

Hysteric: Women's Histories and the Psychoanalytic Aesthetic from Charcot to Rego

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ABSTRACT

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Paula Rego (b. 1935) is a Portuguese-British artist whose work has been significantly informed by histories of feminism. Her responsive and reactive work often takes direct inspiration from historic events. In her 2004 series of pastels titled *Possession I-VII*, Rego adapts photographs commissioned by Jean-Martin Charcot of patients at the Salpêtrière Hospital, positioning her model, Lila Nunes, on an analytic couch. In doing so, Rego utilises the aesthetics and history of psychoanalysis in a careful re-adaptation, allowing us to reconsider what it is to depict a subject in this way. This thesis examines the Charcot photographs, as well as the depictions of Dora by Hélène Cixous and Sigmund Freud as means to trace the development and the changing perceptions of “the hysteric” or “madwoman”. By considering the history of this figure, her representations, and the ways she has been treated through the nineteenth to twenty-first centuries, I aim to shed new light on how this history effects the way we think about women's pain, agency, emotions, subjectivity, sexuality, and ways in which they take up space in our own contemporary society.

KEYWORDS

Psychoanalysis, Hysteria, Embodiment, Art Historiography, Authorship, Second-Wave Feminism.

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TABLE OF CONTENTS

List of Figures	vi
Part I – Rego.....	1
Part II – Marie and Augustine.....	13
Part III – Dora.....	28
Part IV – Nunes	40
Bibliography.....	45
Figures	47

LIST OF FIGURES

Figure 1 – Paula Rego, *Untitled (The Abortion Pastels)*, 1998. Pastel On Paper, three 100cm x 110 cm panels. Source: <https://www.seattleartistleague.com/2022/06/24/paula-regos-abortion-series/>. Accessed January 8, 2024.

Figure 2 – Paula Rego, *Dog Woman*, 1994. Pastel on Canvas, 120cm x 160cm. Source: <https://www.wikiart.org/en/paula-rego/dog-woman-1994> . Accessed January 8, 2024.

Figure 3 – Agnolo Bronzino, *Portrait of a Woman with a Lapdog*, 1532-33. Oil on Panel, 90cm x 70cm. Source: <https://www.metmuseum.org/art/collection/search/821851> . Accessed January 8, 2024.

Figure 4 – Paula Rego, *Possession I*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 184.

Figure 5 – Paula Rego, *Possession II*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 185.

Figure 6 - Paula Rego, *Possession III*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 186.

Figure 7 - Paula Rego, *Possession IV*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 187.

Figure 8 – Paula Rego, *Possession V*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 188.

Figure 9 - Paula Rego, *Possession VI*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 189.

Figure 10 - Paula Rego, *Possession VII*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 191.

Figure 11 - Paul Regnard, *Hystero-Epilepsy: Normal State*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

Figure 12 - Paul Regnard, *Hystero-Epilepsy: Contraction*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

Figure 13 - Paul Regnard, *Passionate Attitudes: Amorous Supplication*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

Figure 14 - Paul Regnard, *Passionate Attitudes: Eroticism*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

Figure 15 – Paul Regnard, *Passionate Attitudes: Ecstasy*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

Figure 16 – André Brouillet, *A Clinical lesson at the Salpêtrière*, 1887. Oil on Panel, 290cm x 430cm. Source : https://en.wikipedia.org/wiki/A_Clinical_Lesson_at_the_Salpêtrière . Accessed January 8, 2024.

Figure 17 – View of the Analytic Couch with Brouillet Lithograph at the Freud Museum London. Source: <https://www.freud.org.uk> . Accessed March 22, 2024.

Figure 18 - Image from a performance of *Portrait de Dora* on March 25, 1983 at Théâtre de Quat'sous, Montréal. Directed by Denis Marleau. Source: <https://ubucc.ca/creation/le-portrait-de-dora/> . Accessed January 8, 2024.

Figure 19 - Image from a performance of *Portrait de Dora* on March 25, 1983 at Théâtre de Quat'sous, Montréal. Directed by Denis Marleau. Source: <https://ubucc.ca/creation/le-portrait-de-dora/> . Accessed January 8, 2024.

Figure 20 - *Sarah Bernhardt in La Dame aux Camélias*, 1881. Source : <https://www.thoughtco.com/biography-of-sarah-bernhardt-4171973> . Accessed January 8, 2024.

Figure 21 – Paul Regnard, *Passionate Attitudes: Crucifixion*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

Figure 22 - Paula Rego, *The Artist in Her Studio*, 1993. Acrylic Paint on Canvas, 180 cm x 130cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 142.

I - REGO

Paula Rego (1935-2022) was a Portuguese-British artist, active from the mid-1950s until the late 2000s.¹ Working primarily in pastel on monumental scales, Rego's work reflects on the visual cultures, and representations of women's bodies, freedoms, histories, and the patriarchal forces that impact these. Her work reconsiders women's representation in the art historical canon as brides, mothers, dancers, nudes, and pulls out the intimate and personal experiences of joy, solidarity, sensuality, and agency as well as the disillusionment, anxiety, and pain, that these women endure under patriarchy.

Much of her work since the 1970s has been directly influenced by the second wave feminist movement, responding directly to the political changes during this period, and engaging with the same figures, aesthetics and thinkers that were prominent in the movement's literature.² Rego's work focuses on the emotional lives of her models, choosing a feminine archetype and making her startlingly real, and human as opposed to echoing the ethereal feminine beauty that dictated women's appearances throughout most of art history. In humanising her subjects and drawing on references from folk tales, literature, and other mainstream elements of visual culture,³ Rego highlights the ways in which feminism has been conceptualised and represented throughout the movement's development in the twentieth century.

By examining her role within this movement and place in the art historical canon as author and subject, I will elucidate the ways in which this authorship has influenced our conceptualisation of women's roles in art and archives. I will do so by focusing primarily on

¹ Zuzana Flašková et al., *Paula Rego*, ed. Elena Crippa (Tate Publishing, 2021), 211.

² *Ibid.*, 48.

³ *Ibid.*, 38.

a series of 7 pastels Rego created in 2004 titled *Possession I-VII*, unpacking the history Rego references, and examining why and how her work differs from the material she references.

In order to give a sense of Rego's work leading up to her creation of *Possession*, I would like to briefly discuss some of her earlier figurative work. Her untitled series often called *The Abortion Pastels* (1998-1999) which was created over a span of six months following an unconstitutional referendum on the legalisation of abortion in Rego's home country of Portugal. Although the medical procedure had already been legalised, the Portuguese parliament held a second and unconstitutional referendum under massive pressure from the Catholic Church. This was additionally controversial as by the time of the 1998 referendum, democracy had only recently been established following the end of the Estado Novo, the Portuguese dictatorship lead by Antonio Salazar, only 24 years earlier in 1974.⁴ The fact that the referendum took place, and further, that abortion was subsequently de-legalised demonstrated the enduring grip of fascism and of the Catholic Church over the new, supposedly free and democratic Portuguese government. The referendum resulted in a suspension of the law legalising abortion pending its resubmission to the Portuguese Parliament⁵ as well as a continued disregard for the safety, autonomy, and agency of Portuguese women. Rego addresses this injustice through the ten monumental canvases that make up *The Abortion Pastels*.

The intimate, painful, dangerous, and tragic moments that resulted from the denial of access to safe abortion procedure are made monumental, real, and confrontational by Rego's

⁴ Márcia Oliveira, "Is This Desire? Power, Politics and Sexuality in Paula Rego's Extreme Bodies," *Journal of Romance Studies* 15, no. 2 (2015): 22–39, <https://doi.org/10.3167/jrs.2015.150202>, 37.

⁵ Maria Manuel Lisboa, *Essays on Paula Rego: Smile When You Think about Hell* (Cambridge, UK: Open Book Publishers, 2019), 201.

women. The women in these canvases – dressed in work clothes, school uniforms, formalwear, or having removed some of their clothing to make themselves more comfortable – are not shown as victims but rather as explicitly free, defiant, and expressing the power that they hold over their own bodies as they undergo an illegal abortion. The pain of their procedures is transformed into anger toward the patriarchal, fascist, and religious forces that limit their control over their own bodies.⁶ Their unique experiences are then made to humanise and individualise the wider historical moment in terms of those that it effects the most. These women at once show us themselves, their histories, and their own individual pain, while embodying the more universal emotional and physical pain that patriarchy can inflict. These images are not graphic, they don't show us the blood or gore involved in illegal abortion but are made profoundly affecting through the stories and violences that they imply. They are described by Maria Manuel Lisboa in the catalogue for Rego's Tate retrospective as "images that bespeak sorrowful narratives: one of a life unachieved, and one of a living being unready to bear another".⁷ The models in the triptych [Fig. 1] included in the series look directly at us, their expressions revealing their frustration and defiance even more than their physical discomfort. Their reversal of what could otherwise be a harmfully voyeuristic gaze makes these pastels confrontational, and consequently, deeply engaged with their contemporary political moment.

The *Dog Women* series is also an example of Rego's confrontational work. *Dog Woman* [Fig. 2] directly references the ways in which women have been depicted throughout art history. Dogs have been symbolic tools to signify devotion and loyalty. These being traits often associated with good wives and mothers, they became ubiquitous in portraits of women from

⁶ Ibid., 202.

⁷ Zuzana Flašková et al., *Paula Rego*, ed. Elena Crippa (Tate Publishing, 2021), 44.

the renaissance onward. Bronzino's *Portrait of a Woman with a Lapdog* [Fig. 3] shows a young Florentine woman in a sumptuous red dress with a small dog seated in her lap. Dogs become common in rococo portraits of women such as in Fragonard's *The Love Letter* where a young woman sits at her writing desk, clutching the flowers and letter given to her by her lover while her dog sits behind her. In both instances, the dogs are used to edify and ennoble the women they sit with. Bronzino's portrait would have likely been commissioned around the occasion of the sitter's wedding, and consequently the dog signifies the woman's loyalty to her family and to her husband. Fragonard's dog, though visibly tired, highlights the devotion of his owner, and the reciprocal devotion of her lover.

Rego, however, asks us to reconsider some of the other qualities that a dog might possess like ferocity, vehemence, or violence. She collapses the dog and the model in to one body and the result is not timid and sweet, but rather an angry, defiant, sometimes scared, and scary.

Beginning with a pencil drawing in 1952, Rego would continually return to this idea. Rego's 1994 *Dog Woman* is backed up against the wall, she claws at the floor and bears her teeth. Here, the dog is used not to enforce the traditional expectations of femininity, but to subvert them, having the model engage in an active resistance.

Rego's formal technique further lends itself to this creation of agency. Several layers of pastel are drawn on the canvas and slowly build up to create an image, adding new depth and layers at each pass. As argued by art historian Marcia Oliveira, this recalls the materiality and consequent implicit physicality of Rego's earlier works which were done in collage and paint. The pastel which holds a record of the artist's gesture gives the figures in Rego's portraits a constant sense of their development and becoming.⁸ They are not confined physically or

⁸ Márcia Oliveira, "Is This Desire? Power, Politics and Sexuality in Paula Rego's Extreme Bodies", 31.

temporally by their representations. The pastel goes right to the edge of the paper, giving a sense that the image continues beyond where it has been cut off by the frame. It also gives a distinct, waxy quality to the model's skin; the women Rego depicts are not pale and soft like the academic depictions of reclining women that we see throughout most of art history. The pastel lends Rego's women a roughness. They can look a little red or swollen, and possess much more realistic androgyny, allowing them to embody a much more assertive, and realistic sexuality.

