digital file. The original documents are almost illegible—full of cross outs, arrows, and fonts that alternate between script and print, both within individual words and longer thoughts. Sometimes my thoughts ran together, my letters almost rubbing against each other, while in other places the words are so spaced out it seems as if they are repelled by each other. This handwritten text visualizes some of how I feel this work inside me, how it causes my gut to cramp up, spasms that travel vertical to my throat causing it to tense, feel thick and constrained. While sometimes writing hurts, other times it causes these tensions to unlock, words turning like keys inside me, making my body align. My hope is that some of the physicality of that writing
seeps in, hystericizing the text, causing readers to feel the places where their bodies hold unarticulated knowledges, stored information, and alternative way of being and relating in and to the world.

In the past two chapters I developed what I am calling a hysterical reading practice to understand the gestures of hysteria as embodied and visceral knowledge regarding sexual violence. The hysterics of Louise Augustine Gleizes and Ida Bauer exemplify the ways in which the physicality of hysteria enabled the effects of their experiences of sexual violence to become tangible, relatable and shareable. The perceptibility of sexual violence within both of their stories become the genealogical threads between contemporary and historical performances of hysteria. In this final chapter I apply the somatic languages of hysteria to contemporary accounts of sexual violence and queer desire within the work of Mattilda Bernstein Sycamore. Here I utilize the semantics of hysteria that I have built in the previous chapters to explore the ways in which the effects of sexual violence become the basis for transformative kinships in Sycamore’s work. Sycamore’s depictions of relationships between people who have experienced sexual violence resist both pathological and sanitized accounts of the lasting effects of violence. Hysteria has become my chosen mode of analysis for the pliability it offers to talk about body, mind, and emotion together. While an imperfect tool of analysis, it’s historical connotations with violence, trauma, and the body provide it with a means to expand the forms of language used for describing the bodily effects of trauma.

In reading Sycamore’s work hysterically, I touch it with eyes altered by the “remarkable vicissitudes of hysteria”, the extraordinary range within corporeal responses to sexual violence.158 My intention in bringing these three theorists of the body together

158 Wilson, Psychosomatic: Feminism, 6.
is to define the hysterical tendons of resistance that connect them, the linked ways they utilize the body to create forms of visibility, relationality, and endurance. In this way Bauer, Gleizes, and Sycamore share “life stories that [loop] around one another in an embrace.”\footnote{159 Sycamore, The End, 143.} In this last chapter, I will trace the places in Sycamore’s work where hysteria seems to hover, take over bodies, and form connections with others. In Sycamore’s work, histrionics are used to highlight the remarkable resilience and capabilities of the body, and what is generated through their acknowledgement.

**SENSORIAL PRAXIS AND IMAGINATIVE SURVIVAL**

The first time I picked up a book edited by Mattilda Bernstein Sycamore, it was the anthology *That’s Revolting: Queer Strategies for Resisting Assimilation*, and I was instantly attracted to both the title and the image on the cover: a set of barred teeth with the lips puckered up around them, a splash of purple, pink, and glitter covering the chin.\footnote{160 Mattilda Bernstein Sycamore, That's Revolting!: Queer Strategies for Resisting Assimilation, new rev. and expanded ed. (Brooklyn: Soft Skull Press, 2008).} The image is both violent and seductive, similar to the images of Louise Augustine Gleizes discussed in the first chapter. While I may have been “wrong” to judge the book by the gut feeling its cover gave me, I have never been disappointed in the trail *That’s Revolting* took me on. When I struggled over a contemporary writer to include in this thesis, Sycamore’s work came rushing back to me. She was outspoken as a queer person and a survivor, identifications that I felt were important for continuing the visibility of sexual violence created by nineteenth century performances of hysteria. As I read more and more of Sycamore’s work, I noticed the way it affected my body. Certain places make my heart beat fast with delight, or hold my breath in the tension and suspense of affinity. I feel her writing as it seeps through my skin mingling with the...
stories that I already hold there, mine, those of people I love, and those I’ve read, heard, or felt.

Mattilda Bernstein Sycamore is both a writer and editor of written work dealing with the intersections of gender, sexual violence, sexuality, and sex work.\textsuperscript{161} Her editorial work highlights her commitment to creating spaces for a multifarious range of accounts that complicate and explode the dominant narratives surrounding the relations between queerness and sexual violence. Much of this work derives from her personal experiences including the books that are the main focus of this chapter, the debut novel \textit{Pulling Taffy} and the nonfiction \textit{The End of San Francisco}.\textsuperscript{162} In each of these works Sycamore centers the relationships she builds through affective kinships created with other people who have also endured sexual violence. These works, along with the anthology \textit{Dangerous Families: Queer Writing on Survival}, exemplifies Sycamore’s intention to create spaces for queer and trans survivors of sexual violence to tell stories that remain outside dominant understandings of sexual violence.\textsuperscript{163}

Sycamore’s \textit{Pulling Taffy} (2003) and \textit{The End of San Francisco} (2013) are both composed of various length vignettes that ground the body of the first-person narration through bodily sensations, movements, and feelings that I’d like to read as hysterical, as their logic is tied intimately towards Sycamore’s experiences of sexual violence, and its inhabitation within her body. Sycamore crafts a queer stream of consciousness led through the tensions, pinches, glimmers, jumps, and startles embedded within her. Each text centers around this tension, and the way it disrupts Sycamore’s relationality toward

\textsuperscript{161} The intricacies and complexities of Sycamore’s engagement with sex work go far beyond the scope of this paper. The history of sex work is entwined with histories of queerness and trauma much in the way that hysteria is.

\textsuperscript{162} Matt aka Mattilda Bernstein Sycamore, \textit{Pulling Taffy}. (San Francisco: Suspect Thoughts Press, 2003).

the world, and those around her. Sycamore utilizes this tension as a form of embodied knowledge to read places and people, creating spaces and kinships where the memory, knowledge, and residual effects of childhood violence are always recognized and treated as complex organizations of power and pain. Written a decade apart and in different genres, the works communicate through their shared focus on the aftermath of abuse and concentration on how the reconfiguring of intimacy can nurture alternative kinships. In both texts, Sycamore travels in time and space through San Francisco, Boston, Washington D.C., and New York City creating relationships based on the embodied recognition of people who have endured sexual trauma. The continual development of this material in different modes highlights the need to express the effects of sexual violence in multiple and various ways. The repetition of particular lines, familiar scenes, names, and gestures within the two texts (and Sycamore’s work as a whole) reflects how the continuing incoherence of sexual trauma requires the engagement of creative methodologies. The repetitive re-engagement with sexual trauma creates new ways of seeing and being over time. The fictional space of Pulling Taffy pushes against the walls of autobiographical truth, creating the space to read these embodied memories again as non-fiction, as embodied theorizations of the effects of prolonged experiences of abuse. As Sycamore re-engages with material, these moments are stretched and pulled out, allowing the elaboration of practices honed by Sycamore during a childhood of abuse; different way of seeing and apprehending trauma that grow out of literal ways of distorting vision, enabling the imaginative to take over. In the introduction to Dangerous Families (published the same year as Pulling Taffy) Sycamore writes:

If I shut my eyes, I see a cylindrical blue mental tunnel to fall into and get out of but it’s floating, shifting angles. I see layers of fluorescent dots in chains: blue,
lavender, green. Remembering when I was younger and I couldn’t sleep because of the same dots, thought it had to do with the way I shut my eyes too tightly.\textsuperscript{164}

Sycamore repeats these lines with a difference in \textit{The End of San Francisco}:

Not just a physical dimension but an emotional dimension of terror. I shut my eyes and saw a cylindrical blue metal tunnel like my grandmother’s laundry chute to fall into and get out of the house but it was floating shifting angles. Layers of fluorescent dots in chains: blue, lavender, green. Remembering when I was a kid and I couldn’t sleep because of the dots, I thought it had to do with the way I shut my eyes too tightly…. I used to think the dots related to atoms, that I somehow could see the structure of things.\textsuperscript{165}

The imaginative praxis of Sycamore’s strategy comes more clearly into view. When terror becomes so ingrained within your daily life that it is no longer external, it resides inside you. What is the answer to a world so chaotic that its shards constantly invade the body? Can you force everything away through the simple squeezing of your eyelids? When you shut your eyes, the world around you continues to move and cut, but what your body creates for you to see can enable a form of travel, a dissociation that enables the body to endure the present moment. The shifting colors become an escape, “to fall into and get out of the house” like a laundry chute, to create another place for the mind to be, a stronghold for the endurance of sexual violence. Even as a child, Sycamore is able to envision their way of seeing as unique, being able to see beneath to the structure of things.

