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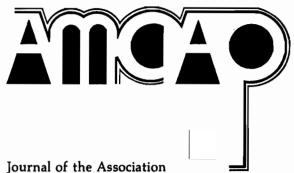
Issues in Religion and Psychotherapy

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of Mormon Counselors and Psychotherapists

January 1982 Vol. 8, Issue 1

AMCAP supports the principles of The Church of Jesus Christ of Later-day Saints; however, it is an independent, professional organization which is not sponsored by, nor does it speak for the Church or its leaders. The purpose of this Association shall be:

- a) To promote fellowship, foster communication, enhance personal and professional development, and promote a forum for counselors and psychotherapists whose common bond is membership in and adherence to the principles and standards of The Church of Jesus Christ of Latter-day Saints, both in their personal lives and professional practice.
- b) To encourage and support members' efforts actively to promote within their other professional organizations and the society at large, the adoption and maintenance of moral standards and practices that are consistent with gospel principles.

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Article 1, Section 2, AMCAP By-laws (as ammended Sep. 30, 1981)



January 1982 Vol. 8, Issue 1

Editor

Burton C. Kelley Brigham Young University

The ideas and opinions expressed by the authors are not necessarily those of the editors, Association, or of The Church of Jesus Christ of Latter-day Saints.

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Burton C. Kelly, Editor AMCAP Journal 149 SWKT Brigham Young University Provo, Utah 84602

# **EDITORIAL**

We are grateful for the opportunity of bringing this special issue on emotional and sexual intimacy to you and trust that you will find it meaningful and helpfulboth personally and in your important and challenging opportunities to serve and bless the lives of others.

Our special thanks are extended to Elder Hugh W. Pinnock for writing his paper especially for inclusion in our Journal. Although his is rightfully the lead article, he did not prepare it as an introduction to the primary subject of this issue.

Appreciation is expressed to our immediate past President, Allen Bergin, for writing the introduction to the emotional and sexual intimacy papers and also to each of the other authors, two of whom, Brothers Vic Brown and Carlfred Broderick, prepared their comments by request especially for this issue.

If you have ideas, theories and/or research findings you would like to share with fellow AMCAP members, please send them. Also please encourage others whom you think have ideas that would be helpful to us to share them. If you desire suggestions on the appropriateness of your ideas for the Journal or how to prepare them for publication, please so request. It is our desire that the Journal not only be a source of ideas for you, but also for you to share your insights with fellow members.

Further, please submit suggestions you have for the improvement of the Journal. Thank you.

BCK, Ed.

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# SOME VIEWS ON MARRIAGE COUNSELING AND MAKING A MARRIAGE WORK BETWEEN CHURCH MEMBERS Elder Hugh W. Pinnock of the First Quorem of the Seventy

I am deeply committed to the concept that the Lord, because of the love he has for his people and as an eternal assignment, has revealed to us the principles, concepts, and techniques needed to make a marriage succeed and given ways to counsel people whose marriages are in trouble. It is our responsibility to find which principles will work in each separate situation and then communicate to the counselee his or her responsibilities in the therapy procedure.

My own counseling at the present time is limited to people who are referred to me from other ecclesiastical leaders following the proper line of authority, and to a few close friends after they have talked with their bishops and stake presidents. However, my views come from twenty years of marriage counseling which began when I was called as a bishop many years ago. What follows is a simplification of the actual procedure.

I deeply respect the insights and skills of many professional counselors. I hope that a few of these concepts I offer might prove helpful in what you are doing. I am deeply committed to the concept, when we are dealing with members of the Church, to coordinate counseling between the professional counselor and bishop.

Let me share with you some of the techniques that I have observed as being appropriate, effective, and enduring. Let us begin with the initial interview. Whenever possible I ask both the husband and wife to be present while I explain to them that during our interviews I will be talking with each of them privately. This lets them know that they will have an opportunity to speak freely about anything that would be too sensitive in the presence of their mate. I also let them know that I will listen with empathy to what they say and will hold the conversations in strictest confidence.

I generally ask the one who appears to be least verbal to communicate his or her feelings first and to explain why the marriage is not meeting their expectations. I ask the other person to remain quiet. I then ask the other one to explain why he or she feels the marriage is not successful. A brief discussion of what they expect from their marriage is usually helpful at this time. Sometimes I see a little therapy being experienced during this period. Often even the most primary of objectives haven't been verbalized between them until now. We also talk about the husband's and wife's professions, education, names, ages, and accomplishments of the children and other items to help me assess what each party wants to do in order to make the marriage succeed.

I then excuse either the husband or wife and interview the remaining person briefly. I use an ecclesiastical approach to learn whether their life conforms to the laws and commandments of God, and whether they accept the divine, eternal truths we have been given.