These sentiments underlie much of her work as Rego challenges us to reconsider how we think about the women that we see depicted in art. She asks us to consider the emotions that they have been forced to contain, the aspects of their lives that have never been recorded and that we will never know about, and the voices that have been silenced. Rego's women radically reclaim the space that they have been denied. They are at once angry, free, sexual, and clever. They dance, they dress, they sleep, they mourn, displaying incredible subjectivity and complexity that the archetypes they reference were never allowed to embody by those who had previously represented them.

The focus of this thesis is to examine specifically the archetype of "The Madwoman" or "Hysteric". Rego's *Possession Series* is a set of seven 5-foot by 3.5-foot pastel canvases created in 2004.⁹ In these, Rego references the visual heritage of psychoanalysis: the analytic couch and the model's poses all reference the early history of psychoanalytic theory. Rego's role as an inheritor of this cultural history is the focus of this project. By examining the origins of the visual language that Rego uses in this series and tracing its development, I consider how her role differs or is similar to that of other artists, thinkers, and subjects who

⁹ Zuzana Flašková et al., *Paula Rego*, ed. Elena Crippa (Tate Publishing, 2021), 184 - 191.

have had a hand in the development of the ideas we have about women's mental health, bodies, and sexuality. I aim to highlight how strategic references and authorship, like the kind exercised by Rego, are valuable tools that can aid us as we continue to unearth the histories of those who have been systemically silenced.

The scope of this project is necessarily limited, and as such, this research could be developed further as to examine the countless other people who have had their agency and personhood denied, and the complexities of their lives and stories omitted from the archive. I will be telling a very White story, when in reality far more historical and archival violence has been inflicted on people of colour. Many artists have undertaken the invaluable task of re-imagining an alternative, complete archive, creating beautiful, compelling, and deeply impactful work in the process. I invite readers to consider the work of Yuki Kihara, Yinka Shonibare, Kent Monkman, Kara Walker, Lisa Reihana and Kehinde Wiley with this awareness of the archive in mind and listen to the rich and complex stories that they posit in return.

Possession features a woman, modelled by Rego's frequent collaborator Lila Nunes, in a purple dress reclining in various positions on a beige analytic couch. In the first panel [Fig. 4], she lies on her back, looking through at the back of the couch next to her with her knees splayed apart and part of her dress unbuttoned. In the second panel [Fig. 5], she has kicked off her socks, she looks in the opposite direction past the bounds of the canvas. Her legs have tensed up and so have her arms as she grips the front of her open shirt. A leopard pelt is also now draped over the back of the couch where one of the cushions used to be and a couple pomegranates lie on the floor next to it. By the third panel [Fig. 6], the model has become even more tense, perhaps in response to the leather strap resembling a restraint that has now

been placed over the bare back of the couch. We can also now see that the pillows have been thrown on to the ground nearby. In the fourth panel [Fig. 7], she seems to have relaxed a little. One hand grips the bar at the back of the couch, but the rest of her body appears to have gone limp as her arms and legs spill off the edges of the couch. She moves to the far side of the couch in the next panel [Fig. 8], as she uses the back rest to keep herself from falling off the edge. She looks down her nose at us while her head is still tilted back, as though we have interrupted her introspection. Next [Fig. 9], she plants her feet on the ground and leans the rest of her upper body back to rest horizontally across the couch. Her head spills off the edge and her eyes look down at the floor behind her. In the final panel [Fig. 10], the model even more explicitly acknowledges our presence as her physicality changes to appear more open. The large pillow that started off as the back rest has returned and is placed behind the model's waist as she reclines over it. Her arms are behind the pillow to help prop herself up, her dress is arranged nicely, and she looks right at us, smirking.

Throughout the series there are moments of intensity and moments of relaxation as we look through these snapshots from what seems to be just one psychoanalytic session. She tosses and turns, she looks away and back, she contracts and relaxes (sometimes all at once), moulding the couch and her dress to accommodate and support her. By the end of the series as she lays back, looks to us and smiles flirtatiously, the couch mostly resembles a bed, drawing on allusions to sexuality, as well as the medical beds that serve as the backdrop in most other depictions of hysteric women. The medical bed then paradoxically becomes a site at once used for personal introspection and healing, but also voyeurism, and finally, the implicit invitation of to the viewer to join the model in it.

In early therapy practices – notably those of Sigmund Freud - patients are encouraged to lie on an analytic couch. This posture is analysed in depth by Nathan Kravis in *On the Couch: A Repressed History of the Analytic Couch from Plato to Freud*. Kravis traces the origin of the therapy couch to asylum treatments for hysteria including rest cures, but also hypnosis, massage, and electrotherapy, which were all forms of psychological “medicine” that Freud practised in the 1880s and were developed in large part by Jean-Martin Charcot.¹⁰ The shape of the analytic couch also takes for reference typically feminine furniture design. Given the popularity of the chaise longue during the eighteenth century among women of the French aristocracy, the recumbent couch became a frequent setting for feminine portraiture, which also often took on sexual connotations.

This is the posture adopted by the figure in *Possession*. What differs, however, is the position of the viewer. During treatment, Freud would sit behind the patient, out of view, at once eroticising his own invisibility as the patient practically lays their head in his lap and maintaining a distinct lack of presence intended to encourage the patient to only focus on their own mind.¹¹ Rego puts us in the opposite spot at the foot of the couch, looking down toward the patient, reversing the clinical opacity cultivated by Freud. In Rego’s pastels, we are allowed into the space that would otherwise be reserved for the patient’s introspective gaze as to share in her experiences. She is exposed and a subject of observation, but not necessarily vulnerable as she exercises power through the extremity of her movements and the space she takes up, as well as her suggestive and confrontational reversal of our gaze in the final panel.

¹⁰ Nathan Kravis, *On the Couch: A Repressed History of the Analytic Couch from Plato to Freud* (Cambridge, MA: The MIT Press, 2017), 116.

¹¹ Diana Fuss, “Freud’s Ear: Berggasse 19, Vienna, Austria,” essay, in *The Sense of an Interior: Four Rooms and the Writers That Shaped Them* (Hoboken, NJ: Taylor and Francis, 2012), 42.

These paradoxically sexual, clinical, and extreme aesthetics that Rego engages with are shaped in large part by the lives and depictions of three women.¹² They are Louise-Augustine Gleizes, Marie Wittmann, and Dora¹³ and are the subjects of my following two sections. In re-examining their stories and considering the aspects of their lives that have been foundational to the creation of the madwoman/hysteric archetype, I hope to shed light on the ways in which the records that were kept about their lives have inherent biases that present a tragically reductive picture of what it is to be a woman suffering from a mental illness.

Louise-Augustine Gleizes (1861 - 1907) and Marie Wittmann (1859 - 1913) were both patients at the Salpêtrière Hospital in Paris in the late nineteenth century. Louise-Augustine, most often called Augustine in later records, was admitted to the Salpêtrière as a teenager to be treated for hysteria. Around the same time, Jean-Martin Charcot, the director of the hospital, wanted to begin photographing the development of hysteric episodes in female patients¹⁴ to be published for study in a series of volumes that would later become the *Iconographie Photographique de la Salpêtrière*.¹⁵ The images of Augustine that resulted were very widely circulated and Augustine, consequently, became a kind of celebrity. The photographs show her modelling her condition, only partially dressed, and with captions that write in a sexual context for her condition.¹⁶ Marie's picture was also taken and published in the *Iconographie Photographique de la Salpêtrière*, but she is better known for her

¹² Ruth Rosengarten, "An Impossible Love: Subjection and Embodiment in Paula Rego's *Possession*." *Art History* 30, no. 1 (2007).

¹³ "Dora" is an alias used by Sigmund Freud to describe the subject of his *Case Study on Hysteria*. The true name of the patient is known, but I am consciously choosing not to use it here because - unlike Augustine and Marie whose names are lost due to the laziness of the men around them - Dora, a bourgeois Viennese woman from the turn of the century, in all likelihood, would not have wanted her real name associated with the case study, or the fact that she was attending therapy to be publicised. Thus, I will be maintaining this confidentiality.

¹⁴ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 145.

¹⁵ Désiré Magloire Bourneville and Paul Regnard, *Iconographie Photographique de La Salpêtrière: Service de M. Charcot* (Paris: Progrès médical, 1877).

¹⁶ Georges Didi-Huberman, *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (Cambridge, MA: The MIT Press, 2003), 138.

participation in Charcot's weekly lectures that took place at the adjoining École de la Salpêtrière. Here, a hysteric episode would be induced, and Marie would, in a sense, be made to perform the development of a hysteric seizure while Charcot explained its various phases.¹⁷ The illicit quality of both the photographic volumes and the weekly lectures, contributed to the overall reputation of the Salpêtrière as a site known perhaps more for the unsettling and perceived promiscuousness of its residents than for its actual medical work.

Dora was teenager living in Vienna who began treatment with Sigmund Freud at the insistence of her father after he found a suicide note that she had written.¹⁸ Dora's depression began following a series of events involving the husband of her father's mistress. He had made several sexual advances toward Dora when she was only fourteen years old, and when she told her family about this, they did nothing, continuing to put her in uncomfortable situations where she had to be around the pedophile who constantly harassed her. Freud was equally unhelpful in his treatment of Dora because he could not fathom why a teenage girl would be made uncomfortable by the advances of a much older man. Dora was understandably frustrated and disillusioned because her entire family – and now her doctor – were gaslighting her, and she ended her treatment with Freud early. In the case study that resulted from these sessions however, Freud paints Dora as a deeply emotional hysteric who ended her treatment because she had transferred the oedipal feeling she had for her father and his friend on to Freud himself.¹⁹ This functionally absolves Freud of any responsibility for failing to treat Dora, and her own story, her own feelings, fall victim to Freud's authority and consistent efforts to promote his own glowing intellectual legacy.

¹⁷ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 89.

¹⁸ Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013), 18.

¹⁹ *Ibid.*, 102.

In examining the lives and legacies of these three women, I hope to also reconsider the ways in which these are shaped by those thinkers, scientists, artists, and authors who represented their lives for them. Historical distance has often been treated as synonymous with temporal distance, allowing for time to reveal truth and provide a more detached and perhaps objective perspective on events from the past. Historian Mark Salber Phillips nuances this understanding in *On Historical Distance* by proposing a new framework from which to consider distance that takes into account more than just time. Salber Phillips focuses on representations of history, already establishing a first distance between truth and what is written or painted or photographed. This alternative framework asks to consider *how* a history is recorded or represented, the medium used to accomplish this, and the omissions made by a source, can influence our understandings of a history.²⁰ This can reveal more about the goals of a source's author and provide opportunity for a more holistic approach to considering the lives of a history's subject.

In critically considering authorship as a factor that can affect the ways in which we determine truth, I unpack what it means to represent oneself and others. Artists and theorists have been studied as impactful historical figures but are differentiated by an alarming unilateral control over how their personal histories are represented due of the power they have been granted by their positions as authors. When the person who does the recording is the person who records themselves, this will doubtless impact the ways in which they are perceived through history. In an archive that has systemically prevented women from recording their own histories, and forced them to become characters, curiosities, and case studies in the intellectual mythologies of the men around them, I present Rego as an antidote, her work displaying not only her own

²⁰ Mark Salber Phillips, *On Historical Distance* (New Haven, CT: Yale University Press, 2015), 6.

artistic mastery, but her agency and authority as an artist as well. It is with this in mind that I would like to begin this genealogy of hysteria.