This dissociative ability to both be there and not there allows Sycamore to create an interior world, one that enables them to live within the contradictory feelings of loving the man who abuses them. The passage from \textit{The End of San Francisco} occurs in the beginning of the text, which starts with Sycamore’s return home to visit her dying father, hoping for recognition or acknowledgement of the sexual violence he inflicted. Visiting


\textsuperscript{165} Mattilda Bernstein Sycamore, \textit{The End of San Francisco} (San Francisco: City Lights, 2013), 87.
her childhood home causes a rupture in temporality, as she is both back in the place of violence, and beyond the space of it. She writes “I don’t feel afraid of the house anymore, I can go downstairs where so much of everything happened”, however the residues of trauma have seeped into the architecture and furniture of the house: “the door to the rec room is scarier, especially when I can’t find the light right away, but even behind the bar, in that moldy sink where I was a broken toy…like the chimney where I’d imagine myself floating away, away from him splitting me open, right now it just looks like a chimney.” (15) The house, like Sycamore’s body, holds the memories of her childhood abuse, acting as both a space of confinement for her father’s violence, “that moldy sink where I was a broken toy,” and escape like “the chimney where I’d imagine myself floating away, away from him splitting me open…” The house is both scarier and less so; it both does and does not suck her back into those moments, as trauma reverberates throughout the objects in and around the house, the “lights at the end of the driveway, the “bigger trees” the eerie wine room” (1). Sycamore’s imaginative practices made channels here long ago that remain, interstitial spaces that allow for her expansion within a place that confines her.

The interactions with her father are similar, both making her “afraid again” of her father, but also able to see beyond her fear, to “his eyes [that] look sad and huge and I think about how scared I used to be of those same eyes but now it’s not overwhelming.” (19, 22) In the movements between past and present, Sycamore has built and rebuilt her interactions with her father’s eyes, weaponizing writing to understand these creativities of perception through a critical difference in repetition. In Pulling Taffy she begins to narrate the power of her gaze through its articulation in writing, “But I practiced how to look right through his eyes until my face went blank like no one else was in the room; then I’d won”, “I practiced staring through his eyes until they were empty holes, and I could look out the window.” (20, 62) Sycamore documents the perceptual adaptations
imbued through years of seeing the “floating shifting angles” of colors, the ability to see in a different way. Sycamore teaches herself “how to look right through his eyes”, to make them into “empty holes”. The ability to see through her abuser provides the same escape of the colors in her mind that become a laundry chute. The house again is transformed through the imagination into outlets of escape, this time through the window, again gesturing to the world outside her father’s control. Sycamore’s agency of escape, knowing she can get out, allows her to interact with her father differently, feeling the full dynamism of a power she crafted and honed throughout her childhood.

The ability to alter how she sees her father, to feel in control of her body around him, enables Sycamore to reconcile the past in a way that allows her to feel empathy for him. She tells him, “Even though you’ve caused me more harm than anyone else in my life, I still love you and I don’t want you to die and I wish we could have a relationship.”

(22) Sycamore’s ability to create the angles in which to see her father allows her to hold her love of him alongside the fear, anger, rage, and grief. The ability to love her father through his violence is intimately tied to the corporeal mode of survival Sycamore developed during the years she was being abused, a modality of seeing and experiencing the world differently. Sycamore writes in the Dangerous Families introduction, “Queer survivors of childhood abuse struggle daily with the cracks abuse renders in our bodies, our minds, and our spirits. From an early age, we are forced to develop critical, unique ways of seeing the word in order to survive.” Sexual violence has the power to produce unique forms of creativity within survivors, who must learn to constantly re-create the world around them in order to survive.

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166 Sycamore, Dangerous Families, 2.
**How the Wound Haunts**

Mainstream media representations of people who experience sexual violence often portray stigmatized victims, debilitated by their memories of trauma. Despite the increasing number of survivors coming forward and telling their stories, sexual assault statistics are not diminishing. In Avery Gordon’s *Ghostly Matters: Haunting and the Sociological Imagination*, she describes haunting as “one way in which abusive systems of power make themselves known and their impacts felt in everyday life…” To be haunted in this way by sexual violence makes clear the systems of value that make certain bodies available for consumption. Since sexual violence so often goes unrecognized, to be haunted by it is to refuse to negate its existence and lingering presence. To be haunted by sexual violence is to be aware of the extreme contradictions of strength and vulnerability embedded within the body, the spectrum and range of corporeal capacities. Histrionics present a modality for understanding the paradoxes that these haunted subjectivities present, a way to comprehend the aftermath of sexual violence as a site of both trauma and potentialities. The excess of hysteria allows traumatic knowledges to become transferrable, to travel across time, and to inhabit bodies in perceptible ways.

The hysterical excess of sexual violence is elaborated by Sycamore throughout her work. In the introduction to *Dangerous Families* she writes about a period of time in which she “lived in a constant state of wanting to scream out or tear [herself] apart” (1). This image of the fighting body, tearing itself apart from the inside is reminiscent of the image of Gleizes screaming in her bed, caught within the moment of both past and current violences. This feeling of a tumultuous body, capable of both powerful

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articulation and the threat of laceration creates an understanding of the bodily capacity to
tear, a bodily homograph of the eye’s tear, a use of biological mechanisms to materialize
emotion, making it tangible in ways that can alter its path and make it available to be
utilized differently. Traumatic memory, in Sycamore’s work becomes capable of evoking
power from pain, reconfiguring notions of the bodily capacity to endure violence.

Sycamore’s work is possible due to the large body of creative work by women of
color centering gendered violence that grew out of the erasure of these experiences in
feminist theories dominated by white, straight, middle-class women. This literature has
inspired many more writers to use creative methods to tell personal and/or familial stories
of sexual violence that were once thought of as unspeakable. The telling of these stories
makes alternative systems of valuation possible, where the knowledge of people who
have endured violence is seen as a form of visceral wisdom capable of creating and
sustaining life. The traditions of women of color utilizing imaginative theorizing in
literature has nourished modes of feminist analysis committed to the creative as a critical
methodology. This framework utilizes the creative force of trauma in ways that seek to
tell stories whose language has yet to be formed. The articulation of these stories
demands new ways of thinking, theorizing, and speaking about trauma, crafted through
traumatic affect. Grace Cho writes how trauma can become “a creative force that
assembles new forms of perception.” Among the “creative possibilities of trauma” Cho
uncovers are “disruptions, articulations, visibilities, assemblages and new configurations

168 Some of the early writers (starting in the late 1970s) of this literature who have influenced this work,
(among many others) include: Alice Walker (The Color Purple), Maya Angelou (I Know Why the Caged
Bird Sings) Gayle Jones (Corregidora), and Toni Morrison (The Bluest Eye), and Gloria Naylor (The
Women of Brewster Place).
169 Grace M. Cho, Haunting the Korean Diaspora: Shame, Secrecy, and the Forgotten War (Minneapolis:
University of Minnesota Press, 2008), 24.
of kinship.” Sexual trauma long thought un-nameable, un-thinkable, and unspeakable materializes in these heightened modes of perception crafted as a direct response to these aspects of violence. Through these gestures, trauma becomes communicable. These modalities of sight grow in relation to others, and thus also become available as new technologies of intimacy.