I ask if the person would like to express anything confidential during the solo interview. I explain that I can help only to the extent that he is honest with me, wants to live the commandments, is willing to conform to principles we are discussing, and wants to lead the marriage to a healthy position. I let him know, if he has not already discovered it, that I am his friend and am also a friend of his mate. I ask the person I am talking with to take notes as we talk, and provide paper and pencil if he does not have them. I have learned that we have much better results when those being counseled take notes. I then repeat the solo interview with the other marriage partner.

The three of us then review together the gospel principles of personal responsibility, the immense importance of our earthly life in the eternal perspective and, if applicable, that the eternal family relationship is to continue because of the children that have been born to that union. They learn at this time that the success of the marriage is pretty much up to them.

We then talk about the principles of forgiveness. Assigning blame is a characteristic that retards any progress toward healing, helping, and building relationships. I sympathize with the difficulty of erasing past feelings and memories that are evil or negative but I insist that they assess their ability to do so at this time. Often an extensive amount of time is spent discussing the need to forgive and be less judgmental. It is within this context that much of the therapy seems to take place. If they are comfortable with advice found in the scriptures, we turn to the 21st Section of the Doctrine and Covenants and borrow freely from it.

Fortunately, if we are in tune in our counseling, we are endowed with the companionship of the Holy Ghost. While listening to the couple I often find myself praying for enlightenment to find the way to help each of them want to conform with the gospel principles that will save their marriage.

While preparing this article, I have considered how much of the interview time I spend listening and how much time they are listening to the ideas I want to share with them. My leaning is towards a directive approach in counseling. It happens to fit my own style better than a more passive system that has become popular since Carl Rogers did his fascinating work a number of years ago. An ideal ratio would be to have them do the talking about 80 percent of the time and for me to speak for the remainder of an hour. I believe counseling sessions never should last longer than one hour. In fact, most sessions, after the initial confrontation, can be handled successfully in about thirty minutes.

I ask each of them to use the notes they have taken

during our interviews and give each an assignment to complete before we again talk. Because I often take a few notes, we are able to compare to see if we are on the same track. If I observe problems that seem quite easy to solve during the first interview, and usually I do, I assign them to decide how they can eliminate those particular difficulties. I also ask them to bring back in writing the steps they are willing to take to work towards a solution of the total problem. I want them to begin experiencing success even if it is minor. Often the fact that each begins writing out what they are willing to do solves some of the stress being experienced.

The reason for each of these steps is usually obvious to those being counseled. When people take the responsibility upon themselves to make their marriage succeed by using eternal principles, they can produce dramatic results. I remind them often of my concern for the success of their marriage and for their own wellbeing. At the same time, I strongly impress upon them the necessity for them to exert tremendous energy to take the action that is necessary. I inform them that rarely is a problem unsolvable or a condition impossible.

I have learned by sad experience that only those who seriously want to make their marriage and families succeed will complete the assignments and use the principles I suggest. Their response to the initial interview lets me know whether to continue a counseling relationship or to terminate it.

Let me give some examples. If either partner is committing unwholesome and unholy sexual practices, dignity, self-confidence, and the Holy Spirit are lost from their marriage until they change their behavior. If they are unwilling to make the change, that unwillingness signals to me that the time is not right for solving their marriage problems. If the family is in financial difficulty but is unwilling to set up a family budget and will not respond to my advice, then I can be of little help to them at this time.

If I were to title this procedure I would simply call it Therapy by Participation, which includes being candid with each other (or self) and with me.

For a period of 7-8 months, I gave an address titled, "Making a Marriage Work." I had never had a large number of people request a talk or article I had given or written until this particular presentation. Even though a number of the principles given were hopefully helpful, I believe the real reason for so many requests is that so many of our marriages are in trouble. I have removed some of the stories and examples that I have used but left most of the points in tact. They are listed below. I altered the eighth principle to conform with a more expanding feeling I have relating to the advice found there. Obviously, many people do not go to their bishop in the first place, but they seek counseling from sometimes incompetent people elsewhere. That is why I have stated that point as I have. The talk was basically what follows.

The first idea I suggest is fundamental. We must bring the Savior and his teachings into our homes and hearts. To really succeed, an eternal marriage must be Christcentered. Though directed to priesthood bearers, the principles in Doctrine and Covenants Section 121 apply to both husbands and wives. Beginning with verse 41, "No power or influence can or ought to be maintained by virtue of the priesthood (and here are the characteristics by which power and influence can be maintained) only by persuasion, by long-suffering, by gentleness and meekness, and by love unfeigned; by kindness, and pure knowledge, which shall greatly enlarge the soul without hypocrisy, and without guile."

Going to verse 45, "Let thy bowels also be full of charity...to the household of faith, and let virtue garnish thy thoughts unceasingly; then shall thy confidence wax strong in the presence of God; and the doctrine of the priesthood shall distil upon thy soul as the dews from heaven."

Just as a building must have a strong foundation if it is to endure, a family needs the sure foundation of the Savior and his teachings. We are a spiritual people, believing in spiritual principles but first and foremost are to use the Spirit in solving problems and in receiving personal revelations that will guide our feet. Obviously praying together often-at least daily and hopefully at least twice daily--will lead to this success.