II – Marie and Augustine

Hysteria is a term used to encompass a variety of deviations from norms of femininity caused by a range of factors including - but by no means limited to - actual mental illnesses. It refers to any kind of emotional or physical excess exhibited by a woman.²¹ This could in reality be symptomatic of other conditions such as autism, depression, anxiety, epilepsy, schizophrenia, or PTSD, things like general lethargy, sleepwalking, fainting, persistent coughs or headaches, or just plain emotion like joy, or fear, or sadness.²²

Hysteria in contemporary consciousness has been de-bunked and is treated as a kind of made-up illness, often brought up to make fun of to highlight the hilarious lack of understanding surrounding women's health in the nineteenth century and the ways in which the medical system had been weaponised in women's oppression.²³ Although the sentiment of this contemporary recharacterization of hysteria touches on some important aspects of how the patriarchy can affect the mental conditions of those affected by it, particularly women, it also continues to hammer home the fact that hysteria is a made-up illness, or rather a diagnosis of a societal problem instead of an actual medical condition. Although hysteria is not a good term to describe the mental and medical states of women, it was a term used to encompass a variety of very real conditions like depression, autism, and epilepsy, as well as general dissatisfaction and frustration among women. Lumping all of this together and then declaring hysteria a medical fiction has the effect of also dismissing the actual clinical and emotional suffering of women who were diagnosed as hysterics. The two women I will discuss in this

²¹ Georges Didi-Huberman, *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (Cambridge, MA: The MIT Press, 2003), 19.

²² Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 6.

²³ While falling down my research rabbit hole, I happened upon one case that illustrates how hysteria is treated in contemporary pop-culture: the 2011 film *Hysteria* directed by Tanya Wexler. In the dramatic final monologue given by Dr. Mortimer Granville – the inventor of the vibrator – hysteria is described as “catch-all diagnosis for women without opportunity, forced to spend their lives tending to domestic chores and selfish, and prudish husbands who are unwilling or unable to make love to them properly or often enough.”

chapter both suffered from very real post-traumatic stress disorders, both had epileptic seizures and medical conditions that needed to be treated with the severity that they deserved. As epilepsy and stress are mutually re-enforcing conditions, to dismiss this conjunction as being the result of hysteria is to fail to understand their conditions and see the totality of their suffering. To reduce and trivialise all cases of hysteria, in a way, is then to reduce and trivialise the pain of women. The effects of this continue to be felt in contemporary medicine where women are vastly underdiagnosed for mental health conditions, making their roads to mental health significantly longer.

In the nineteenth century, women simply letting their bodies experience the depth of their emotions or behaving in a way contrary to the expectations or desires of the men around them, would result in them being labelled as hysterics. Consequently, these women were ostracised for embodying a radically free subjectivity, or simply taking up space that is otherwise denied under the patriarchal expectations of femininity. This subjectivity, or perhaps the way it looks, paradoxically, has been sexualised and objectified. Jean-Martin Charcot commissioned a series of photographs to be taken of female patients at the Salpêtrière hospital from approximately 1875 to 1892²⁴. These were published in a series of volumes titled *Iconographie Photographique de la Salpêtrière*.²⁵ During this time, the Salpêtrière was the largest asylum for low-income women in Paris, housing up to 5000 patients.²⁶ Charcot was named the director of the hospital in 1862 and it is here that he founded the *École de la Salpêtrière*, which was open 1882 until 1892, welcoming a variety of later infamous students, including Sigmund Freud.²⁷

²⁴ Désiré Magloire Bourneville and Paul Regnard, *Iconographie Photographique de La Salpêtrière: Service de M. Charcot* (Paris: Progrès médical, 1877).

²⁵ Ibid.

²⁶ Georges Didi-Huberman, *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (Cambridge, MA: The MIT Press, 2003), 13.

²⁷ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 4.

This school became famous for Charcot's teaching which regularly involved demonstrations of hypnosis on the female patients living in the hospital. These lessons, as well as photographs that Charcot commissioned of the patients, became incredibly popular among Parisians and reached audiences beyond medical students.²⁸ The lectures and photos featuring only partially dressed and comparatively uninhibited women were then the most public aspects of the hospital, which had now gained a reputation based in perceived danger, promiscuity, and sexual availability of its women-patients.

These photographs and lectures are examined in the work of historians Georges Didi-Huberman and Asti Hustvedt²⁹ who have undertaken the massive archival challenge of piecing together the lives of the women living at the Salpêtrière based on the hospital's records. Among them are Marie Wittmann and Louise-Augustine Gleizes whose portraits serve as the primary visual reference for Rego's *Possession* Series.³⁰ The figure in *Possession* poses, displaying her body through the theatrically and extremity of her movement, while her gaze seldomly acknowledges the presence of a viewer who watches her as her psychoanalytic session develops. This recalls the images of Augustine and Marie who both moved and modeled their conditions with a startling dramatic flair that made their otherwise clinical images so captivating, continually asserting their agency within a context explicitly designed to render them objects. In recalling these, Rego considers how this resistance to objectification works. *Possession*, in near life-size, displayed on the monumentalizing white walls of the Tate, differs vastly from the printed photos in the pages of the *Iconographie*

²⁸ Georges Didi-Huberman, *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (Cambridge, MA: The MIT Press, 2003), xi.

²⁹ Georges Didi-Huberman, *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (Cambridge, MA: The MIT Press, 2003). ; Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011).

³⁰ Zuzana Flašková et al., *Paula Rego*, ed. Elena Crippa (Tate Publishing, 2021), 58.

Photographique de la Salpêtrière, a medical textbook with an illicit reputation. Rego makes these experiences monumental through her careful attention to the model, depicting her movement thoughtfully and thoroughly, making her introspection and subjectivity the focus of the work. Whereas the Charcot photographs beg us not to acknowledge the person experiencing these conditions, Rego encourages us to empathise, and consider our own experiences through a sympathetic viewing. This is the courtesy I hope to now extend to Marie and Augustine.

In this section, I aim to consider Marie and Augustine as primary actors rather than characters in the wider intellectual mythologization of Charcot. Their own biographies, however, are compiled based only on medical notes and information that they revealed to the doctors at the Salpêtrière.³¹ Marie's seizures and hysteric episodes affected her hearing heavily when she was a child and would continue to do so throughout her adulthood. As a result, she learned to read and write much later and never kept records like a journal or correspondence, as far as we know.

Most of the information we do have about them consists of a long list of the several traumas they endured as young women. I do not wish to dwell extensively on these as in doing so I would continue to define Marie and Augustine's lives in the terms of the men who robbed them of their agency and autonomy. The doctors recorded their sexual histories extensively, which did involve several assaults, but this does not mean that Marie and Augustine did not enjoy other aspects of their sexuality. Augustine spoke frequently about two of her brother's friends named Émile and Georges who were both her lovers when she was a teenager.³² She

³¹ Désiré Magloire Bourneville and Paul Regnard, *Iconographie Photographique de La Salpêtrière: Service de M. Charcot* (Paris: Progrès médical, 1877).

³² Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 151.

often talked about how she would tease them and play them off of each other, but how she loved Émile much more than Georges who was “only after one thing”.³³

We know of Augustine’s childhood that she was born in Paris in 1861 to two servants working in the home of a man referred to as Mr. C. Augustine’s mother gave birth to her little brother a year later and the pair of them were then sent to live with a wet nurse.³⁴ When Augustine was six years old, she was sent to a convent school just outside of Paris.³⁵ She was quite capricious and did not take to the strict religious environment very well, often getting in trouble for teasing the nuns. The nuns found her behaviour so objectionable that they once tried to have her exorcised, suspecting that her irreverence was caused by demonic possession.³⁶

Augustine eventually left school at thirteen and moved back to Paris where her mother had arranged for her to move back into Mr. C’s home and work for him.³⁷ Augustine’s mother, by Augustine’s own account, was a deeply selfish person who did not care for the health and safety of her daughter.³⁸ Mr. C was a very violent man and a horrible employer who became increasingly brutal over the years that Augustine worked for him. He eventually threatened Augustine with a weapon and raped her. Augustine would often return this trauma during her hysteric episodes, forced to relive this assault in her hallucinations, and as such the horrifying

³³ Ibid., 190.

³⁴ This was a common practice even among lower-class French families. Children would be sent usually to an even poorer woman who would receive a small amount of money to care for the children, but they were frequently mistreated and neglected. Following several instances of infant mortality in the 1870s, regulations started to be put in place that increased supervision and ensured that the nurse was compensated fairly.

³⁵ Ibid., 150.

³⁶ Ibid., 150. I’ll note that the title *Possession* can be read to refer to demonic possession, which was often blamed for causing a woman’s hysteria or epileptic seizures. The third woman discussed in Hustvedt’s book named Geneviève Basile Legrand was often described as possessed and experienced hallucinatory visions of Christ and the Virgin.

³⁷ Ibid., 151.

³⁸ Ibid., 191.

details of this period in her life are recorded in excruciating detail.³⁹ While working for Mr. C Augustine began having hysterical attacks consisting of convulsions and hallucinations. Mr. C, being so frustrated by this, and worried that Augustine might tell people about the assault forced Augustine's mother to kick her out. She found Augustine another job as a chambermaid, but in her incredibly vulnerable and traumatised condition, Augustine likely should not have been working at all. Her attacks continued with even more regularity and her mother had Augustine institutionalised at the Salpêtrière hospital in 1875 when she was 15 years old.⁴⁰ By the time she arrived, she was exhausted and very young and impressionable, and the doctors used this to their advantage.

In 1875, Charcot tasked one of his interns named Désiré Magloire Bourneville with creating a photographic journal to document the activities at the Salpêtrière at once for teaching, and for posterity.⁴¹ Under Charcot's direction Bourneville enlisted the help of two other interns, Albert Londe and Paul Regnard, who became the hospital's photographers.⁴² This team was set up in their own photography studio complete with a bed for the patients to lay on, and a black backdrop. Bourneville had primarily been working with Augustine and is the main author of her case history, so when it became time for this group to photograph a patient, Augustine, whose seizures were frequent, seemed a natural choice. What results from these sessions is a series of photos that demonstrate the incredible understanding Augustine had of herself as a model and subject as she purposefully displays her condition to the camera.

³⁹ Ibid., 191.

⁴⁰ Ibid., 148-153.

⁴¹ Both Charcot and Freud were keenly aware of the pioneering nature of their work, and consequently put lots of effort in to documenting everything about themselves, their work, and every thought they've ever had.

⁴² Ibid., 161.

The first photographs of Augustine taken near her arrival in 1875 show her posing in her street clothes, her hair is done, she smiles and looks directly at the camera [Fig. 11]. This is labelled as her “normal state”⁴³. From here, Augustine explodes into a flurry of dramatic and unsettling postures. Throughout this process, despite her affected state, Augustine demonstrated a keen awareness of her role in the development of the photographs and as a fountain of information for the doctors tasked with recording her every move. As such, her movements are slow so that the very early camera model could sharply capture her poses. She looks directly at it in some cases, blurring the line between portrait and clinical photography [Fig. 12]. These are made even more impactful as this was one of the first instances where photography was used rather than illustration in medical books, irrevocably tying a human identity and personality to the condition.⁴⁴ These photos are never completely isolated or analytic, Hustvedt describes them as “haunted by the ghosts of women who refuse to be reduced to medical illustration”⁴⁵.

Augustine’s hallucinations alternated being erotic and terrifying. She would frequently relive the times she was assaulted by Mr. C. which would come in tandem with hallucinations of rats. Other times, she would relive the time she spent with Émile, Georges, and another lover only called M.⁴⁶ The photos of her experiencing these are the most famous of the series.

These are grouped together and described as her “passionate poses” or “passionate attitudes”.

These are further labelled as “amorous supplication”⁴⁷ [Fig. 13], “eroticism”⁴⁸ [Fig. 14] and

⁴³ Désiré Magloire Bourneville and Paul Regnard, *Iconographie Photographique de La Salpêtrière: Service de M. Charcot* (Paris: Progrès médical, 1877). Plate 14.