Acknowledging the strengths of those who experience sexual violence pushes back against centuries of devaluation. This depreciation occurs through legal, judicial, institutional, and medical responses to survivors of sexual violence. Gloria González-López describes the wounds of sexual violence as an “epistemological location” of knowledge, generated through the transformative power of healing. What are often invisible wounds make and transfer meaning, feeling and information as they work towards a new kind of visibility. Matt Richardson, in *The Queer Limits of Black Memory: Black Lesbian Literature and Irresolution* marks this epistemological location of the wound as one of “irresolution” that “helps us to remember what it is about the moments of erotic pleasure and creativity that are such valuable sources of knowledge.”

Survivors create new configurations of intimacy when they utilize the alternative ways of seeing imbued through trauma and the ache of the haunted wound. In the pieces of Sycamore, Gleizes, and Bauer stories that we find in their stories, irresolution becomes the spark that ignites new forms of relationality. The connection between intimacy and violence demands new forms of kinship, connection, desire, and eroticism. Where bodies do not make sense becomes the site where they begin to fit together. To be haunted by

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170 Cho, Haunting the Korean, 33.
172 Matt Richardson, The Queer Limit of Black Memory: Black Lesbian Literature and Irresolution (Columbus: Ohio State University Press, 2013), 16.
sexual violence is to allow it to alter you, to be undone by it, but also to remake oneself through the visceral comprehension the body imbues through resisting the withered subjectivity sexual violence tries to impose. The transformations enabled by the hysterical body open up “the possibility of making a life, or becoming something else, in the present and in the future.”

Sycamore utilizes the physicality of the hysterical body to articulate memories and flashbacks that allow her to be haunted by sexual violence in a way that produces new modes of inhabiting her past, present, and future relationships. She explores new ways of feeling in her body through her professional experiences with sex work, which she explores with the same intimacy and integrity that she utilizes within relationships not based in economic transactions. Through these various engagements, Sycamore crafts the effects of sexual violence into a resilient, adaptive, fluxional sexuality that allows a range of emotions to be integrated into relationships with lovers and friends, a synergy “connected by sharing [their] complicated histories, an act of intimacy through disclosure,” of “knowing about someone’s struggle and seeing them exist anyway.” These ways of building intimacy through trauma become queer forms of relating, connections that feel queer through their overlaps, dissonances, and reverberations.

In her exploration of trauma’s effects on sexuality, Ann Cvetkovich asks “does incest make you queer?” She introduces “queer to suggest the unpredictable connections between sexual abuse and its effects, to name a connection while refusing determination or causality.”

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174 A more thorough analysis of sex work in Sycamore’s work is beyond the scope of this paper, particular in regards to how this writing challenges stereotypes that traffic between sex workers and childhood experiences of sexual violence.
175 Sycamore, *The End of San Francisco*, 144, 165.
176 Cvetkovich, *An Archive*, 89.
sexual violence that can elicit queer responses. The queering of the body through sexual violence works “by contiguity and displacement; like metonymy distinct from metaphor queerness knocks signifiers loose, ungrounding bodies, making them strange, working in this way to provoke perceptual shifts and subsequent corporeal response in those touched.”\textsuperscript{177} The experience of sexual violence is a perpetual ungrounding of bodies as they become capable of using dissociative power to pull themselves back and forth through time. The strangeness within these bodies become forms of power, knocking loose the signification that medical and psychological accounts place on the bodies and minds of those who have experienced sexual violence.\textsuperscript{178} The queer body is crafted through this limitless repertoire of corporeal methods that allow for bodies to be unexpected, to be alike in their differences. The unpredictable effects of sexual violence can be encapsulated within the spontaneity of the hysterical response, whose endless movements and gestures become re-articulations of the multi-fractured incoherency embedded within violence. Sexual violence so often creates queer forms of sexuality because of the unpredictable, transformative, and indeterminate nature that queerness allows, an echo of the mobility within hysterical gestures. Sycamore’s work pushes against the stereotypical depictions of survivors in mainstream media, “That’s right– no therapists analyzing our plight, no talkshow hosts exploiting us– just survivors exploring

\textsuperscript{177} Dinshaw, \textit{Getting Medieval}, 151.

\textsuperscript{178} Using a framework of illness to diagnose people who have experienced sexual violence places the signification of the event on their bodies alone. Mental Illness diagnoses such as Post-Traumatic Stress Disorder (PTSD), Borderline Personality Disorder (BPD), and Dissociative Identity Disorder (DID), all list childhood sexual violence as a risk factor.\textsuperscript{178} These diagnoses continue a tradition of pathologizing individuals who experience sexual violence, diverting attention away from the perpetrators of that violence. Throughout the history of hysteria, and continuing into the present day, psychiatric diagnoses have been utilized to contain the effects of sexual violence within the individual body, allowing the broader structural conditions that foster sexual violence to continue unabated. The diagnosis of these reactions to sexual violence as “symptoms” is utilized to disempower and dissociate these corporeal and psychological effects from the sexual violence they were created in response to. When looked at through a different lens, these ‘symptoms’ can be seen as survival strategies formulated in response to recurring violence. These forms of over-alertness are cultivated as a way to mitigate and protect oneself from the constant threat of violence.
our complicated, frightening and fulfilling lives.” Sycamore privileges the knowledges formed through experiencing sexual violence throughout her work, “As survivors, we become hyperaware, our vigilance enables us to dissect everything.” Here, what is typically seen as symptomatic of disease because evidence of dis-ease, where the hyperawareness of survivors accords them an added level of perception, to be in tune with the layers of meaning around them. To hold the complicated, frightening, and fulfilling together is evidence of survivors’ ability to embody contradiction, to understand the importance of knowledges that are devalued within the depreciation of survivors that occurs with medical, judicial, and legislative frameworks.

The utilization, celebration, and exploration of the effects of sexual violence refutes the frozen and frigid status of victim, catalyzing forms of sexuality and intimacy out of the effects of sexual trauma. These forms of queerness have the potential to foster safe havens for this rupture of intimacy. Queer sexuality comprehends the possibility of touch to hurt, weaving this knowledge into its cartographies of desire. The trauma of touch forces queered intimacy to integrate danger within the pleasure of sexuality. A moment or touch can release a memory, trigger a feeling that doesn’t belong to the scene in which it is felt. The spontaneity of these responses allows them to take place anywhere, at any time. In Sycamore’s work a flashback is as likely to happen with a long-term partner as a one-night stand or client. To adapt to this threat of exposure, Sycamore creates relationships with boundaries as illimitable as the gestures of hysteria, developing intimacies in chance encounters, enduring friendships, tricks, and partnerships. These relationships are queer as they are constantly open to improvisation, revision, and

179 Sycamore, Dangerous Families, 3.
180 My understanding of trauma and touch is informed by Cvetkovich’s chapter in An Archive of Feelings entitled “Trauma and Touch: Butch-Femme Sexualities”.

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alteration to find an always tenuous balance. This allows a form of contact enabled to tune in to the trauma embedded within sexuality and allow vulnerability to feel secure. Through queer forms of sexuality, impenetrability becomes porous.