Second, do not feel that an intense disagreement in your marriage indicates that it cannot succeed. If we are to really communicate, we must be honest when we disagree. We must express hurts and let our feelings show. We can do this without becoming angry or inconsiderate. People who keep things bottled up inside are candidates for a variety of illnesses. And equally serious, that approach does not solve problems.

Serious disagreements between marriage partners does not mean that the two are becoming allergic to one another or that the situation is hopeless. It merely means that they are human and that they are not yet perfect individuals. If they acknowledge their differences in a mature way they will recognize that their marriage is okay. They simply have, in this situation, failed to communicate. They can work out their differences without jeopardizing their relationship.

Third. never make your mate the object of jokes either in private or in public. Partners who poke fun at their mates may think of it as good-natured humor. It is not. It is degrading and dangerous. To make a joke about private things a husband or wife did at home is a form of ridicule and is a way of putting him or her down. Too often the laughter conceals a spirit of malice or anger and can cause hurt feelings. Couples who respect each other do not resort to such degradation.

Fourth. do not smother one another with excessive restrictions. A loving wife of many years shared with me one of the secrets of her beautiful marriage. She told me, "It is my duty to maintain an atmosphere in our home in which my husband can reach his full potential. And you know, he is a busy businessman, bishop, and father. In turn, he helps me reach my potential." With her encouragement, he was an outstanding bishop. She later served as a counselor in two auxiliary presidencies and then as president of the stake Relief Society. She had her own room where she sewed, painted, and wrote beautiful poetry. He felt comfortable in going fishing, doing some painting himself, and growing in ways that interested him. Neither of these marriage partners was being smothered by a selfish mate. Both respected the other's needs and goals.

The most fulfilling of all marriages seem to be those in which the husband and wife together commit their live to the Savior's keeping. They are interested in one another, and wet set each other free to grow and mature; never free to flirt but free to take on new challenges and to pursue new interests. lealousy is a subtle form of bondage and is the most smothering of human passions. Husbands and wives who fear the loss of a partner's love weaken their relationship by holding on too tightly. A husband who thinks to himself, "I won't let her out of my sight," is actually expressing a fear that might push her away. Husbands and wives should allow each other plenty of room for personal growth and expression. When both marriage partners are able to develop their talents and interests, the marriage is less likely to suffer from boredom and narrowness.

Fifth, compliment each other sincerely and often. A middle-aged wife once told me, "Somebody has to keep my husband humble. He gets so much attention from others that he needs to be brought down a peg or two. He gets too big for his britches." How sad. Every husband needs a wife who will build him up. Every wife needs a husband to honor and respect her. Building each other with sincere compliments is never a sign of weakness; it is the right thing to do. Anyone who can kneel before a sacred altar with a partner and exchange vows for eternity surely can see enough good in that partner to emphasize the good when talking with others. So often in counseling situations, a divorced woman or man will say, "John has been gone now for three years. How I wish he would come back. The loneliness is unbearable. I neglected to tell him so many things." (or) "If only I had let her know how good she was in so many ways. What a fool I was. I could never learn to compliment her I was always pointing out her mistakes. When I see how some husbands and wives treat each other so coldly and with such indifference, I want to scream at them to wake up before it is too late. I want to tell them to guit their sarcasm and, instead, to encourage each other.

Wives and husbands tend to become the persons described in the compliments their spouses pay them. They will do almost anything to live up to the compliments and encouragement of a proud wife or husband.

Sixth. never resort to the silent treatment. Always be open and straight forward with each other. Too often, we may respond to marital tension by "clamming up" or "taking a walk." A young wife from the southwest corner of Salt Lake County asked me to "talk some sense into her husband" saying, "All he does is clam up when we disagree. He won't communicate. He just walks out the door. When he cools down, he comes home, but he is like ice until 1 make up with him. He can go on for days or even a week or two without saying a word." I have learned that we are wrong even to say to our mate, "Just leave me alone. I am going through a rough time. Let me work it out by myself. I just don't want to be around anybody right now." That not only is unfair and a genuine insult, but it is stupid. What is marriage if it is not sharing and helping one another through crises? We have heard all of the excuses: "I am going through the change of life; I am not feeling well; things are tough at the office; it's that time of the month; I have had a bad day at the ward; I lost a big case; my nerves are bad." But none of these excuses gives the moral right to shut out someone who loves you. Keep the door to your heart open. The times when we shut others out often are the times when we need their help the most. Of course we all need times of privacy, time to think things out, meditate, and pray. We should understand and respect this need in others. However, we should never be inconsiderate or unappreciative of a concerned husband or wife who is trying to help.