⁴⁴ Dr. Jules-Gabriel-François Baillarger and Dr. Hugh Welch Diamond had already photographed asylum patients in the early 1850s, in France and Britain respectively. In 1852 Guillaume-Benjamin-Amand Duchenne de Boulogne had also begun producing medical photographs in Paris, and likely was the person who influenced Charcot’s decision to begin photographing the Salpêtrière patients.

⁴⁵ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 165.

⁴⁶ *Ibid.*, 204.

⁴⁷ Désiré Magloire Bourneville and Paul Regnard, *Iconographie Photographique de La Salpêtrière: Service de M. Charcot* (Paris: Progrès médical, 1877). Plate 20.

⁴⁸ *Ibid.*, Plate 21.

“ecstasy”⁴⁹ [Fig. 15]. While experiencing these hallucinations, Augustine would not only speak to Émile, Georges, M, or Mr. C but to the doctors as well, describing exactly what was happening so that she could share some of her experience. She would often talk about how certain events made her feel at the time, and these remarkably lucid moments made it possible for the doctors to build out her case history and force the doctors to properly understand her previous experiences.⁵⁰

We know even less about Marie Wittmann’s early life than we do about Augustine’s. She was born in Paris on April 15th, 1859, and was one of eight siblings. Her mother worked as a laundress, and her father, who was unemployed for most of her childhood, was eventually institutionalised at Sainte Anne’s asylum.⁵¹ Many of Marie’s siblings suffered from epilepsy and so did she. She had her first seizure at 2 years old which left her partially deaf. She eventually regained her hearing and managed to work with her mother as a laundress until she was 12 years old when she began an apprenticeship with a furrier.⁵² This could have been an opportunity for upward mobility for Marie but, ultimately, it would end badly. She moved in with him to work, but, in an all too familiar pattern, the furrier also became violent and raped Marie. Her seizures came back, with even more frequency and intensity because of how much stress, fear, and anxiety permeated her everyday life. Having had enough, Marie was able to escape her employer and move back in with her mother and siblings.⁵³

This time of peace, however, was short-lived as Marie’s mother would tragically die only a year later. Having nowhere else to go as she had aged out of the child-welfare system; Marie

⁴⁹ Ibid., Plate 22.

⁵⁰ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 192.

⁵¹ Ibid., 39.

⁵² Ibid., 39.

⁵³ Ibid., 39.

went back to work for the furrier.⁵⁴ Thankfully she didn't stay long as she found a job as a ward girl at the Hôpital Temporaire when she was 16.⁵⁵ She was able to work there a while, but after having an attack at the hospital she was fired. During this time, she met and fell in love with a man named Alphonse, and lived with him for a short time, but when the relationship ended, Marie was admitted to the Hôpital Saint-Mandé as her episodes had returned.⁵⁶ Here she fell in love again with another man named Louis, who may have been a medical intern. Relationships between hysterics and medical staff were not uncommon or considered unethical during this time, despite the inherent power imbalance between the people involved and the resulting lack of consent possible.⁵⁷ Marie and Louis continued their relationship until Marie had another attack while working as a ward girl and was fired/discharged from the hospital.⁵⁸ She then turned to the Salpêtrière for work which facilitated her admission as a patient in 1877 when she was 18 years old.⁵⁹

Marie had been a rebellious patient during the start of her stay at the Salpêtrière. On several occasions she would run away from the doctors, once even escaping to the boulevard outside the hospital.⁶⁰ Her defiant behavior often resulted in her being isolated or housed with patients who were deemed "insane" as punishment. Since hysterics often had significant lucid periods, they were given much more freedom than other patients at the hospital. To move Marie to the ward for the "insane" was to essentially hold her prisoner.⁶¹ After 7 months, the

⁵⁴ Ibid., 40.

⁵⁵ Ward girls were severely underpaid nursing assistants and were usually very poor women and sometime even patients at the hospital. They were treated horribly, given no security, and very little payment. A job as a ward girl was often a very last resort for Paris's lower-class women.

⁵⁶ Ibid., 41.

⁵⁷ Ibid., 41.

⁵⁸ Ibid., 42.

⁵⁹ Ibid., 42.

⁶⁰ Ibid., 45.

⁶¹ Ibid., 47.

doctors decided she had been punished enough and she was moved back to the hysteric ward. It is here that she began working with Charcot.⁶²

Eventually, Marie became the main demonstrative subject in Charcot's weekly lectures. Marie would be brought out to display her condition to Charcot's crowd of spectators. Under "hypnosis", he would provoke an episode in Marie and then would describe the phases and development of her attacks. Some patients had seizures while in this state, whereas others were responsive to commands made by Charcot or his team of doctors. Marie was often responsive, and the doctors used this fact to their advantage and often suggested things that they thought their all-male audience would enjoy. Sometimes this would involve suggesting that they were in the tropics and Marie would then remark on the weather.⁶³ Other times, the doctors would convince Marie to undress in front of them, again proving that their first instinct is to exploit and de-humanise their patients.⁶⁴

I want to note the remarkable ambivalence around Marie's name during this time. She was most often called just W. in hospital records, but as Charcot's lectures became more popular, the name Blanche Wittmann or just Blanche was used the most often because she would often say it during her episodes.⁶⁵ This was likely the name of one of Marie's sisters who had died from epilepsy when Marie was a child.⁶⁶ The fact that this was never Marie's name and she only ever used it in the third person did not matter to the doctors or press, and she has primarily been called Blanche in later discussions about her. This comes with some

⁶² Ibid., 48.

⁶³ Ibid., 75.

⁶⁴ Ibid., 80.

⁶⁵ Augustine as well was never called by her name, instead, she was called X., X.L., G.L Louise G.L., Louise Gleizes (spelled correctly) or Louise Glaizes (spelled incorrectly). She is called X.L. Augustine once in volume 3 of *Iconographie Photographique de la Salpêtrière*. Augustine is the name that stuck when discussing her later on, as well as the named she used as a child, so this is how I will be addressing her.

⁶⁶ Ibid., 43.

interesting considerations. Whereas Dora is known as Dora to maintain her anonymity, Marie is called Blanche because it was a lazier way to identify her by boiling her identity down to her condition. Blanche is a metonym for the hysteric. The name Blanche itself signifying whiteness or blankness, Hustvedt argues, mirror's the ways in which Marie's own personal identity was stripped away and ignored and became a blank slate on which Charcot was able to create the perfect hysteric for use in his lectures, studies, and publications.⁶⁷

Reinforced by the popularity of the newly published *Iconographie Photographique de la Salpêtrière* featuring photographs of Augustine, the lectures became incredibly popular and Marie and Augustine along with them. Marie and Augustine's images were very sought after. In 1887 André Brouillet debuted a painting he had done of one of the Salpêtrière lectures [Fig. 16] at the Salon at the Palais de l'Industrie.⁶⁸ It was intended to serve as a group portrait of Charcot the men who attended the Salpêtrière lectures, the art critic Philippe Burty, novelist Paul Arène, Albert Londe, and several of Charcot's other students who would go on to have their own illustrious medical careers. It currently hangs in the hallway at l'Université Paris Descartes, re-enforcing the intellectual legacies of the men it depicts. It also features Marie however, as a scene-stealer on the right side of the canvas. She is shown in all her hysteric glory, her white neck and shoulders glowing, restrained by Joseph Babinski, one of Charcot's chief interns. The faces of the men around her all turn to ogle her as she struggles to stand, her arm contracting behind her as she faints. Marie's exposed shoulders and corset further emphasise the sexual voyeurism involved in these lectures, as she stands in sharp contrast to the sea of men in black suits seated around her. Her pose as she lies back in to the arms of Babinski recalls the position of the model in Rego's *Possession IV*. What differs is

⁶⁷ Ibid., 44.

⁶⁸ Ibid., 105.

the presence of the audience. Brouillet's painting positions the viewer among Charcot's students. We participate in the lecture by sitting in a semi-circle watching him and Marie at the front of the room. The viewer of the Brouillet painting now is likely a student themselves at Paris Descartes waiting in the hall for their own lecture to start. Our role as observer is Rego's series however becomes more complex, as there's no lecturer or ringleader like Charcot to guide our experience. The model is consequently unaware of us, unlike Marie whose ability to model her episodes is represented here.

Augustine and Marie both understood their roles in the creation of the images; they were both women who knew how beautiful they were and understood what it was for them to be photographed in this way or participate in a lecture. Their involvement, however, is significantly under-recognised as it was only allowed within the confines of the overall structures of the Salpêtrière where they were ultimately mistreated, abused and exploited. These images and lectures contain only an implicit record of their agency all the while trying to reduce them to medical case studies.

This trapped freedom, light, joyous sexuality, and personality are all things that Rego tries to bring out in *Possession*. Feminine sexuality frequently permeates Rego's work, and in this case, it is expressed through the drama and movement of her model. The pastels are very formally similar to photos of Augustine and Marie. Rego's model pulls at her clothes in the same way Augustine does, revealing glimpses of skin. The extremity of the poses in *Possession* seems to be responsive in the same ways that Augustine would respond to her hallucinations or Marie would respond to commands. One thing that differentiated Augustine from Marie was her awareness of the camera and the conventions of portraiture. Marie is frequently photographed from unflattering angles revealing a double chin, sometimes the

photos are a little blurry because she's moving around, whereas Augustine sits up, stays still, and poses with intention. Rego's model embodies both ends of this spectrum: sometimes we can see some of her skin sag, or a double chin, other times – notably in the final panel [Fig. 10] – she looks at us directly, as Augustine would have.

Marie would spend the rest of her life at the Salpêtrière. Following Charcot's death in 1893, the École de la Salpêtrière closed, and Marie never experienced another seizure or hysteric episode again. By this time, Marie was deeply involved in life at the hospital, and as she was no longer a patient, nor needed for medical demonstrations, she chose to stay and work. At first, she worked with Albert Londe in the photography studio where she and Augustine had been photographed, and later she worked in the radiology laboratory. Radiology in the late nineteenth century was a very new and very dangerous science, and Marie quickly began suffering from the cancer that regular exposure to radiation would cause.⁶⁹ During this time, she made friends with a medical intern named Baudouin who began working with her in the lab in 1905.⁷⁰ He supported her during the several agonising amputations she had to endure due to her cancer, and visited her frequently when she was re-admitted as a patient due to her worsening health. Marie died at the Salpêtrière in 1913.⁷¹

We know less about what happened to Augustine. While working in the hospital, she would experience frequent relapses. Her episodes would sometimes occur on their own, but more often than not, Charcot and his doctors would provoke them, resulting in Augustine's need to be re-admitted as a patient.⁷² Augustine did not want to be at the Salpêtrière anymore. She was not as cooperative with the doctors as she had been, she was tired, and had felt exploited.

⁶⁹ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 138.

⁷⁰ *Ibid.*, 138.

⁷¹ *Ibid.*, 141.

⁷² *Ibid.*, 207.

Eventually, hypnosis wouldn't work on her either. She tried to escape the hospital twice: she managed to escape from a cell the doctors had been holding her in for two months but was caught and only made to return to the ward. A second time she made it outside but was stopped before she was able to enter a coach that could drive her away.⁷³ She would continue to have episodes while at the hospital, which were recorded in much less detail than her earlier ones when she was cooperative enough to pose. Her case file eventually ends with a note that reads: "On September 9 Augustine escaped from the Salpêtrière disguised as a man".⁷⁴ A later note speculates that she was now living with a lover.

Augustine and Marie remained expressly defiant until the end of their stay at the Salpêtrière. Both were able to assert their agency and independence in a variety of ways, but despite the fact that within their bodies, they could move with a remarkable freedom, uncommon for women at the time; their bodies themselves remained confined to the Salpêtrière. What I hope to have shown is that they led full and complex lives that resisted momentary capture within their photographs and lectures. They were complex women who led difficult lives but were remarkably able to assert their agency within a specific area of society where doing so was dangerous and thought to be impossible. Despite the efforts of the doctors, artists, photographers, and archivists who determined how we found out about them trying desperately to make them seem as if they are only bodies, their undeniable character creeps through, giving us a glimpse into their remarkable lives, and begging questions about whose stories we are missing.