The multi-dimensionality of queerness, the way it refracts by means of its relations and crystallizes through its environment has similar contours to the capricious elasticity of hysteria. Both forms of being and knowing propel understandings of how parallel experiences can intersect, unravelling linearity to create new matter. This alters the composition of sexual violence as trauma, which imbued with such unknowable meanings, has no word in the English language that quite correlates with it.\textsuperscript{181} For something to be hard to describe in language does not mean it is unknowable. Linguistic expressions of love often fail to capture the depth of its feeling, yet these inadequacies are still felt and communicated in other ways. It is often far more powerful to show someone how you love them, then tell them. The repertoire of hysterical affects across history demonstrates a story about trauma separate from the medical and psychological “truths” they were supposed to uphold. This queer lineage of hysterical survival elucidates the darkness surrounding what follows sexual violence, casting it “as the warm illumination of a horizon imbued with potentiality.”\textsuperscript{182} When the memories of survivors find and make home with each other in such a way, they become irrefutable.

\textbf{“BECAUSE I HOLD IT ALL IN MY BODY”}\textsuperscript{183}

Mattilda Bernstein Sycamore’s work explores the boundary between violence and intimacy that often exists when growing up in an abusive home. The development of techniques to handle sexual violence and its aftermath are a corporeal training in

\textsuperscript{181} Trauma is not listed in the Merriam-Webster Thesaurus, implying there is no word close enough to meaning in English to act as a synonym.
\textsuperscript{182} Muñoz, \textit{Cruising Utopia}, 1.
\textsuperscript{183} Sycamore, \textit{The End of San Francisco}, 56.
endurance, an integration of hysterical memory used to strengthen the body and mind against the navigation of violence’s perpetual affects. In Sycamore’s work she uses this corporeal archive of survival to form connections, kinships and intimacies with other people who have had prolonged experiences of abuse, experiences that rupture one’s relationship with their body, other people with bodies they are “learning to call home.”

Sycamore’s work pays attention to the feelings and effects of the body, where the psychological, physical and biological cannot be separated. I read this understanding of the body as hysterical, widening our understanding of the proprioceptive nature of human reactions, how much the body is internally ready to calibrate itself to violence around it. The acknowledgement of histrionics has the potential to turn the body that was once the site of trauma into a site of foundations for relationships people who have experienced trauma are able to form with each other. Sycamore’s relationships with other survivors re-envision the survivor’s body as phenomenal, extolling its development of corporeal responses and adaptions to sexual violence. The hysterical body is exceptional in its ability to overcome, even within the minutia of chewing, breathing, and crying. The power within these strategies shared between Sycamore and her friends and lovers provides a counterpoint to the helpless victimized body frequently invoked by mainstream media portrayals of sexual violence. The nourishment found between survivors in their similarities provides avenues toward obtaining more concrete forms of sustenance. The development of intimacies between survivors through their shared failure of corporeal “normality”, imbues the hysterical effects of survivors with power that cannot be destroyed by discourses on sexual violence that focus on victimization. Sycamore’s written accounts of hysteria imbue the body of the survivor with dexterity, an

184 Ibid., 83.
ability to move beyond the confines and restrictions imposed upon them, similar to the portraits of Louise Augustine Gleizes and the fragments of Ida Bauer. Sycamore’s engagement with the acknowledgment of sexual violence alongside the exploring of intimacies continue the tradition of visibility and legibility ignited by late nineteenth and early twentieth century performances of hysteria while pushing towards a new understanding of the relationship between trauma and queerness. The gestures of historicized hysteria become available as tools to these forms of queer hysteria that openly integrate and interrogate desire.

While *The End of San Francisco* opens at the seeming “end” of Sycamore’s relationship with their abusive father, the rest of the memoir leaps backwards and forwards from that moment through the body of Sycamore’s narrator, jumbling a chronological narrative. This unstable time creates a sense of traumatic temporality, where the past reverberates through the present, crafting a tenuous and shifting relationship to the future. Sycamore utilizes the the hysterical methodology of crying to maintain the fragile balancing of time. While crying is typified as an act of weakness, crying in Sycamore’s work functions both as a modality of protection and a cathartic tool of release. “But where I’m really crying…is when I say: I wish you could acknowledge sexually abusing me, because it would make it easier for me to go on living.” Sycamore’s father responds by shedding a few tears and thanking them for sharing. “And then there are so many layers to my sobbing: there’s holding the chest while spasming anyway; there’s tears gliding smoothly down skin; there’s tears in eyes, in face, inside everything.” I read Sycamore’s tears, which are “inside everything” as a manifestation of hysteria. The tears hold an elegance, grace, and clarity as they “glide smoothly”, a communication between the two of all that cannot be said. Sycamore’s crying acts like a hysterical vortex to which her father can respond and she is able to “tell him I’ve learned
there are other ways to be strong besides holding everything in— and of course here there is more sobbing— sobbing is the texture of the air, sobbing is the feeling of this room, sobbing here it feels like strength.”185 Sycamore can envision sobbing as strength because of her childhood experiences where she crafted crying as a modality of protection, escape, and security. Her sobbing becomes “the texture of the air”, holding her together, nourishing her as she breathes it in. Her “tears pour down [her] face like armor” allowing her to feel “cold in the way [she] learned to survive as a kid.”186 The armored cry of Sycamore reflects both the hysterical shriek of Gleizes and the hacking cough of Bauer, corporeal processes engaged to create and feel the endurance and strength within and of the body. Sycamore uses crying to work through present experiences and the memories they trigger. Crying becomes a reservoir of emotion made physical—fear, anger, betrayal, anxiety, shame, guilt, sadness, the endless heterogeneity of emotions that can occur when sexual violence transpires within trusted relationships.

Sycamore uses histrionics to integrate and ground herself in this experience of time and feeling as multiplicitous. Back in her childhood home, following her conversation with her father, she is both back in the space of abuse, and outside of it, she “doesn’t feel afraid of the house anymore.” She visits spaces where in the past she had “felt like a broken toy” with an altered set of feelings, “Like the chimney where I’d imagine myself floating away, away from him splitting me open, right now it just looks like a chimney.”187 As an adult Sycamore does not need to escape in the ways she crafted as a child, where the only relief she could navigate was the one within her mind, like the

186 Sycamore, The End of San Francisco, 12.
187 Ibid., 15.
escapism of the shifting colors. While her father still cannot completely verbalize his actions in the ways that Sycamore can, her father communicates in the ways he knows how. The tears that he sheds seem to function like a nodding head, a gesture of silent acceptance. Sycamore was able to achieve this moment with her father through her ability to use and read the gestures of the body, knowledge gained through the connections and kinships she has created with others who have experienced sexual violence, others who have formed nonverbal methods of communicating with their bodies. These relationships corroborate the particular visceral forms of knowledge Sycamore has crafted through experiences of sexual violence.

The endurance of sexual violence over time leads to heightened sensory states that can overpower the usual hierarchy of needs. The constant focus on mitigating danger through the body impedes the development of routine practices of physical care. The relationships within Sycamore’s work often focus on the lived realities of bodily requirements in relation to the aftermath of violence, including nourishment and comfort, which get de-prioritized under constant duress. These affiliations created with other people who have experienced sexual violence helps produce a politics of self-care that builds kinship bonds through the sharing, development, and assembling of survival strategies. These networks of intimacies provide avenues for self-care that seem unobtainable when encountered in isolation. Sycamore writes, “We taught each other to breathe and to chew, basic life skills that we didn’t have because we had to survive”

Growing up in a sexually abusive situation marks the everyday experiences of childhood.