Seventh, say "I am sorry," and really mean it. Contrary to a popular saying, love, in part, means learning how to say, "I am sorry." So often when we make mistakes, sometimes innocently, damage has been done and an apology is in order. Along with learning to say, "I am sorry," husbands and wives must learn to say, "I forgive." Jesus taught that to be forgiven by our Heavenly Father depends, in part, on our ability to forgive those who trespass against us. Even when a husband or wife has cheated, we should be willing to accept their true repentance. Some of the strongest marriages of which I am aware have been between partners who could say, "I am sorry," and who forgive. In addition to saying they are sorry and really meaning it, husbands and wives must avoid bringing up the past. Thousands of marriages have survived the most critical problems and have been successful only because godly sorrow for sin was followed by Christ-like forgiveness.

Eighth never turn to a third party in a time of trouble, except your bishop. In sensitive and inspired ways, he will direct you to a competent Latter-day Saint counselor if that is needed. Someone is always ready and eager to console a hurting wife or husband. And when marriage partners have no one to talk with at home, unfortunately, too many seek a friend elsewhere. That is where almost all adultry begins. It can happen in the neighborhood, in a ward choir, at the office, or anywhere else. Secret affairs begin innocently enough -just by talking about mutual hurts. But then comes a dependency period that too often ends in transferring loyalty and affection, followed by adultry. Never confide your marriage troubles to a third party, no, not even to the closest friend of your own sex. He or she may be the first to tell your troubles to another, becoming the one to hurt you most severely. Lean on the Savior, and rely upon your bishop or stake president. This system, which the Lord has given us, is simple but it works so well.

Ninth, retain the joy in your marriage. God intends us to find joy in life (see Nehemiah 8:10 and 2 Nephi 2:25). Most marriages begin with joy, and those that succeed retain it. When a marriage loses its happiness, it becomes weak and vulnerable. Find a happy home and you will find a joyful couple at the helm. Husbands and wives who no completed on page 27

# INTRODUCTION Allen E. Bergin,\* Ph.D.

According to the evaluations turned in at the conclusion of our October 1981 convention, the panel on sexual intimacy was highly rated. This reflects both the quality of the presentations and the keen interest we have in this subject. Like professionals everywhere, we have been forced to deal with the salient sexual issues of the times as they manifest themselves in the continuing flow of problems our clients, friends, and colleagues refer to us.

We have sponsored occasional presentations over the years on topics in this realm, and members have been involved in an array of additional relevant activities independent of AMCAP. During the past two years, however, there has been a growing interest in having our organization develop programs that would bring a gospel perspective to what appears most promising and fruitful in the burgeoning field of sexological studies. Among those expressing such interests have been our AMCAP colleagues in California. They were under pressure from a new state law requiring a specified amount of training in human sexuality in order to maintain certification to treat sexual dysfunctions. David Coombs, AMCAP Area Coordinator for Southern California, proposed that AMCAP put together a workshop that would both meet the requirements of the state law and also be in harmony with Church standards.

Coincidentally, Victor Brown Jr., an AMCAP Board member, was developing materials in two areas: (1) human intimacy and sexuality broadly defined and (2) homosexuality. When the AMCAP matter arose, Vic and his colleagues at the BYU Values Institute had been working on these problems for some time, and Vic had been applying the ideas gained therefrom in a number of LDS case situations. Some of this work has now been published (Brown, 1981 a; b).

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Our Executive Committee - Richard Berrett, Richard Johnson and myself - decided to ask Vic, who had in the meantime moved to California, to assist in designing an AMCAP program on human sexuality in collaboration with the Southern California group. This decision was ratified by the Governing Board (now known as the Advisory Board) and Vic went to work with David Coombs and Paul Bramwell to develop a workshop.

There were to be two products: (1) a workshop on sexuality was to be developed which harmonized gospel values and professional techniques. This was then to be

\*Brother Bergin is Professor of Psychology, Brigham Young University.

presented at a subsequent AMCAP meeting. The format has been developed and thus far presented to two groups of AMCAP members in California. (2) A conceptual position paper on sexuality was to be written by Vic Brown representing his viewpoint and to be presented in an AMCAP symposium as a starting point for discussion and commentary by others. This paper was not presented in last Fall's intimacy panel because Vic was committed by Church Welfare meetings throughout our October convention. Richard Johnson and Paul Cook, the convention coordinators, decided to go ahead with a panel for the convention without Vic. Brother Brown's paper has, in the meanwhile, been superseded by the publication of his book on this subject. That volume, Human Intimacy: Illusion and Reality, covers the subject so fully that we consider the book to have fulfilled our request for a position paper. It is, however, Vic's own work, and is not an official AMCAP statement. In addition, Vic consented, at our request, to share some thoughts for inclusion in this issue of the Journal, and this brief set of comments appears herein.

The papers that follow in this issue of the *Journal* provide an array of suggestions for addressing these matters. They represent several views on how to approach sexual difficulties with clinical skill and appropriate reverence for the sacred and private nature of intimate behavior. Future faithful effort will continue to expand our understanding and our capacity to serve those who need help in this realm. In the meantime, it is urgent that we do no harm to those we serve.