⁷³ Ibid., 207.

⁷⁴ Ibid., 208.

In referencing the images of Augustine and Marie in *Possession*, Rego is able to harness their complex histories, highlighting the defiant, sexual, and extreme aspects of their character that are implicit in the Charcot photographs. In this way, Rego reclaims the radical agency that Marie and Augustine both intrinsically possessed but was repeatedly suppressed by the structures of the Salpêtrière. In Rego's context, the figure is presented as independent, freed from the borders and captions that remind us that we are only meant to be looking at Marie and Augustine as objects and medical curiosity. Rego's subject is no more or less agent or human than Marie and Augustine, but here there is no context that begs us to think otherwise.

III – DORA

A lithograph of André Brouillet's painting of Marie hung in Freud's office [Fig. 17]. He had attended classes at the École de la Salpêtrière in 1885 while visiting Paris, which sparked his interest in hysteria and mental health more broadly.⁷⁵ This manifested at first through a hypnotism practice similar to Charcot's which encouraged patients to delve into their subconscious – thoughts and desires that they didn't know they had – to learn the root causes of their suffering. Eventually, Freud moved away from hypnotism and favoured a practice more similar to contemporary talk therapy.⁷⁶ Having been founded in hypnotism, and strongly believing that most of our drives are unconscious, Freud was known to read much more into things than he should have, and frequently made assumptions about his patients, that often turned out to be wrong.

Freud's lithograph of the Brouillet painting now hangs above the analytic couch at the Freud Museum in London. Freud was well aware of the significance of his practice during his lifetime, possessing a keen understanding of how his therapeutic practice, life and personal identity would be deeply intertwined in his academic legacy. It is for this reason that he had his home office in Vienna meticulously photographed and documented before fleeing Nazi occupation in 1938, and also why he went through such pains to make himself look better in the essays, case studies, and correspondence that he published.⁷⁷

⁷⁵ Griselda Pollock, *Psychoanalysis and the Image: Transdisciplinary Perspectives* (Oxford, UK: Blackwell, 2006), 8.

⁷⁶ Nathan Kravis, *On the Couch: A Repressed History of the Analytic Couch from Plato to Freud* (Cambridge, MA: The MIT Press, 2017), 127.

⁷⁷ Diana Fuss, "Freud's Ear: Berggasse 19, Vienna, Austria," essay, in *The Sense of an Interior: Four Rooms and the Writers That Shaped Them* (Hoboken, NJ: Taylor and Francis, 2012), 33.

Freud published his *Case Study of Hysteria* in 1905 in which he recounts his treatment of Dora, who was 17 years old at the time.⁷⁸ Through his own recollection of Dora's treatment, Freud uses his authority and position as a writer and academic to override Dora's own lived experiences in favour of an interpretation that better suited his theories and absolved him of having to admit that he had failed to treat her adequately. He functionally blames her for her enduring depression and for ending her treatment because of her hysteric feminine inability to control her feelings. In reality, her treatment involved regular shaming and invalidation of her experiences of assault and harassment.

Dora has been claimed by a variety of authors and theorists as a feminist symbol, examples of which I highlight in this section. She is most frequently used to wishfully demonstrate a woman's ability to assert her agency and control despite the patriarchal forces that have impacted her life and made these assertions more difficult. Having been made into a sympathetic antagonist in Freud's mythology, her image and legacy have permeated many subsequent feminist criticisms of Freud's work.⁷⁹ Rego, who contends with this legacy in *Possession* through her use of specifically Freudian analytic aesthetics, mainly the couch, then wraps Dora's story into her at once personal and universal depiction of the mental and physical turmoil that women endure under patriarchy. Although the positions of the figure are adapted from the photographs of Marie and Augustine, the setting recalls a specifically Freudian tradition, consequently drawing on allusions to Dora as his most famous patient.

⁷⁸ Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013), viii.

⁷⁹ Judith Butler, *The Psychic Life of Power: Theories in Subjection* (Stanford, CA: Stanford University Press, 1997).; Luce Irigaray, *This Sex Which Is Not One*, trans. Catherine Porter and Carolyn Burke (Ithaca, NY: Cornell University Press, 1985).; Julia Kristeva, *Black Sun: Depression and Melancholia*. (New York, NY: Columbia University Press, 1980).; Mari Ruti. *Penis Envy and Other Bad Feelings: The Emotional Costs of Everyday Life*. (New York: Columbia University Press, 2018).

Dora remains an enigmatic figure, at once sharing a personal and emotional history with the actual woman who sought treatment from Freud, and being an abstracted representation of all the women who were hurt by inherent misogyny of Freud's theories. "Dora", in all likelihood, shares little resemblance with the actual woman she is based on as her image has been impacted by the many artists, authors and theorists who write their interpretations of her into her history. In order to maintain privacy and respect for the woman who Dora is based on, my goal here is less to examine her biography, but more to examine "Dora's" presence in the archives and literary, artistic, and intellectual canons, all the while calling attention to the innate humanity that Dora is often denied. To exemplify the tensions that exist in these, I unpack the ways that she has been represented and claimed by two authors – Sigmund Freud and Hélène Cixous – and how these representations contend with Dora's agency, historical legacy, and attempt to approximate truth. In doing so, I aim to situate Dora within the history of hysteria, highlighting why and how she has been so impactful in the ways we consider authorship and agency within this context. It is with her in mind that I then reconsider Rego's *Possession* and how Dora's conflicting representations and analytic object and radical feminist subject inform the history of psychoanalysis that Rego references.

Dora was born in 1883 to middle class Jewish parents living in Vienna. Dora and her family all suffered from poor health; her father had syphilis which he likely passed on to her mother, and Dora herself suffered from migraines and a chronic cough since she was 7 years old.⁸⁰ Her parents spared little expense seeking out treatments for themselves, Dora took care of her father who was frequently incapacitated by his illness for long periods, and she and her mother would frequently go to health resorts to help alleviate their own symptoms. As Dora's

⁸⁰ Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013), ix.

migraines and coughs persisted, her parents sought more treatment which included electroshock therapy and hydrotherapy before they finally sent her to Freud in 1898, then a neurologist, who recommended additional psychological treatment.⁸¹ Dora's symptoms improved, and she would have theoretically been able to move out from under the cloud of illness that had followed her since childhood.

Only a little while later in the summer of 1898, Dora and her father went to stay with a couple at their alpine lake house.⁸² Herr and Frau K had been friends of Dora's father for a while as Frau K had helped nurse him when he was ill. Frau K and Dora also became good friends during this time, but this friendship quickly dissipated after the visit to the lake house. Dora had gone for a walk with Herr K, and he made a sexual proposition to her and kissed her. Dora, understandably disgusted by the advances of a married man her father's age, slapped him, and ran back to the house.⁸³ She was supposed to stay with the Ks after her father left, but after this incident she begged to leave early. Upon her return home, Dora told her mother of the incident, who told her father, who then confronted Herr K, who denied it. Again, in a longstanding tradition of refusing to believe women,⁸⁴ Dora's father ignored her and continued to put her in situations where she would have to interact with her pedophilic assailant. It is at this point that Dora became incredibly depressed as her family had gaslight her and put her in several unsafe situations, and she wrote her suicide note.⁸⁵

⁸¹ Ibid., x.

⁸² Ibid., x.

⁸³ Ibid., xi.

⁸⁴ Mari Ruti. *Penis Envy and Other Bad Feelings: The Emotional Costs of Everyday Life*. (New York: Columbia University Press, 2018).

⁸⁵ Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013), xi.

During her sessions with Freud, Dora spoke about how she felt her father had traded access to her in order to continue his affair with Frau K.⁸⁶ She expressed frustration at the fact that no one seemed to be looking out for her, or believed her, and then were upset with her for being so distressed. The fact that she was being so poorly treated by everyone who was supposed to love and care for her, however, was not the root cause of her suffering that Freud identified. What Freud saw was textbook hysteria, and an Oedipus complex. Freud argues in the case study that Dora had developed an affection for her father while he was ill, and she was taking care of him. Her mother had become distant, and Dora became much more attached to her father during this period.⁸⁷ Freud believed that Dora exhibited aspects of an oedipal complex, which is characterised by a repulsion one feels when they realise they have a sexual desire for their parent of the opposite sex. Freud, who could not fathom why Dora would have rejected the advances of Herr K, sought to use Dora's hysteria diagnosis for clarity. Freud writes of the incident: "That was exactly the situation likely to give a virginal girl of fourteen a clear sensation of sexual arousal. However, at that moment Dora was overcome by violent revulsion".⁸⁸ Thus, he suggests that something is wrong with Dora, not with Herr K. He argues that Dora exhibited a transference of her oedipal feelings for her father on to Herr K.⁸⁹ He consequently sees her rejection of Herr K as evidence of her hysteria and depression, rather than one of its causes.

Her subsequent sessions with Freud all operated using this logic, which Dora understandably would have found frustrating. Now, not only was her family gaslighting her, but so was her doctor. Her depression worsened and her cough returned, and she finally ended her treatment

⁸⁶ Ibid., 29.

⁸⁷ Ibid., ix.

⁸⁸ Ibid., 22.

⁸⁹ Ibid., 99.

with Freud after three months. This was before Freud had deemed it to be complete, and this was marked as a failure to keep a patient on his part.⁹⁰

This had to be remedied in his historical record, so when he published his notes from the case in 1905, he included a post-script that passed the blame right back to Dora. He argues that a second transference of her oedipal feelings occurred on to Freud himself and Dora was consequently repulsed by the attraction she felt for him.⁹¹ Consequently, she could no longer bear to be around him. Because he smoked, Herr K smoked, and her father smoked, Freud believed that Dora's mind would have connected the three of them.⁹² Although it is certain that all three men shared similarities in the sense that they were all horrible to Dora, refusing to believe her, hear her when she said no, or validate her feelings in any way, it is heinous to presume that the only reason Dora would want to distance herself from a doctor who essentially bullied her was because of a convoluted and repulsive sexual desire.

The narrative that Freud pushed persisted roughly until the 1970s when feminist scholars began re-examining the case. One of the first major English translations of the case study was published in 1963 with an introduction by sociologist Philip Rieff.⁹³ This translation is emblematic of exactly the problem at hand, where the loss of Dora's agency and identity, and the trivialisation of her thoughts and feelings through her treatment is entirely glossed over in order to continue to glorify Freud in the intellectual canon. In his introduction, Rieff writes:

Organised as it is, along multiple analytic perspectives, all converging upon Dora's repressed desires, the case, read as preparatory exercise in a new mode of historical writing, has a sheer brilliance which is still breath-taking, Freud pushes the protesting

⁹⁰ Ibid., 96.

⁹¹ Ibid., 102.

⁹² Ibid., 102.

⁹³ Sigmund Freud and Philip Rieff, *Dora: An Analysis of a Case of Hysteria* (New York, NY: Scribner, 1963).

girl back through her inner history - of which she is largely unaware- descending even deeper, cutting across levels of the same event, beyond the outer shell of her protective self-interpretations, to her relations with her mother, father, brother, governess, other girls, and that famous couple: Herr K and his wife. When the dazzled reader finally arrives at Frau K., he will be ready to admit, I think, that few greater pieces of detection have been written.⁹⁴

The more recent translation by Anthea Bell, published in 2013 with an introduction by literary scholar Ritchie Robertson, is rounded out much better with discussions of Dora's biography so that we have details about her life and context that goes beyond what Freud had originally provided.⁹⁵ The rest of the introduction describes the assumptions Freud makes about Dora throughout the course of her treatment, his flagrant lack of respect for her, as well as the ways in which Freud's manipulates the story of using his own narrative authority, often reporting his theories, assumptions, or suspicions as fact. Robertson writes:

Freud's account of Dora repeatedly implies that Dora has no authentic feelings of her own. Her "show of wishing to commit suicide" was not only unserious: it was an imitation of the alleged suicide attempt by her father, even though she did not believe her father had made any such attempt. As we have already seen, even one of the feelings that Dora expresses most strongly, her anger at being disbelieved, does not convince Freud.⁹⁶

⁹⁴ Ibid., ix-x.