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188 In StaceyAnn Chin’s memoir, The Other Side of Paradise she narrates both the external events and internal dialogue of an experience of sexual violence. She tells herself “You can escape. But there are too many of them for me to get away. No matter, escape is in the mind.” After a childhood full of the threat of sexual violence, Chin’s internal flight helps her navigate an external one and escape a more serious confrontation with sexual violence.

Basic life skills are cultivated through fear, stress, and pain which the body remembers throughout adulthood, never fully in the past. Even automatic reactions, like breathing, have the potential to be difficult through the lens of traumatic response. Sycamore and her friends share this altered embodiment in unique ways as they teach each other ways to breathe and chew, to take care of themselves. When people who experience sexual violence share their own assemblage of survival methodologies, they validate and combine a repertoire of abilities learned through their different experiences.

To locate the effects of sexual violence within both the body and digestive processes expands understandings of how trauma is stored in the body. Elizabeth Wilson explores this “schema for thinking about the nervous system beyond the head; it turns our attention to how the nervous system innervates the entire body, and how distal part of the body (such as the stomach) have the capacity for psychological action.” Wilson explores the Enteric Nervous System (ENS), the “complex network of nerves that encases and innervates the digestive tract from the esophagus to the anus.” Named “the brain of the gut”, more nerve cells are found in the gut then entire rest of the peripheral nervous system. Wilson explains the “biochemical, anatomical, and functional findings about the ENS” including its relation to the central nervous system. Both systems feature the same classes of neurotransmitters, with serotonin having been found to be a particularly important neurotransmitter for the ENS. “Different parts of the digestive tract are innervated by different parts of the nervous system” with the ENS regulating the stomach, small intestine and upper colon which “tend to remain outside awareness until they break down,” such as in the case of Irritable Bowel Syndrome (IBS) where “the

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190 Wilson, *Psychosomatic: Feminism*, 34.
191 Ibid., 36.
192 Ibid., 37
importance of psychological events to the functioning of the gut is widely recognized.”

IBS is associated in some patients with “increased visceral sensation, and psychological features including depression and anxiety.” This history of digestive issues is readily apparent in the history of Ida Bauer, as well as current diagnosis of Somatization Disorder where “there must also be a history of at least two gastrointestinal symptoms other than pain.” Through this lens connecting emotionality to digestive problems, the work put into eating throughout Sycamore’s oeuvre highlights the digestive system as a possible place (among others) where the effects of sexual violence get stored and transmitted throughout someone’s life.

Wilson uses this psychological understanding of the gut to underscore how “it is one of the most important means by which the outside world connects to the body,” the ways the gut, like the skin, forms a boundary between the self and the world. While comparing the breakdown of relations to others that occurs within depression and the breakdown of the gut, Wilson suggests that “maybe ingestion and digestion aren’t just metaphors for internalization; perhaps they are ‘actual’ mechanisms for relating to others.” Through this lens, the issues Sycamore has with eating and chewing can be seen as a manifestation of their reactions towards the physicality of sexual violence. Sexual violence enacts an invasion of the body, acts where force inserts itself through bodily orifices all of which are intimately connected to indigestion and digestion. The feel of losing control of these ways into and out of the body can continue to affect survivors over time, effecting the alteration of everyday habits of eating and nutrition. Wilson outlines

193 Ibid., 38.
194 Kim and Camilleri 2000, quoted in Wilson, Psychosomatic: Feminism, 38.
195 American Psychiatric Association, 1994, 446.
196 Wilson, Psychosomatic: Feminism, 45.
other physical properties of the gut that may allow us to think about it in relation to how
the body stores sexual violence. She writes,

The belly takes shape both from what has been ingested (from the world), from its
internal neighbors (liver, diaphragm, intestines, kidney), and from bodily posture.
This is an organ uniquely positioned, anatomically, to contain what is worldly,
what is idiosyncratic, and what is visceral, and to show how such divisions are
always being broken down, remade, metabolized, circulated, intensified, and
excreted.197

Positioning bodily systems in this way allows us to comprehend certain corporeal
actions- indigestion, acidic stomach, and nausea as components available to the body to
react to the world around it. Sycamore’s attention to her body and diet, how and when she
feels hungry, nauseous, dizzy, or acidic, heightens her awareness of both threats and
comforts within daily life.

The gut, in this case seems to function as a “viable, dexterous means of accessing
others.”198 The hysterical effects of sexual violence on digestion articulate and solidify
certain forms of knowledge surrounding what the body experiences during sexual
violence that is hard to articulate or put into words. The trauma of sexual violence
becomes palpable through modes of digestion that include altered or fluctuating appetites,
sensitive stomachs, repulsion towards food with particular tastes, textures, and
consistencies, difficulties and aversions to swallowing, and sensitive gag reflexes. These
reactions reflect different possible survival adaptions to the threat of sexual violence,
ways to close down access to the body. Throughout Sycamore’s work, food is a constant
presence, underscoring the labor often necessary to provide the body with the
nourishment it needs. “My stomach feels warped– I don’t usually eat dairy or sugar, so I
drink some apple cider vinegar, which grounds me just a little.”199 The shared difficulties

198 Wilson, Psychosomatic: Feminism, 47.
199 Sycamore, Pulling Taffy, 51.
in eating between Sycamore and her friends become a way for them to understand the
impacts of sexual violence in new ways, and develop modalities for living with these
altered patterns of ingestion and digestion. “In the kitchen we would remind each other to
breathe and to chew, we were trying to stay calm but we also celebrated mania– we held
each other and made carrot juice with ginger and then honey, we would dissect the
drama.” Sycamore’s deliberate attention to nutrition becomes a point of connection
with their friend Joanne, and the comfort that arises from their relationship allow them to
embody and find strength within contradiction “trying to stay calm but celebrate mania” a
balance they maintain with the help of the ingestion of substances (carrot and ginger) that
reduce pain, indigestion, and inflammation. These substances then collude with their
ability to then “dissect the drama.” Here dissecting becomes synonymous with digesting,
illustrating how the action of the gut may act as “object relations…how the gut is
involved in the extraordinary work of incorporation and expulsion.” By caring for her
body in a particular way, Sycamore heightens her ability to think through situations
cognitively, emotionally, and physically.

This is a psychosomatic understanding of the body/mind, where each is
inextricable from the other, and as Wilson writes, “biology is a strange matter, proficient
at the kinds of action (regressions, perversions, strangulations, condensations,
displacement) usually only attributed to nonbiological systems.” Wilson’s understanding of the composition of the body is self-consciously hysterical, presenting
another angle through which to view the scream of Louise Augustine Gleizes or the
cough of Ida Bauer, the ways screaming and coughing could have helped enact an

200 Sycamore, The End, 103.
201 Wilson, Gut Feminism, 78.
202 Ibid., 59.
expulsion, a way of literally pushing out feelings that entered the body through the mouth. Wilson writes, “The back of the throat is a local switch point between different organic capacities (ingestion, breathing, vocalizing, hearing, smelling) and different ontogenetic and phylogenetic impulses. Much more than the front of the mouth or even a little lower down into the esophagus itself, the fauces is a site where the communication between organs may readily become manifest.”

Wilson thinks about this type of corporeal communication as “organ speech a biological performative [that] enacts the events it only appear to be symbolizing.” Hysterical actions, like the excessive crying, coughing, and screaming of Sycamore, Bauer, and Gleizes are examples of the biological performative of organ speech, where the action and reactions of the body provide palimpsestic traces of how the body endures sexual violence.