AMCAP was founded on the premise that we "support the principles and standards of The Church of Jesus Christ of Latter-day Saints." If we are guided in our approaches to the sensitive topic of this issue by such principles and standards, we will be truitful and will find our efforts rewarding. On the other hand, if we take our lead from the philosophies and methods of the world, then we are sure to fail in our spiritual objectives, for the words of the brethren on these matters are tar from the standards of the world. May we have the ingenuity, discernment, and courage to set our own standard and style of intervention and develop effective approaches that would please the Lord.

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Brown, V. L., Jr. Human intimacy: Illusion and reality. Salt Lake City: Parliament Publishers, 1981. (a)

Brown, V. L., Jr. Male homosexuality: Identity seeking role. Journal of the Association of Mormon Counselors and Psychotherapists. 1981, 7, (No. 2, April), 3-10, ff. (b)

## SEXUAL INTIMACY: THOUGHTS FOR LDS HELPING PROFESSIONALS Victor Brown, Jr.,\* Ph.D.

My views on human intimacy, both sexual and emotional, have been extensively outlined in a recent publication (Brown, 1981); consequently, for the purposes of this special issue of the AMCAP Journal, I have chosen to focus more narrowly on some challenges in the sex therapy movement and how we might deal with them in our own practice as LDS counselors.

Few human needs are as widely debated with as much controversy as is the need for sexual intimacy. I believe a major cause of the controversy is that the debate has usually focused narrowly on sexuality instead of broadly on social, emotional and spiritual, as well as physical intimacy.

The concerned helping professional of any religious persuasion knows clients who suffer from sexual distress. The LDS helping professional may encounter even more severe distress in clients due to the virtually unparalleled sanctions by the restored gospel and The Church of Jesus Christ of Latter-Day Saints against immoral sexual thought and behavior. (Is there any other major denomination today which excommunicates for adultry or disciplines for petting, fornication or use of pornography?)

Further complicating the matter is the nature of sexual distress itself. In a secular culture which celebrates sexual prowess, less than perfect sexual performance implies personal failure or at least social inadequacy. Secular society has removed virtually all prohibitions against sexual activity between consenting adults and is moving rapidly to remove barriers to adolescent sexual activity. And, I believe there is evidence of increasing acceptance of sexual activity between adults and children (McBride & Fleischauer-Hardt, 1975).

Thus, the LDS counselor and client may be caught between pressures against and for sexual behavior. Because of the emotions generated by these fiercely contending forces, LDS professionals who are called upon to assist people with sexual problems need to be cautious and protect their professional integrity. By caution I mean wariness about what is purported to be truth; by integrity I mean honoring the finest ethics of our professions and our various covenants within the gospel and the Church.

For example, are we not obligated to repudiate techniques utilizing masturbation or exposure to visual depictions of sex acts, as well as bizarre experiments using electrode induced septal stimulation and chemotherapy which have as their therapeutic goals sexual exploitation of other people? (Moan & Heath,

\*Brother Brown is Area Director, Northern California Welfare Services.

#### 1972; Money & Alexander, 1967)

The point is that LDS professionals are constrained as are no others of our colleagues to respect Church policy, gospel principles and those priesthood officers who are authorized to bring the two together. This applies, I suggest, whether we agree or disagree, understand or not. If we err should it not be on the side of an infinite gospel rather than a finite profession?

With these thoughts in mind please consider three aspects of treatment of sexual distress.

- 1. Problems with the literature
- 2. Treatment ethics
- 3. Gospel doctrine

#### PROBLEMS WITH LITERATURE

There are two facets of error that have special bearing here. One might be called "the Victorian historical scapegoat:" the other is technique versus relationship. The Victorian Historical Scapegoat

History written by historians is often drastically different from history written by lay people in private journals and diaries. And verbal history is frequently different from written accounts. Obviously this is partly due to the fact that professional, written history is elitest, written by formally educated writers for formally educated readers.

Due to this bias, I believe, alleged Victorian era antisexuality has been misinterpreted by elitest historians and social scientists. There was no shortage of scatological literature or behavior among all Victorian classes. And Queen Victoria herself expressed a warm and intense sense of sexual intimacy. Yearning for her late husband Alfred, she wrote in her journal of being "clasped and held tight in the sacred hours at night when the world seemed only to be ourselves" (Marshall, 1972). A disservice produced by this misinterpretation has been that the rallying cry of sexual liberationists has ever since been to purge American society of Victorian prudery without regard to the consequences of the purge or even the accuracy of the rallying cry.

The 19th century saw the consequences of cumulative upheaval in all aspects of society. As old institutions such as religion, government and commerce crumbled or were radically altered, so did the social and emotional order of things undergo change. In the 18th century, Voltaire and Rousseau broadly challenged the theoretical bases of ancient institutions. In the Victorian Era, social activists began to challenge the specific impact on people of those institutions. Darwin's work was used as a vehicle to challenge religion's basic definition of man, implying that sexuality was not God-given but a consequence of mindless evolution. There was a phase where several earnest thinkers concerned about sexuality, such as Richard von Krafft-Ebbing in his Psychopathia Sexualis--A Medico Forensic Study, tried to synthesize the tattered remnants of religion and society with emerging scientific rationalism. This process spawned sterile ideas about sexual behavior (e.g. masturbation leads to insanity). Caught in a transition which they did not really comprehend, 19th century and early 20th century writers often wrapped their work in a cloak of scientific religion, using each other to legitimize the other.