⁹⁵ Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013).

⁹⁶ Ibid., xlvii.

The case study had been analysed for the technical failures and oversights made by Freud through his treatment, notably by Jacques Lacan, Melanie Klein, and Karen Horney, but it's not until the 1970s when criticisms of Freud's actions as a person rather than as a therapist gained further criticism.⁹⁷ These criticisms involve not only the phallocentrism of Freud's theories⁹⁸ but also the intellectual narratives dominated by men like Freud and Charcot. In considering this distinction that looks at Freud and Charcot as historical actors rather than scientists, a second distinction is made between "Dora", the theoretical patient, and Dora, the actual woman.

Hélène Cixous was among the authors who dealt directly with the Dora case study in her 1975 play *Portrait of Dora*.⁹⁹ In this play, Cixous alternates between depictions of Dora's treatment, and flashbacks to the events that Dora recounted in her sessions. These include her interactions with Herr K, Frau K as well as the several dreams she described to Freud. Cixous frequently wrote about Dora's implicit bisexuality and love for Frau K. They had shared a room, and it was frequently implied that Dora was jealous of her father's relationship with Frau K, not because of Dora's supposed oedipal attraction to her father, but rather because she was jealous *of him* and wanted to be with Frau K herself. In *Portrait of Dora*, she admits

Je n'avais jamais vu de femme aussi élégante et belle. Comme j'aimais la regarder! Je la suivais des yeux. Je pensais qu'elle savait faire tout ce que les femmes doivent savoir faire. J'aimais apporter des fleurs dans sa chambre à coucher. Quand mon père

⁹⁷ Jacques Lacan, *Feminine Sexuality*. London: Macmillan, 1982.; Luce Irigaray, *This Sex Which Is Not One*, trans. Catherine Porter and Carolyn Burke (Ithaca, NY: Cornell University Press, 1985).52.; *Ibid.*, 49.

⁹⁸ *Ibid.*, 50.

⁹⁹ Hélène Cixous, *Hélène Cixous Théâtre: Portrait de Dora, La Prise de l'école de Mahubai* (Paris: Des Femmes, 1976).

et elle changèrent de chambre et s'installèrent tous deux dans les chambres du fond, j'ai tout compris *Cris vers Monsieur B*. Tout. Vous m'entendez?¹⁰⁰.

The betrayal she feels comes rather from Frau K choosing Dora's father over her, rather than her father trading her to Herr K.

This is an aspect of the case that goes under-analysed by Freud. Although certainly aware of the fact that sapphic attraction between women existed, he consistently avoided discussing it in this case study and with Dora generally. Since Dora was so young at the time of treatment (and also a woman), Freud consciously avoided telling her more about sex than he thought she already knew, and thus would not suggest anything about her potential bisexuality, as though she wouldn't figure it out on her own.¹⁰¹ This is discussed further in Cixous' book with Catherine Clément, *The Newly Born Woman*¹⁰² where she speculates on the nature of Dora and Frau K's relationship, which was sometimes friendly, sometimes adversarial and maybe a little romantic.

What makes *Portrait of Dora* unique however, is Dora's physicality on stage. One of the only records of this play are a series of photographs taken at a performance at Théâtre des Quat'sous in Montreal, directed by Denis Marleau in 1983 [Figs. 18, 19]. In these images, Dora, played by Anne-Marie Rocher, is seen denying Herr K in fear in one scene, and desperately embracing Frau K in the next. She does a lot of things that are uncommon in

¹⁰⁰ Ibid., 22. My translation: "I had never seen a more beautiful or elegant woman. How I loved to look at her! I would follow her with my eyes, I thought she knew how to do everything that women were supposed to know. I liked putting flowers in her bedroom. When she and my father moved into the rooms at the end of the hall together, I understood everything. *Yelling at Herr B*. Everything! You hear me?"

¹⁰¹ Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013), xlvi.

¹⁰² Hélène Cixous and Catherine Clément, *The Newly Born Woman*. Minneapolis: University of Minnesota Press, 1986.

traditional narrative theatre like monologuing away from the audience¹⁰³ and using her full uninhibited range of motion to show the complexity and depth of her feelings. She whispers, she shouts, holds her body tightly and fearfully, and then lets herself explode in glorious anger.¹⁰⁴ In bringing these experiences to life, Dora's pain, confusion, and frustration at the lack of understanding by the people around her are made radically manifest. When comparing this account of events to the sterile, and often trivialising account given by Freud in his case study, Dora's own point of view becomes central in the discussion of her mind, life, and feelings. In animating her experiences, Cixous creates an opportunity for Dora's story to be embodied by an actual person, an agent, an actor, reaffirming the agency of the patient.

This parallels the theatrical displays of hysteria at the École de la Salpêtrière. Marie and Augustine both had a keen ability to perform their conditions and a good sense of theatricality. Many articles in the press used explicitly theatrical terms to describe the lectures, calling them “performers”¹⁰⁵ and comparing Marie to dramatic actresses like Sarah Bernhardt [Figs. 20, 21]. To consider hysteria a performance relies on the idea that a women's reality is subtle; that it is somehow disingenuous or unnatural for a woman to take up space, to demand attention, and be extreme. As a result, the immense physicality displayed by Marie and Augustine seemed theatrical beyond belief, and in the mind of Parisian society, they were grouped together with other entertainers that were also seen as quite promiscuous, like actresses and dancers.¹⁰⁶ In a similar vein, Dora's extremity on stage is used not only to display her desperation, but also to explore the complexities of her desires and sexuality.

¹⁰³ Hélène Cixous, *Hélène Cixous Théâtre: Portrait de Dora, La Prise de l'école de Mahubāi* (Paris: Des Femmes, 1976), 23.

¹⁰⁴ *Ibid.*, 22.

¹⁰⁵ Asti Hustvedt, *Medical Muses Hysteria in Nineteenth-Century Paris* (London, UK: Bloomsbury, 2011), 90.

¹⁰⁶ It is mentioned in a few articles that Edgar Degas attended some of Charcot's lectures, I have not found definitive proof of this, but this does indicate the kind of audience that these lectures drew and how it was seen more as entertainment – akin to going to the ballet – than as science.

Cixous was heavily involved in the *Écriture féminine* movement.¹⁰⁷ Her 1975 essay, *The Laugh of the Medusa*, one of the primary texts of the movement, implores women to write down their experiences.¹⁰⁸ This had the ultimate goal of including women in our literary and intellectual canon as Cixous seeks to reframe, and reconsider vilified or judgemental and prejudiced depictions of women through history and in art. She calls on Dora to free herself from Freud in this essay¹⁰⁹ and does so again in the final scene of the play. Dora confronts Freud, alluding to other incidents she had described, like when she slapped Herr K by the lake, and telling Freud how exactly he had tried to use his power and authority over her.¹¹⁰ She leaves Freud's office, after refusing his request for her to write to him.¹¹¹

Cixous's Dora is of course, only another incomplete interpretation of her. Dora's real identity was revealed posthumously¹¹², and consequently, she never spoke directly about her experience with the Ks and Freud in any official or archivable capacity. What we can do instead is paint a fuller picture of Dora beyond the explicit falsehoods reported as fact that Freud provides. This is why Cixous's play becomes an invaluable healing tool to Dora's legacy. Although limited, inaccurate, maybe embellished, she is nonetheless, in control of her life, health, emotions, and actions. Cixous's Dora is not a passive recipient of Freud's medical analysis, but an active and frustrated woman with her own complex desires, which

¹⁰⁷ I want to note that this movement is problematic for a number of reasons, primarily because it endorses ideas around universal femininity that are very much not universal experiences among all women. Cixous places significant emphasis on things like pregnancy and motherhood as they relate to their physical effects. These are obviously not universal experiences of womanhood as she posits them, and she consequently leaves trans-women behind in her advocacy.

¹⁰⁸ Cixous, Hélène, Keith Cohen, and Paula Cohen. "The Laugh of the Medusa." *Signs* 1, no. 4 (1976): 875.

¹⁰⁹ *Ibid.*, 886.

¹¹⁰ Hélène Cixous, *Hélène Cixous Théâtre: Portrait de Dora, La Prise de l'école de Mahubāi* (Paris: Des Femmes, 1976), 102.

¹¹¹ *Ibid.*, 103.

¹¹² Sigmund Freud, *A Case of Hysteria (Dora)*, trans. Anthea Bell (Oxford, UK: Oxford University Press, 2013), viii.

may not be tidily explained in order to absolve three men of guilt and complicity in the sexual assault of a 14-year-old girl. *Portrait of Dora* balances and nuances the story that was begun in *A Case of Hysteria*.

This kind of re-animation and re-imagining has been a tool used frequently when examining the lives of people who have been left out of the archive. Robbed of the opportunity to have their own voices in our historical records, the responsibility of these new authors like Cixous and is not to speak for them, but rather build out the records that we have, learn about them, and then create a more balanced and nuanced picture of what they may have been like. The goal of these works is then to provide an alternative story, with a new point of view.

What differentiates *Possession* from *Portrait of Dora* then, is that *Possession* can operate independently of Freud's harmful writing, whereas Cixous's play is necessarily confined to the structures and conventions that Freud has established in the case study. Although Rego references Dora, and it would be remiss to talk about *Possession* without mentioning her, the series is not *about* Dora. Rather, it invites her story to be considered alongside the woman depicted in the series. By calling on Dora, Marie, and Augustine as models and references, in the absence of a Charcot or a Freud, Rego creates a new, self-determined, starting point from which to examine women's agency and mental health. It is notable that there is no analyst present in any of the panels, or any implication that there might be one out of sight. This draws attention to the fact that Rego represents herself, positioning herself as an inheritor of their legacies, rather than inhabiting or claiming any of their identities for herself.

IV – NUNES

The women shown in *The Abortion Pastels* are modelled by Rego's frequent collaborator, Lila Nunes, who often takes on Rego's own semi-autobiographical position in her work. Nunes had been hired by Rego in 1985 as an au pair to help care for her husband, Victor¹¹³, who was suffering from Multiple Sclerosis. Nunes had grown up in Portugal and she and Rego became friends over their shared experiences and language. Following Victor's death in 1988, Nunes found work elsewhere in the UK as a nurse. She and Rego had kept in touch, and in 1994, Rego called Nunes asking her to model for her *Dog Woman* series. She had modelled for some other smaller drawings while working for Rego previously, but this instance began a much more significant artistic partnership. Nunes talks about how Rego would describe the narrative she was trying to establish in her work, and she and Nunes would chat about it, sharing ideas, establishing a space for friendly intimacy and collaboration that suffused the work that they produced together.¹¹⁴

This kind of collaboration allowed Nunes to contribute a remarkable physicality that constitutes a large part of what makes Rego's figurative work so striking. Her ability to inhabit so many roles and convey such a deep emotionality is truly stunning. One of the roles she inhabits often parallels Rego's own life. Nunes posed for one of Rego's most famous works, *The Artist in her Studio* [Fig. 22], wherein she takes on the figure of the "great artist" in a George Sand-esque pose. She sits amongst her art, with her legs spread, leaning back on a table and smoking a pipe. This kind of self-portrait is ubiquitous among the great artists of yore and is consequently clearly intended as a kind of self-portrait of Rego, despite the fact

¹¹³ Rego married the artist Victor Willing 1959, and they had two children: actress Victoria Willing and filmmaker Nick Willing. Their relationship is frequently represented in Rego's work.