This understanding of hysteria becomes a way in which to access, represent and analyze how sexual violence and the reactions, resiliences and resistances to it are embedded within the bodies of those who have experienced sexual violence, the “mindedness of viscera.” Different part of the body create different forms of consciousness surrounding experiences of sexual violence, a repertoire that exists beyond language, only comprehensible through the evocation of corporeal feelings. What is hard to put into words about sexual violence is related to how and why we dissociate from it, how the body incorporates what it cannot handle mentally. Dissociation is thus an adaptive mechanism, like the dissociative abilities described by Sycamore, that reflect survival strategies to create emotional and psychic distance from past, current, and future physical and/or sexual violence. This distance becomes a leveraging device against the

203 Wilson, Gut Feminism, 61.
204 Ibid., 71.
205 Ibid., 47.
repetitive violence within day-to-day existence which is capable of triggering the excesses of memory trauma can leave within the body as sources of pain or discomfort. The boundary between the world and the corporeal memory hidden underneath the skin is precarious. Medical and biological paradigms have struggled to make sense of the intricate connections between the body and mind, and the diagnosis doctors have given to Sycamore’s pain has shifted over the years: from a repetitive stress injury to cystic fibrosis, to fibromyalgia, a syndrome characterized by fatigue, muscle pain and tenderness. Sycamore’s aching reflects how growing up in a constant state of fear, danger, stress, and/or pain creates an excess of emotionality solidified through years of unrecognized abuse and continual stress recorded within the fibers, muscles, and joints of the body, the corporeal recording “on what it is the body comes to know in states of extreme psychological distress.” Sycamore’s bodily discomfort reflects the physicality of the effects of sexual violence, and the various ways in which these emotions manifest, forcing a recognition of sexual violence’s everyday existence. The materiality of Sycamore’s pain, the continual way in which it impinges on her life constructs a hysterical understanding of sexual trauma which sees the effects of sexual violence as concrete and perceptible gestures, pains, movements, actions, and feelings. The corporeal dimensions of emotion manifest in the bodies of Sycamore, Gleizes, and Bauer, that ache in particular places, move in peculiar ways, and live within the altered temporality of trauma.

While this pain has negative impacts upon Sycamore’s life, she also uses it as a guiding map to her body, using the discomfort to navigate new ways of feeling and

206 Sycamore, personal correspondence with Author, March 2016.
207 Wilson, Gut Feminism, 51.
connecting. Her experiences as a sex worker reimagines sexual encounters both through fantasy and reality as different from the violence she encountered in her childhood:

I stayed conscious of when I would start to float up to the ceiling and then I’d focus on the pleasurable parts to bring myself back: the smoothness of skin, the intimacy of pressure, the feeling of his hand on the back of my head. I learned how to set boundaries using my own movements as a guide.  

Sycamore uses the physicality of others to ground herself in her own body. She is aware of her ability to dissociate, and thus able to utilize the evacuation of the body through disassociation, “the way my mind could shift into my body a sudden calm a lightness an opening.” The materiality, the feeling and pressure of skin touching skin, helps Sycamore feel her own body, and thus utilize her reactions and gestures as markers of desire and/or tension. Sycamore’s experience of sex work helps her harness the power of her sexuality and channel that control into other forms of relations with friends and lovers. Sycamore learns to let go of her body in a new way, to experience the pleasurable forms of intercorporeality, the different ways of holding everything in can feel. “Making out in the way that your whole head becomes your tongue and your nose and the other person’s hands it was so much fun to hold hands on the street and hold each other in bed we were holding everything.”  

This form of letting go does not envision a loss or dissociation but a form of extended corporeality that allows for feelings of touch that are physical, mental, and emotional. Holding everything with another moves beyond the way Sycamore holds things in, “just like my father’s rage.” Instead, holding everything here is envisioned as something distributed together, where the things held are shared and communal, creating closeness rather than distance. Within these relationships, Sycamore learns how to utilize what she holds within her body, instead of letting it overcome her.

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208 Sycamore, End, 90.
209 Sycamore, End, 45.
210 Ibid., 51.
211 Ibid., 65.
The affect physicalized by Sycamore allows a reading of hysterical acts that engages these gestures not as metaphors or psychoanalytic markers of trauma, but as the embodied knowledge of reactions toward sexual violence.

**I FEEL REAL WHEN YOU TOUCH ME**

Throughout Sycamore’s work, the physicality of emotion becomes a way to form vibrant, almost instantaneous connections with other people who have experienced sexual violence. The foundation of these relationships are often built through the ‘negative’ emotions associated with sexual violence: sadness, terror, shame, and guilt. Experiencing these emotions with others allows Sycamore to feel them in new ways. “Sad was one of the ways we connected, we could finally say it—every day was another opportunity to break down, and to break down the breaking down, and this didn’t necessarily feel hopeful but it felt, we felt, we were feeling.”212 The sadness Sycamore describes, while not quite hopeful, is transformative, allowing her to feel the full depth and range of emotion stored in her body over years of abuse. Sadness becomes a method for Sycamore and her friends to feel together, to validate each other’s experiences, to not feel alone. These connections create feelings of security and safety, enough for these relationships to “become home because I had finally felt it, felt it for the first time, felt.”213 The feeling of home that Sycamore creates is made through the potential in sharing, and holding feelings, “in breaking down” together. This double rupture of “breaking down the breaking down” has Sycamore and her friends exploding together, where breaking down becomes a way of becoming something else, of feeling something differently, of finding new ways to inhabit feelings.

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212 Sycamore, The End of San Francisco, 76.
213 Ibid.,110.
The bonds Sycamore forms with both friends and lovers create new arrangements of relationships, new ways to touch, hold and share feelings. Here, relationships do not fit a particular model but are made and remade, crafted through the intercorporeal bonds of hysterical feelings, emotions so physical they become material, hysterical in the sense that their expression knows no limitation. Sycamore writes, “and there was this way that we held each other and we held each other’s rage, that was the key, the key that made us us.”\(^{214}\) Rage becomes productive here, a way to connect and feel another, to turn rage into a site of potentiality. As Audre Lorde wrote, “Every women has a well-stocked arsenal of anger (potentially) useful against those oppressions, personal and institutional, which brought that anger into being. Focused with precision it can become a powerful source of energy serving progress and change.”\(^{215}\) The combining of mutual feelings of rage creates something new, “the key that made us us,” a materialization of amorphous feeling through connection. The bonds Sycamore creates with other people who have experienced sexual violence, become queer as they disrupt normative models of closeness and relation. In *Pulling Taffy*, Sycamore writes, “Joanne and I shared our anger like a hug.”\(^{216}\) For Sycamore, shared anger provides a point of attachment, a modality of contact that is strong enough to become material without being concrete.\(^{217}\) Since sexual violence is associated with touch, seemingly innocent forms of physical intimacy often have negative connotations for survivors, or trigger unwanted emotional responses. Experiences of sexual violence reverberate throughout daily encounters and force a perpetual confrontation with corporeal memories. The shared feelings of queer survivor

\(^{214}\) Sycamore, The End of San Francisco, 96  
\(^{216}\) Sycamore, Pulling Taffy, 29.  
kinship allow the physical manifestation of emotion, much like the performances of Gleizes and Bauer. The tangibility of emotion short of solidification creates the possibility for its transformation. For Sycamore, sharing anger like a hug allows emotions to make contact, to create new affects through their embrace. This dual recognition allows the disregarded effects of trauma to become perceptible as something that can be shared. Within this manifestation of apprehension, lividity becomes a basis for a unique form of affinity and mutuality. These new forms of intimacy allow survivors to create new ways to touch without feeling threatened. These forms of attachment create an alternative world derived from hysterical memory, similar to the aperture created by Gleizes’s female masculinity or Bauer’s relationship with Peppina, which likewise enabled them to produce different forms of relationality. The trouble caused by the queer hysterical body, the disturbances opened up in normative modes of relating, creates new modalities of intimacy from feelings that usually produce seclusion. When survivors hold and attend to each other’s anger, they share the hysterical memory created by sexual violence, and produce forms of queer kinship that feel like home.