Freud, Havelock Ellis, Margret Sanger and others rather courageously attacked this misshappen hybrid of religion and science, but they also were fighting personal demons, Ellis especially (Karlen, 1971). The confluence of religious, cultural and class variables were quite probably very different in the lives of these professionals than in the lives of most 18th and 19th century people, suggesting, I believe, that much if not most so-called Victorian sexual confusion was virtually an intellectualized syndrome involving a small portion of society and that this, to some extent, prevails today.

Unfortunately they did not (nor have their disciples) differentiated between the debates of the intelligentsia and the feelings about sexual intimacy of people who do not invest it with theoretical significance. In research terms, from Voltaire through Freud, the sample has been very biased and the data skewed with little relevance to the private lives of those people who felt and experienced rather than intellectualized about sexuality. Personal accounts of people as diverse as George Washington, Albert and Jeannie Barnitz, and my great, great grandmother Morris offer insights here (Flexner, 1965; Utley, 1977; Morris, 1901). This suggests that alleged Victorian anti-sexuality has actually been a scapegoat which has allowed many social scientists to react with liberal counter-theses while avoiding the facts about sexual behavior in relation to gospel values and the consequences of violating those values. If my thesis about Victorianism is correct, then secular accounts of sexual history and theory are suspect.

From this uneven secular-religious beginning has grown the structure of late 20th century sexology. The theories, research, and techniques have thus been based on two false premises: (1) that society required liberation from sexual inhibition, and (2) that traditional moral values were irrelevant or harmful.

#### Skill versus Relationship

Without doubt there are sexual dysfunctions. Among them are premature ejaculation, vaginismus, dyspareunia, and ejaculatory inhibition. However, to treat them as if they exist irrespective of a relationship is socially insidious to promote technically skillful sexual behavior to the exclusion of relationships, and it is doctrinally sinful to engage in sexual acts without due regard for values, meanings, and one's spouse. (There is, of course, no doctrinal allowance for sexual behavior other than with a spouse.)

Whether from Masters and Johnson, Kaplan, Bell and

Weinberg or Frank, Anderson and Rubenstein, their own data demonstrate that virtually all sexually-related problems derive from troubled relationships and corrective treatments rely upon relationships. This includes parent-child, peer, courtship and marital relationships. Something which supports if not proves this rule is Masters and Johnson's report of ambisexuals (1979). These people achieve nearly perfect orgasmic proficiency through nearly total emotional disinterest. By severing those bonds which are the lifeblood of human society, certain individuals develop exceptional erotic skill. From attitudes and behaviors such as this stem secular ideas that there ought not to be restrictions against sexual behavior between consenting adults.

The psychological presumptions of consenting adult sexuality have now become at least de facto legal doctrine (Hasting's Law Journal, 1979). The theoretical presumption is that adults have both the need and the right to be genitally erotic whatever their legal or moral relationship. Among the manifestations of the legalization of this doctrine are conjugal visits for married prisoners, conjugal visits for unmarried prisoners, civil rights for "gays", no-fault divorce, victimless crime, amoral sex education curricula in schools and so forth. For the LDS professional to promote sexual immorality, sexual license or even sexual amorality because it is law is no more doctrinally right than for an LDS member to gamble in Nevada because it is legal there. Nor is it sound science to ignore the reality that seldom if ever is there equality in sexual acts. Almost always one person has a relationship need which another has the power to fulfill or possibly manipulate and exploit.

There are also dysfunctions within relationships which merit attention, but to address them as technical deficiencies is like drivers' education focused on skill alone. Indeed the terrible accident rate of teenage drivers derives from their illusion, reinforced by almost every television show, that a good driver is one who can maneuver at high speed and that poor drivers are slow and cautious.

Is this much different from sex education based on skill to the exclusion of values, kindness, good humor, self-discipline and responsibility, as well as mutual enjoyment? Could a narrow technical type of sex education be a partial cause of pervasive venereal disease, explosive rates of adolescent pregnancy and rampant abortion?

When consequences such as these are added to the Gospel explanation of the source and purpose of sexuality it seems to be that we have no justification for treating these problems except as part of a relationship. In addition to several other comments about the importance of relationship, it is interesting that even articles such as Frank, Anderson and Rubenstein report the preeminence of relationship over technical skill. Their concluding sentences read:

It should be noted that the sexual 'difficulties' that we refer to in this study probably reflected interpersonal problems to which both the husband and wife contributed Dysfunctions, on the other hand, were more likely to reflect a combination of education deficits, inhibitions, physiologic problems and interpersonal conflict. All this material leads one to the conclusion that it is not the quality of sexual performance but the affective tone of the marriage that determines how most couples perceive the quality of their sexual relations (1978, p. 115).