¹¹⁴ Lila Nunes, "Paula Rego Remembered by Lila Nunes," *The Guardian*, December 11, 2022, <https://www.theguardian.com/artanddesign/2022/dec/11/obituaries-2022-paula-rego-remembered-by-lila-nunes>.

that the woman actually sitting for it is Nunes. Through their collaboration, their identities blend to create this new character who can inhabit Rego's own lived experience and express a universality and relatability by abstracting them beyond the confines of Rego's biography.

The catalogue for Rego's recent retrospective at the Tate aims to situate Rego's work within her own life and biography.¹¹⁵ This is, of course, typical of the way we think of a "great artist", and clearly cements Rego's place among the upper echelon of modernist painters by tying the genius of her work to the genius of her person. It is revealed in the catalogue, that the couch featured in *Possession* was in fact purchased from Rego's own psychoanalyst.¹¹⁶ Rego had begun consulting with a psychoanalyst following the death of her father.¹¹⁷ She found this incredibly helpful as he learned to deal with her depression, as well as encouraging her to consider how archetype can be used to establish a greater universality. It is after these sessions that she begins drawing more on fairy tales and stories of universal resonance in her work.¹¹⁸ Like her references to figures from these fairy tales then, she calls on the hysteric to embody another universality that speaks to her own experiences of psychotherapy.

The friendship and mutual respect between Rego and Nunes are what made this such a generative partnership. As the model, Nunes is able to inhabit Rego's identity, allowing Rego to have control over how her own life is represented and have control over the authorship of her own legacy. Nunes described this as acting like a kind of conduit for Rego to focus her memories. Nunes recalls a time when "Paula once said about me, "She is really myself", and what she meant, I think, was that she could see through me and come out with whatever was

¹¹⁵ Zuzana Flašková et al., *Paula Rego*, ed. Elena Crippa (Tate Publishing, 2021).

¹¹⁶ Rego further ties herself to the model in *Possession* in her portrait at the National Portrait Gallery in London where she is photographed by Eamon McCabe in front of the final panel of *Possession*, wearing the same purple velvet dress that Nunes wears.

¹¹⁷ *Ibid.*, 58.

¹¹⁸ *Ibid.*, 58.

in her mind.”¹¹⁹ Unlike Dora, Augustine, or Marie whose biographies are written only on the condition that they have no hand in them, Rego gains the power to tell her story from Nunes, rather than speaking for her or over her, they work together in order to paint a full and complete picture. Just as Dora is animated in Cixous’ play to take on a universalised version of a personal identity to express her feelings of desperation, sadness and desire, Nunes is able to make Rego’s personal experiences and biography relatable through her physicality.

This relationship is a far more humanising version of the model/artist relationship, allowing space for both parties to be heard. By comparing this approach to the relationships between Augustine, Marie and Charcot, or Dora and Freud, we can clearly see how these authors have exploited these women and abused their power in order to shape a narrative that supports their personal and intellectual legacies.

The images of Augustine and Marie and the records that exist of them are oppressive. They try to contain the complexity and agency that both of these women continually asserted, but as they are only depicted within the oppressive structures of the nineteenth-century medical systems, and by doctors whose professional success depended on objectifying them, their remarkable radiance and intensity is confined to the way they were perceived by their male contemporaries. By bringing their image in to the twenty-first century, Rego encourages us to look beyond the photograph and the case study at the complex and defiant person who we now have the privilege of knowing better.

¹¹⁹ Lila Nunes, “Paula Rego Remembered by Lila Nunes,” *The Guardian*, December 11, 2022, <https://www.theguardian.com/artanddesign/2022/dec/11/obituaries-2022-paula-rego-remembered-by-lila-nunes>.

Dora's story serves to remind us of the ways in which there is always an inherent difference between reality and history. Her representation by Freud and re-representation by Cixous force us to consider how an author's desires can necessarily shape the legacies of others. This becomes murkier when we consider how and if this person really wanted their story to be shared. Dora, who exists in the canon, has been molded and manipulated in so many ways that she no longer resembles the person who inspired her. This does not mean, however, that there is nothing that can be learned from her story. She gives us a complicated history that allows us to reflect on the ways women have been denied and have asserted their emotions and desires. By embracing this complex figure and recalling her story in *Possession*, Rego encourages us to re-examine what it means to possess the power to assert oneself, both physically, and within the canon.

I have not been able to fully unpack the inherent misogyny surrounding hysteria as a diagnosis and the effects of this misogyny on our contemporary medical system. It is infinitely more difficult for women to receive accurate and effective medical and mental health care because of the constant inclination to disbelieve their pain. In making the suffering and discomfort of her subjects so startling, Rego calls us to action, and we must answer.

When Rego died on June 8th, 2022, Nunes wrote her obituary in *The Guardian*.¹²⁰ In doing so, she sheds light on their incredible partnership, friendship, and shared a glimpse into Rego's artistic process. She also breaks her silence as a model, talking about what is it to inhabit Rego's identity and help her to create in a way that feels immediate and true. This partnership provides a new framework for thinking about representation and historical legacy.

¹²⁰ Ibid.

Rego's awareness of her role as an artist who takes inspiration from historical sources that depict women who have been abused or disrespected means that she intimately understands what it is to create an archive, and how important power over that archive is. Her work is then her own personal record, where she can depict her experiences in such a way that they become universal, because of their authenticity, recording the lives of countless other unnamed women.

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FIGURES



Fig. 1. Paula Rego, *Untitled (The Abortion Pastels)*, 1998. Pastel On Paper, three 100cm x 110 cm panels. Source: <https://www.seattleartistleague.com/2022/06/24/paula-regos-abortion-series/>. Accessed January 8, 2024.



Fig. 2. Paula Rego, *Dog Woman*, 1994. Pastel on Canvas, 120cm x 160cm. Source: <https://www.wikiart.org/en/paula-rego/dog-woman-1994> . Accessed January 8, 2024.



Fig. 3. Agnolo Bronzino, *Portrait of a Woman with a Lapdog*, 1532-33. Oil on Panel, 90cm x 70cm. Source: <https://www.metmuseum.org/art/collection/search/821851> . Accessed January 8, 2024.



Fig. 4. Paula Rego, *Possession I*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm.
Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 184.



Fig. 5. Paula Rego, *Possession II*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 185.



Fig. 6. Paula Rego, *Possession III*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm.
Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 186.



Fig. 7. Paula Rego, *Possession IV*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm.
Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 187.



Fig. 8. Paula Rego, *Possession V*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm.
Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 188.



Fig. 9. Paula Rego, *Possession VI*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm.
Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 189.



Fig. 10. Paula Rego, *Possession VII*, 2004. Pastel on Paper on Aluminum, 150cm x 100cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 191.



Fig. 11. Paul Regnard, *Hystero-Epilepsy: Normal State*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

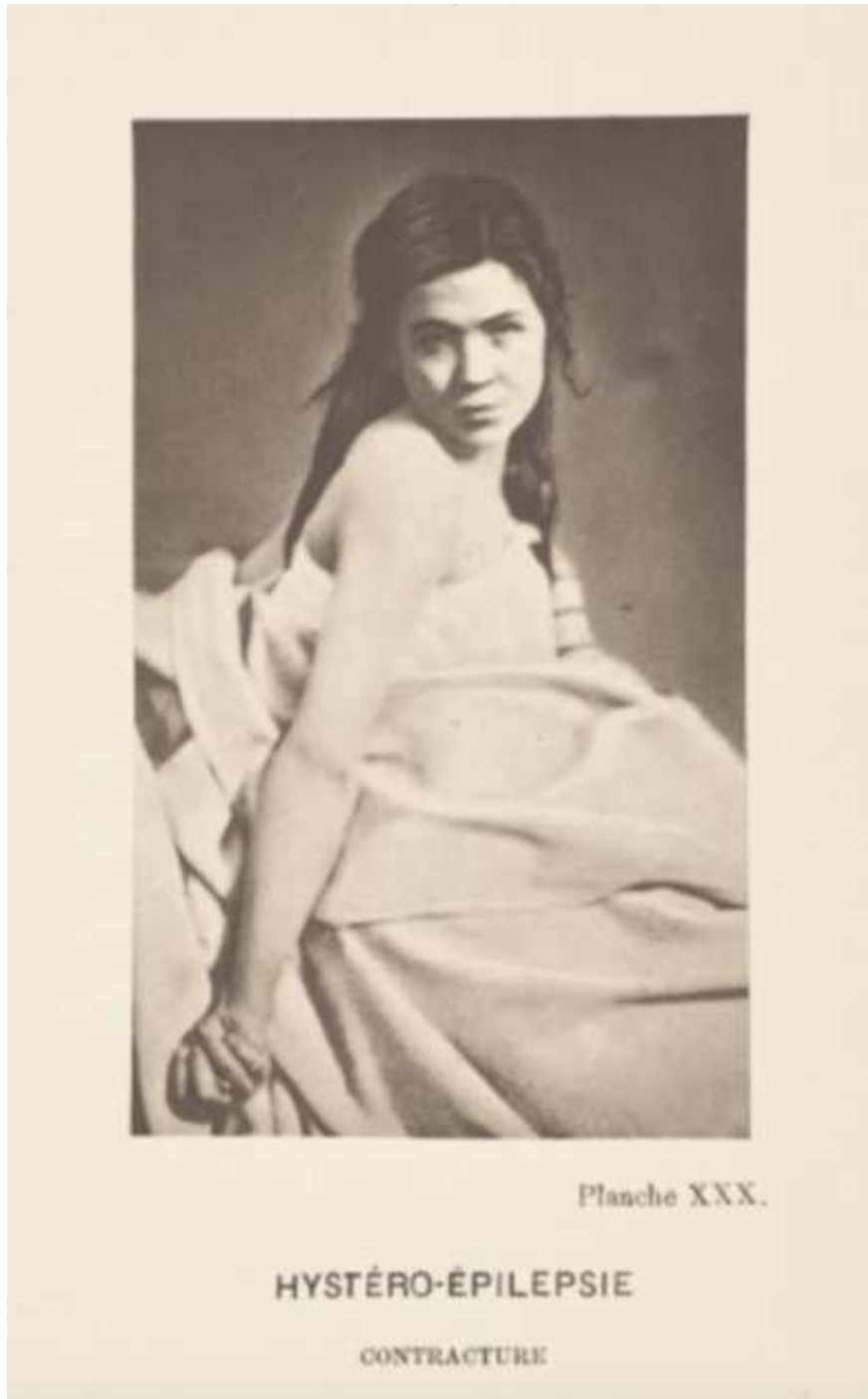


Fig. 12. Paul Regnard, *Hystero-Epilepsy: Contraction*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.



Fig. 13. Paul Regnard, *Passionate Attitudes: Amorous Supplication*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.