Sycamore’s work describes the potentialities and corporeal labor of histrionics as a mechanism for navigating the continual residues of sexual violence and turning the excess imbued within this visibility into potential modes of affiliation with other people who have experienced sexual violence. The relations survivors build with each other form alternative modes of family. Hysterical memories are foundational to this form of kinship. “Feelings of kinship” are described by David Eng as “collective, communal, and consensual affiliations as well as psychic, affective and visceral bonds.”

Relationships built around sexual trauma revel and share in the wisdom attained growing up in abusive

situations creating these psychic, affective, and visceral ties. The relationships in *Pulling Taffy* and *The End of S. F.* become an anchor that allows the hysterical body of the survivor to get lost in the physicality of emotional force. These connections, built from analogous experiences of trauma, have the ability to counter the loneliness endemic to growing up in families altered through sexual violence and abuse. These connections offer not a promise to be healed, but an acknowledgment of trauma that can be cathartic and restorative, when points of deviation act as points of attachment. Sycamore writes, 

> We would hold each other in the way that meant it was okay if nothing was possible and it was okay if everything was possible and then it was just okay. We would sob together, really sob—Zee held me in that way too but then it would fall apart. With Joanne it felt like always.

The relationships Sycamore forms with friends and lovers allow both nothing and everything to be possible, responses directly tied to the intensity of feelings in the present. These relationships offer potentialities for different models of what intimacy can look and feel like. Sycamore leaves room in the utopic depiction of these relationships for problems, for them to “fall apart” as need be. Allowing the fruitful exchange of negative emotions positions the deleterious effects of trauma as potentialities for queer forms of connection. The transformative relationality in these moments happen when it “felt like always” where kinships create and maintain a sense of possibility through their interactions, that provide as much emotional intensity as romantic and sexual relationships. These kinships reflect Eve Sedgwick’s writing on falling in love, “It’s a matter of suddenly, globally, “knowing” that another person represents your only access to some vitally transmissible truth or radiantly heightened mode of perception,

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220 Sycamore, The End of San Francisco, 102.
and that if you lose the threat of this intimacy, both your soul and the whole world
might subsist forever in some desert-like state of ontological impoverishment.”221 In the
moments where nothing and everything is possible, in the relationships that feel like
always, Sycamore finds these “transmissible truths” and “radiantly heightened modes of
perception” where Sycamore and her friend able to “break down the breaking down.”222
These modalities of transferal are created within the rigorous intimacies Sycamore
experiences with other people who have endured sexual violence, the new ways they
allow each other make new spaces for their relation, “And then I spent a month in her
room, and we shared a bed and it never felt crowded.”223 The importance of these
kinships are evident through both *The End of San Francisco* and *Pulling Taffy*, both of
which are dedicated to JoAnne, an act immortalizing the impact of this relationship on
Sycamore’s writing.

Within these new forms of kinship, the experiences of trauma open up new forms
of relationality. “Maybe that was it—we were finally finding a place where we could be
dramatic and then talk about it: my body felt like broken shards…”224 The body that
‘feels like broken shards’ materializes knowledge Sycamore crafted during the violence
of their youth. This feeling recalls the moment when they are back in their childhood
home, viewing the chimney where she “used to imagine floating away, away from him
splitting me open.”225 The body that feels like broken shards works to articulate the
feeling of sexual trauma, how the body can be spliced open yet remain whole. The body
split open from sexual violence here re-imagines the pain within experiences of sexual

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223 Ibid., 96.
224 Ibid., 78.
225 Ibid., 15.
violence as a set of weaponry within the body. The body made up of broken shards is always able to be assembled and reassembled. It also always carries the potential to cut. To feel the body composed of shards is to materialize the places of pain in and on the body, acknowledging how we hold violence beneath our skin, comprehending the gestures, motions, and movements of the body as a visceral history.

The body built out of shards forms layers of protection out of this history. The geometry of this fragmented body crafts endless vertices for connection, elaboration, and expansion between people who have endured sexual violence. The visceral knowledge of the body built out of shards becomes communicable through these relationships. “Until I met Laurie, who said your shards match mine, and we broke together. Until I met Joanne, who said we can spit out the glass and the blood like bubbles.”226 These relationships offer a comprehension that shatters the perception that brokenness implies fragility, the doubling of the breakage representing a point of strength. The hurt within the body, the blood and glass, become something new through these connections, able to become bubbles, to transform into something unexpected. The potency of this bond allows survivors to “encounter where [they] don’t make sense without being defeated by it.”227 The incoherence of sexual violence, its disparate and wide-ranging affects, find legibility within relationships built between survivors. When survivors see each other’s trauma it becomes decipherable beyond the framework of the personal. The recognition of matching shards between survivors reimagines hetero-familial notions of resemblance as that which can be attained through matching shards of similar experiences. The alleviation this cognizance provides allows them to indulge in the break together.

226 Sycamore, Pulling Taffy, 25.
227 Lauren Gail Berlant and Lee Edelman, Sex, or the Unbearable (Durham: Duke University Press, 2014), 54.
refusing wholeness, and delighting in the breakage, the queer form of kinship created in Sycamore’s world provides a counterpoint to stereotypical understandings of sexual violence as an affliction to get over. The solace created through these relationships allows being broken to become a part of being whole, reclaiming the inheritance of the hysterical body to provide alternative forms of being, knowing, and relating. Sycamore writes “Those of us who grew up in dangerous families spend the rest of our lives figuring out what happened, piecing together the clues. Piecing together ourselves.” The shards that match create new patterns of configuration allowing an elucidation of the past to emerge through the sensorial engagement between hysterical bodies. Within these hysterical kinships lies a deep sense of recognition that moves beyond mere visibility—past acceptance to appreciation. For what are perceived to be flaws in intimacy, items on a diagnostic scale, barbs of emotional distance, transform into markers of immediacy and attachment between survivors. The development of these new modalities of kinship and intimacy function as livelihood strategies that escape the disciplining of the body through paradigms of mental illness. The cultivation of these new worlds and images of survival recalls the potentiality embodied within Gleizes’s butch escape, and Bauer’s enduring friendship. The determined visibility of queer hysteria is illuminated by past gestures of histrionics, catalyzing new forms of legibility and articulation for the effects of sexual violence. These hysterical sensibilities form new way of seeing that enable us to hear Gleizes’s scream when we see her image, to feel Bauer’s cough when we read of its repetitive occurrence, to feel our shards match up with Sycamore’s. These hysterical touches, across time and space, enable the enduring effects of sexual violence to feel real.

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228 Sycamore, Dangerous Families, 2.
The utopic possibility of queer kinship lies within the various and imaginative ways in which to attain it. The ungrounding of bodies forms a foundation for the strange effects of hysterical trauma. Queer kinship provides forms of relationality for these extraordinary and disconnected effects to be perceived. The inscription of hysterical memories by Sycamore, Gleizes, and Bauer provides the ground on which to build family with those whom their experiences seem to match, those whose bodies shift and change in response to their memories. The imaginaries of Gleizes, Bauer, and Sycamore are distant, yet their connections and congruity make them feel near. In nurturing anthologies that materialize queer knowledges regarding sexual violence, Sycamore enables forms of queer kinship between authors whose works creates a corpus for readers to engage.229 This chain ignites the “rigorous intimacy of understanding” through the recognition of queer hysteria, and another layer of kinship forms between readers and authors.230 The visibility of queer survivorship within contemporary literature is evident of the need and desire to continue to push against medicalized models of sexual trauma that ignore the way affective and corporeal responses to sexual violence are forms of resistance and resilience.