What then can the secular literature offer? There are some real limitations. Consider four examples: Sex Surveys; the work of Masters and Johnson; masturbation therapy; and incest.

Sex Surveys. Surveying or sampling sexual behavior by questionnaires or direct observation is a guessing game that has been projected into a major enterprise in both science and the media. To my knowledge, a truly representative and accurate account of sexual conduct does not exist because they are all based upon samples of individuals who were willing to expose their private conduct. We know nothing about the large portion of the population whose behavior has remained discrete, modest and private by not opening it to investigation. For such reasons, sexual research, theories and techniques are based upon inevitable biases which reveal a picture that must be slanted in the direction of that which is exhibitionistic, hypersexual and pathological. Kinsey and his associates did not really answer as many questions as they created. They taxonomically classified numerous sexual practices from a skewed sample. We do not yet know with statistical confidence how many people in the general population do what. Masters and Johnson have increased the distortion. Through their work we know only about subjects who can perform with physiological recorders attached to their bodies and observers present. We do not know the degree of tactile pleasure nor the extent of emotional reward derived by modest, private, married couples who venerate premarital chastity and marital fidelity. Nor is it likely we ever shall, given the sanctity suggested by a theocracy which rather zealously guards our intimate privacy both from scientific research and from ordinary ecclesiastical inquiry.

But is this apparent data gap a serious problem? Consider just two pertinent, sampled "normal" couples, people with no sexually related presenting problems (Frank, Anderson & Rubenstein, 1978). This article needs to be read carefully to be appreciated for it demonstrates the very weakness I am concerned about. In essence they obtained what I believe is a profile of normal sexual attitudes and frustrations, and extrapolated it into dysfunctions and dissatisfactions. Attempting to achieve precision, which is probably unobtainable outside a Masters and Johnson type laboratory, Frank, Anderson, and Rubenstein take ordinary, frequently temporary, and readily correctible frustrations and equate them with serious problems.

It is this type of earnest, but misguided analyses, even preoccupation with abstract paradigms, which has actually undermined enjoyment of human sexuality and led to the increasing sexual lassitude of which Helen Kaplan speaks when she notes that loss of sexual desire is apparently the most prevalent of all sexual problems (1979).

Masters and Johnson. Despite major defects in their

research and in their reporting (Zilbergeld & Evans, 1980), Masters and Johnson are among the more authoritative voices speaking on human sexuality today. Without question they have studied behavior previously hidden from scrutiny both by values and by limitations of technology. But what questions does the LDS person --client or professional--ask that Masters and Johnson or their followers answer? Their methods of therapy were preceded by behavior therapists (Wolpe, 1958) and their physiological studies are of questionable significance.

Masters and Johnson study how people perform sex acts. This has never really been a question. Does their description of the excitement, plateau, orgasm and resolution phases enlighten the LDS helper or client who is operating in harmony with gospel principles? Or do the methods by which this information was obtained violate fundamental gospel principles of modesty, chastity, and dignity? Could a Masters and Johnson research subject, or a subject in a similar program, acceptably answer the temple recommend questions, especially those about unnatural, impure or unholy sex acts?

In their latest book, Homosexuality in Perspective, Masters and Johnson espouse values, vaguely describe therapies and evaluate date in contradiction to fundamental LDS doctrine. Variously they applaud amoral bisexuality, demand moral neutrality, assert that homosexuality may be superior to heterosexuality and term as "handicapped" heterosexual couples who are influenced by "theological and cultural covenant" (1979, p. 219). To follow the lead of Masters and Johnson in our quest for effective methods thus tends to enmesh us in frequent compromises with our values.

Masturbation Therapy. According to the gospel this behavior is a sin. How then could there be justification for an LDS therapist to teach or condone masturbation? There are LDS helping professionals who have adopted sensate-focused therapies as if gospel condemnation of masturbation is either modified or even overridden by professional doctrine. That masturbation, accompanied by guided fantasies or vibrators or other technical aids, enables some clients to acquire or recover heterosexual erotic competence in preference to being non-orgasmic or homosexual is irrelevant. It is a fact that an aggressive salesman can persuade many gullible people to sign a legal contract binding themselves to crushing payments. But the legality which a materialistic society confers upon such a transaction does not transcend the covenant obligations an LDS salesman has to be kind and fair to his fellowman.

There are also significant clinical and values issues to be raised apart from gospel doctrine (Brown, 1981). Common sense and social decency tell us it is not ethical to gain certain objectives by any means at our disposal. When we know that the Lord or his spokesmen have condemned certain methods, then to employ them becomes immoral and sinful. Finally, even on a technical level it is not at all obvious that the presumed positive results of hedonistic methods have lasting effects, nor that negative side-effects are avoided.