Figure 14 - Paul Regnard, *Passionate Attitudes: Eroticism*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

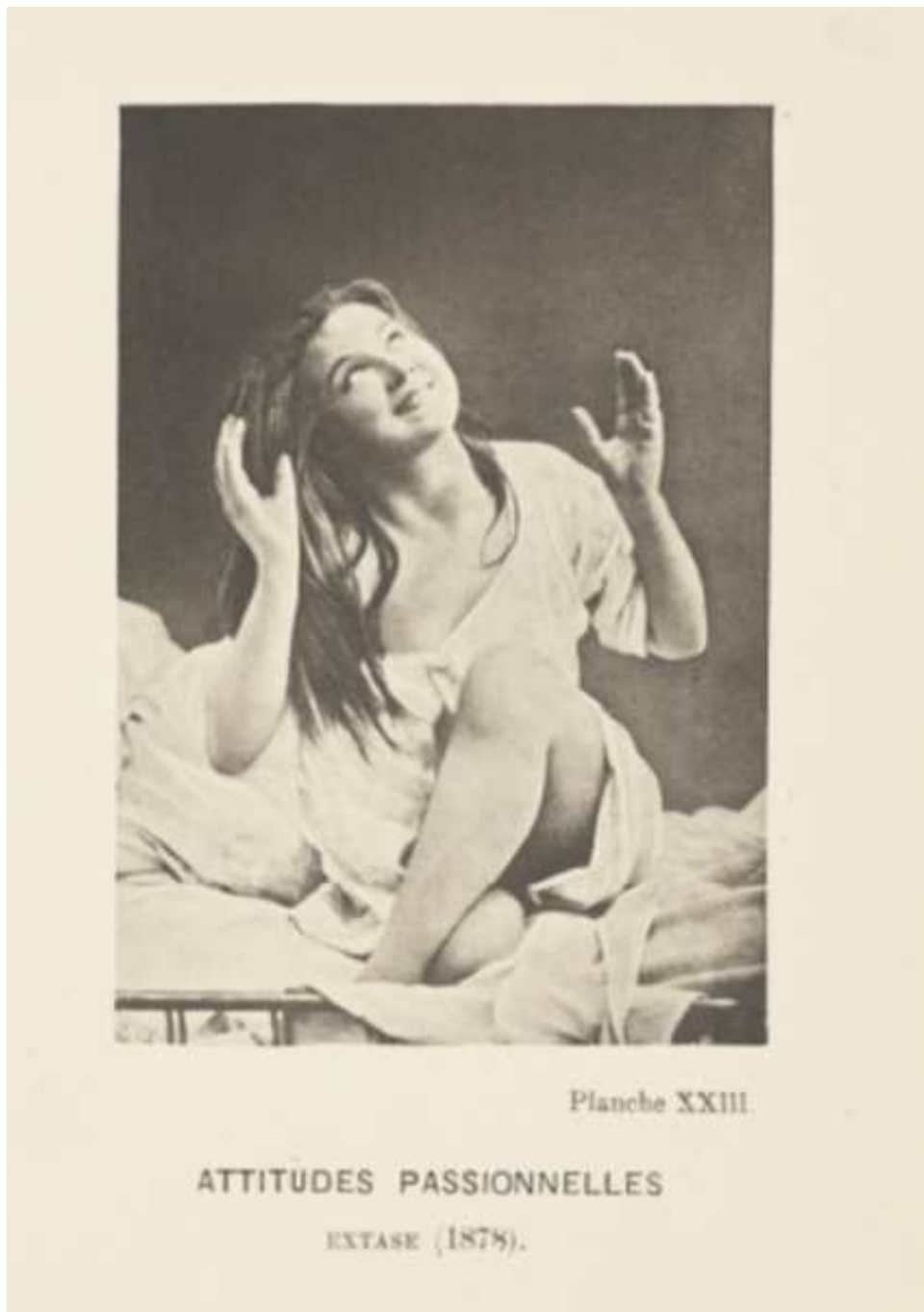


Fig. 15. Paul Regnard, *Passionate Attitudes: Ecstasy*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.



Fig. 16. André Brouillet, *A Clinical lesson at the Salpêtrière*, 1887. Oil on Panel, 290cm x 430cm. Source : https://en.wikipedia.org/wiki/A_Clinical_Lesson_at_the_Salpêtrière . Accessed January 8, 2024.



Fig. 17. View of the Analytic Couch with Brouillet Lithograph at the Freud Museum London. Source: <https://www.freud.org.uk> . Accessed March 22, 2024.

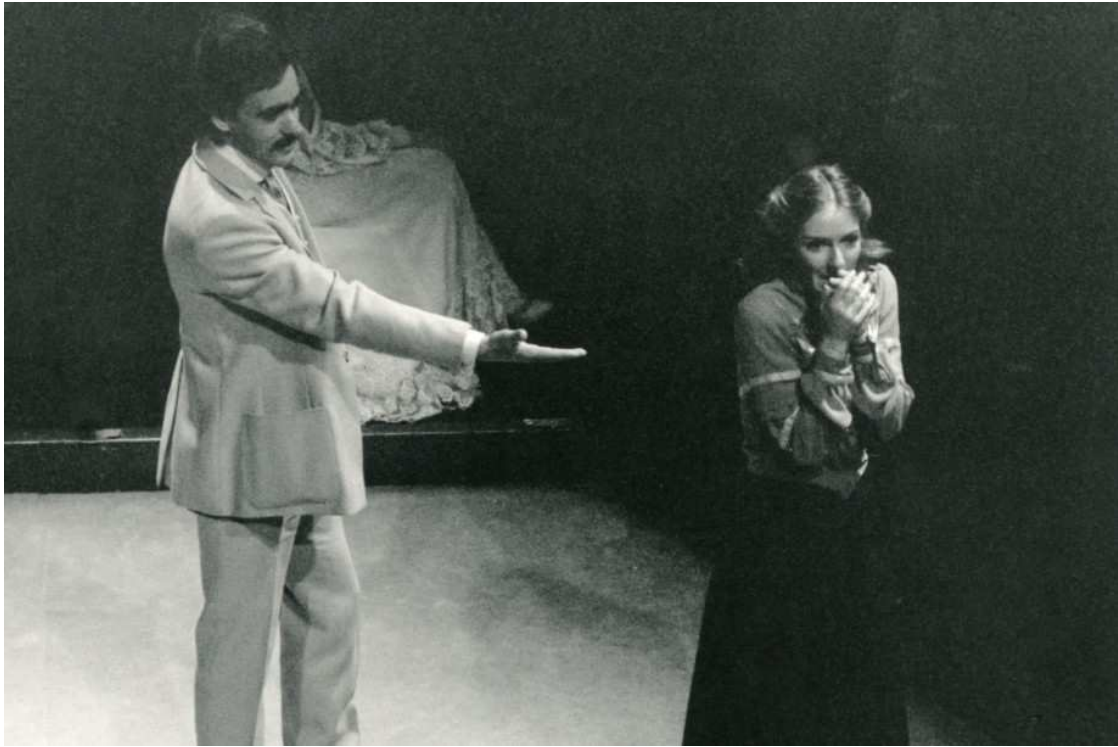


Fig. 18. Image from a performance of *Portrait de Dora* on March 25, 1983 at Théâtre de Quat'sous, Montréal. Directed by Denis Marleau. Source: <https://ubucc.ca/creation/le-portrait-de-dora/> . Accessed January 8, 2024.



Fig. 19. Image from a performance of *Portrait de Dora* on March 25, 1983 at Théâtre de Quat'sous, Montréal. Directed by Denis Marleau. Source: <https://ubucc.ca/creation/le-portrait-de-dora/> . Accessed January 8, 2024.



Fig. 20. Sarah Bernhardt in *La Dame aux Camélias*, 1881. Source : <https://www.thoughtco.com/biography-of-sarah-bernhardt-4171973> . Accessed January 8, 2024.



Fig. 21. Paul Regnard, *Passionate Attitudes: Crucifixion*, 1877. Photograph of Louise Augustine Gleizes. Source: Bourneville, Désiré Magloire, and Paul Regnard. *Iconographie Photographique de la Salpêtrière: Service de M. Charcot*. Paris: Progrès médical, 1877.

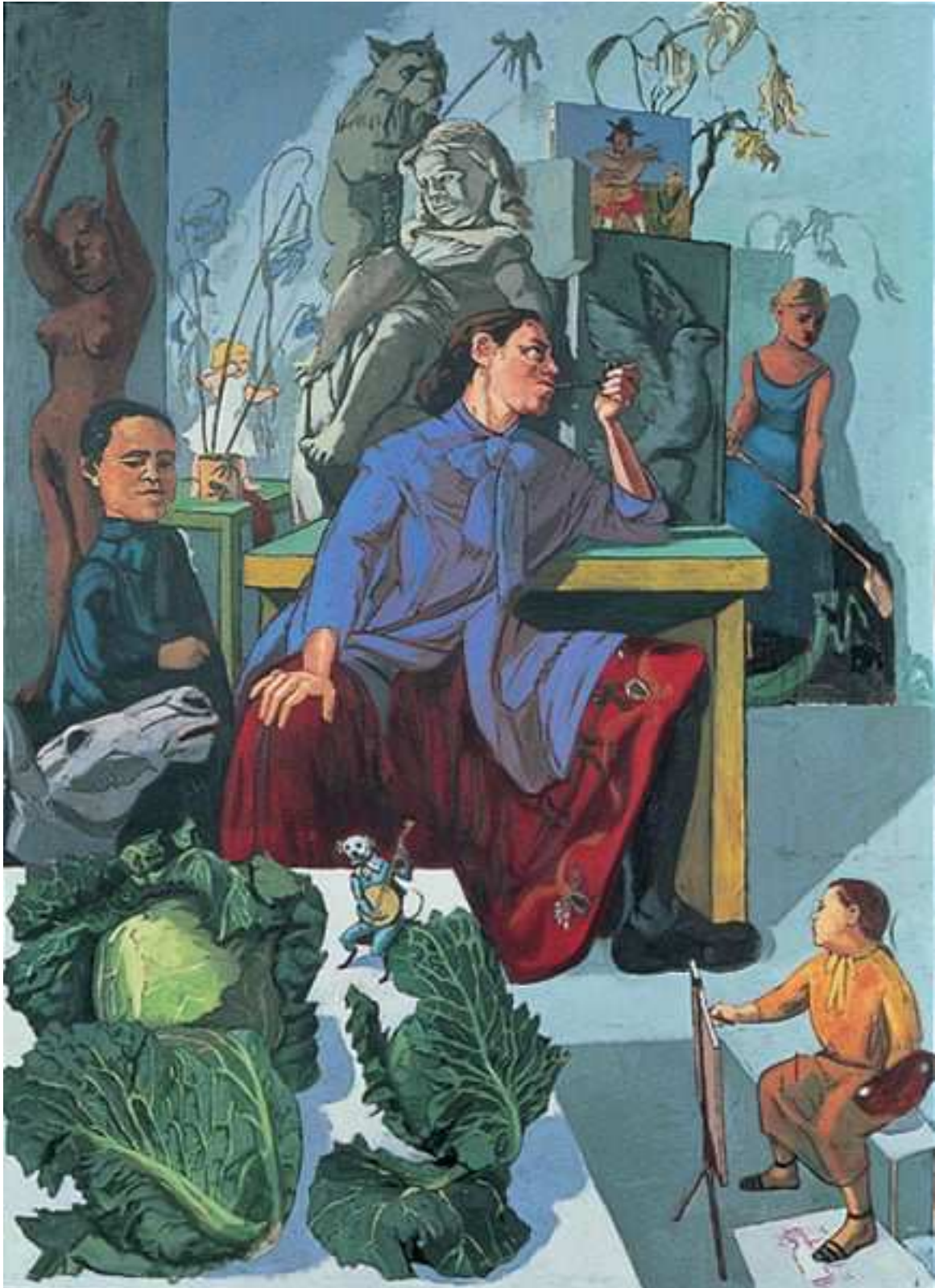


Fig. 22. Paula Rego, *The Artist in Her Studio*, 1993. Acrylic Paint on Canvas, 180 cm x 130cm. Source: Flašková, Zuzana, Maria Manuel Lisboa, Moore Ede Minna A., Giulia Smith, Laura Stamps, and Marina Warner. *Paula Rego*. Edited by Elena Crippa. Tate Publishing, 2021. 142.