The stories that Sycamore tells work against the idea that after sexual violence “all that survives is the flesh”, turning the what survives into the basis for forms of expression.231 This limited understanding of sexual violence has been the focal point of writers like Dorothy Allison, an out survivor who credits the genealogy of her writing to black feminists and who herself is a part of the genealogy of writers like Sycamore. For

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229 Sycamore has also worked editing anthologies on writing by sex worker about their client and gender non-conformity.
survivors like Gleizes, Bauer, and Sycamore, the flesh is the foundation of their survival, and what lies beneath the skin becomes the basis from which they evoke their repertoire of survival methodologies. The seemingly random responses of the hysterical body open up new moments of connection, reflection, and knowledge. If it is hard to know trauma within language we must both stretch our available ways of thinking to create new ways to conceptualize, analyze, trauma and help prevent violence. When trauma becomes material through the body, through physiological affect, gestures, or vocalizations, we are given new tools to think about the effects of trauma and the visceral knowledge of survivors.

Imbibing notions of value into what is normatively cast as an ailment builds on performances of hysteria that reimagined symptoms as possibilities for survival. Building on this inheritance of visibility, queer hysteria crafts alternative modalities for survivors to see, feel, and touch one another. The kinship ties developed through these new avenues of perception become points of resistance to simplified understandings of healing as static points to be passed over. The world created by hysterically queer kinship bonds allows the visceral effects of sexual violence to feel real.
Conclusion: What Survives-Flight and the Hysterical Imaginary

Whenever the writing of this thesis overwhelmed me, or I questioned its purpose or utility, I only had to glance at the world around me to see the ways in which people who have experienced sexual violence are still treated as devalued, their knowledges and experience erased by court cases, legal limitations, and the endless variety of ways victim-blaming is currently being perpetuated. Despite the increase in survivors boldly coming forward and claiming their histories of sexual violence, taking control of their representation, they are still usually understood as victims, perpetually stained by sexual trauma. If the signification of sexual violence continues to be placed on the bodies of those who have experienced it, we must recognize the ways in which survivors are the authorities on their experiences, and the different forms of knowledge they hold within them. Bodies that experience sexual violence are bodies that matter, bodies that viscerally know and intimately understand the range of human emotional experiences.

While the stories in these chapters have proceeded chronologically, the advancement of time is not meant to illustrate a metaphorical progression of attitudes towards those who have experienced sexual violence. Rather, the multiple contexts and time periods is meant to illustrate that sexual violence, and the repertoire of corporeal adaptations and strategies to resist it are culturally and contextually specific to where and how sexual violence appears. Ending with a story set in the future allows to imagine survivors of sexual violence as part of the future, not frozen in the past, like queerness, the aftermath of sexual violence can become part of an “identity that can be distilled from the past and used to imagine a future.”

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232 Munoz, Cruising Utopia, 1.
Leah Lakshmi Piepzna-Samarasinha is a queer femme survivor, activist, poet, and writer whose work I first became acquainted with in the anthology *Brazen Femme: Queering Femininity*. I was so taken with her contribution, after reading it, I immediately flipped to her biography in the back, which mentioned a (at the time) soon to be released book entitled *Dangerous Families: Queer Writing on Surviving Abuse*. I was familiar with the editor, Mattilda Bernstein Sycamore through the anthology *That's Revolting*. Finding and reading *Dangerous Families* (and then the rest of Sycamore’s work) began the thought processes that have led to this thesis. In this way the work of Piepzna-Samarasinha is an integral part in the genealogy of my own.

Leah Lakshmi Piepzna-Samarasinha’s short story “children who fly” published in the anthology *Octavia’s Brood: Science Fiction from Social Justice Movements* exemplifies the way the visceral survival methodologies of those who have experienced sexual violence are new ways of seeing and relating to the world. The anthology encouraged social justice activists and writers to use “their everyday realities and experiences of changing the world” to “form the foundation of the fantastic and…build a future where the fantastic liberates the mundane.” Piepzna-Samarasinha’s story is set in 2032, in a post-apocalyptic world beset by environmental disasters exacerbated by human warfare. In this world created by trauma, the dissociative dexterity of survivors of sexual violence have been honed into a valuable skill and is seen as a source of power, agency, and pleasure.

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The multiple temporalities in “children who fly” enable us to connect the past where “it was hard for the ancestors to think of dissociation as positive,” and “everyone was still ashamed. They didn’t have words yet,” (instead “They had solid bodies of rage and trauma that never had a chance to be whisper-shouted out. Just got passed on” (249-250). The past and present are connected by familial links of generational trauma, and the language of kinship and intimacy. Dissociation, “the thing that makes it so you can’t feel it when you fuck” becomes a possible answer to the question:

What happens when you are raped early and young? When your amygdala and cerebral cortex are still forming? When your lizard brain and limbic system are raw and open, still governing your body’s choices? Instinct, smell, and memory. What happens when your pussy and cock are touched in a way that breaks open that third eye into a canal you can escape through. (250)

Escape here is again tied to imaginative practice, one that is intrinsic to corporeal systems, reactions and adaptions of the body to its environment. The multiplicity intrinsic to the body is enabled to attune to feeling the “warmth in your belly like tiger lilies smeared with yellow pollen from love and safety and sex, the stank meat-locker chill of cold blood when you leave through your left armpit…” As the past pushes into the future, the uncontrollable nature of dissociation changes, “you can call those memories and you come rushing back, but you can also call them up, go deep inside the gut, and then spiral out through the ladder of your breath. All those years post you know how to leave your body. Now go up.” (251) Dissociative survival can be actively used, fully explored as a methodology of pleasure and release: “Kumari closes her eyes, and her spirit leaves her body like all those years ago, but on purpose this time. All the way out her right foot. She can see it trickle out, on purpose. Not gray dead meat. Orange tiger lilies, smeared with pollen. She is on the ceiling of the sky, watching. It is so effortless, delicious.”

236 All italics in original.
The power of dissociation here lies within the power of imagination, able to become a conduit of pleasure, a way to connect and engage with the senses. This survival tactic has morphed into something that can be controlled and utilized. These ways of being are acknowledged as a direct response towards trauma, both of personal violence and public violence, of “all the planets open trauma, has been birthed in them too.” (253) The world Piepzna-Samarasinha’s story creates registers the response to violence at “the cellular levels of affect” where “trauma is unfaithful to patterns, triggered by the senses.”237 These new methods of perception are recorded in ways that “expand[s] vision and thus leans towards a new kind of empiricism in which the senses are crossed.”238 The story ends with the narrator’s perception “Someone thinks or feels towards her. She experiences it as peacock feathers, azure breath, the ghost of a word.” (253) These intuitions and perceptions can only be registered within multiple fields of sensory engagement that exist in a simultaneous connection, expanding how we see and interpret the world.

The “children who fly” in Piepzna-Samarasinha’s story are those that learn to take seriously their corporeal knowledge regarding the creation of safety, security, and even pleasure. Their experiences of sexual violence are seen as directly impacting the creation of these methodologies of survival which are sustained, nurtured and refined by the imagination and celebrated by kinships based in “the rigorous intimacy of understanding” of what it takes to imagine the world differently. 239 The wondrous capacity of survivors crafts queer hysteria as a modality of speculative fiction enacted by the body, allowing an

239 Interview with author, Mattilda Bernstein Sycamore, March 30, 2015.
endless repertoire of corporeal articulations capable of making sexual violence and its effects visible, discernable, and meaningful.
Bibliography


Vita

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This thesis was typed by the author.