Incest. Adult-child sexuality is no longer a taboo taken

for granted but is increasingly a subject of professional speculation about its positive effects (*Time*, September 7, 1980; Cook & Howells, 1981; Diamond & Karlen, 1980). I believe that incest is going through the same legitimizing process applied previously to masturbation, pre-marital and extra-marital sex, and homosexuality. Clearly, adovcates of incest are working to gain professional "objectivity" or at the least, public apathy. Yet, incest, no matter what social scientists may sayeven if they all were united--cannot legitimately be studied by LDS professionals as if its practice would ever by anything other than a heinous crime and awful sin. Yet, as in other areas of sexuality, the literature increasingly takes an amoral approach.

#### Conclusion Regarding Problems in the Literature

Professional publications in this area have had an activist quality for many years. Unlike more scientific developments, this field has the quality of a social movement with strong political, philosophical and lifestyle aspects. The trends therein toward a technological, amoral, and hypersexual philosophy have earned deserved skepticism from competent professionals. Interestingly, some of the wisest and most penetrating critiques have been authored by intellectuals outside of the religious establishment. Consider, for instance, Rollo May's erudite analysis of "Eros in conflict with sex" in his book, Love and Will (1969), or Christopher Lasch's focus on the selfish themes of modern sexuality in the Culture of Narcissim (1978), or Thomas Szasz' exposure of the negative value agendas and consequences of sex therapy, as documented in Sex by Prescription (1980). These commentators provide a needed critique of and balance to the plethora of misleading books in this field by prominent writers such as Kaplan, LoPiccolo, Masters and Johnson, Calderone, and McCary, not one of whom adopts an appropriately moral perspective on sexual intimacy.

#### Treatment Ethics

My comments up to this point should not be read as a blanket rejection of all secular knowledge or therapies. Rather, my intent is to raise serious questions about the secular literature on the subject of sexuality.

Having examined his or her professional repertoire for illusion and distortion, the LDS counselor should be in an especially sound position from which to help people prevent or solve sexual problems.

I suggest that for the LDS helping professional it may be proper to:

1. Reinforce to unmarried clients principles of chastity, self-discipline and repentance.

2. Within bounds of modesty and propriety, assist married and unmarried clients to obtain correct biological information about the human body and its functions, this without creating sexual tension between people who are not married to each other. (This means the therapist must prevent or deal with sexual tension between himself and clients also.)

3. Help unmarried couples prepare for married intimacy by general discussions of the importance of kindness, patience, respect, good humor, cleanliness,

and other attitudes and behaviors which enhance emotional, spiritual and physical intimacy.

4. Diagnose and offer to married couples specific help for dysfunctions including vaginismus, premature ejaculation, dyspareunia, and ejaculatory inhibition, while respecting their privacy and modesty, never touching clients in an erogenous manner, nor eliciting unduly graphic or repeated and thus potentially invasive descriptions of private sexual behavior.

5. Give to married couples self-help tactile methods of an intimate but nongenital nature which the clients could then expand to include genital intimacies when they are ready, in privacy, not to be observed by anyone except the spouse and seldom reported even to the helping professional. For example, a pleasurable application of lotion (not oil) to the spouse's face or arms or legs may be suggested. Tactile experience such as this within a relationship of improved communications, kindness and courtesy helps create a climate within which full sexual communion can develop without the helping person invading the intimate privacy of his clients.

6. Demonstrate dignity and reverence for the body, its pleasures and processes by use of correct though not stilted language and relaxed, candid but not crude discussion. Avoid exposing clients to pornographic movies, slides, literature or pictures that are manufactured for so-called clinical or professional use.

7. Seek to discover methods of treatment which restore or establish heterosexual functioning within marriage, in a full sense of intimacy, without lust and with methods which are in harmony with gospel principles.

8. Assist clients to appreciate that ultimately the reason for and the consequence of sexuality--both literal and symbolic--is not simply physical excitation but to communicate affectionate respect for one's spouse and nurturance of the life created by sexual union.

9. Scrupulously honor and sustain the order and privacy of family and marital relationships and the priesthood structure of the Church, partucularly the bishop's authority.

### **Gospel Doctrine**

The Latter-Day Saint helping professional is confronted by professional and religious doctrines which sometimes cannot be reconciled. The restored gospel, as interpreted and administered on earth by eccleasiastical officers, reveals an eternal perspective on the purpose of sexual capacity. LDS professionals in physics or engineering have an implied obligation to live personally by gospel law but nuclear experiments or bridge building are seldom linked directly to scriptures or pronouncements of latter-day prophets. Intimate human behavior is quite the opposite. It is a theme of the scriptures and prophets. Among pertinent scriptures are: I Corinthians 3:16-17; Genesis 1:27-28; Moses 3:24; I Corinthians 7:4-5; Ephesians 5:23-33; 2 Nephi 2:5. Among pertinent statements by latter-day prophets, seers and revelators are:

"The union of the sexes, husband and wife (and only husband

and wife), was for the principal purpose of bringing children into the world."  $\space{-1.5}$ 

"The Bible celebrates sex and its proper use, presenting it as God-created, God-ordained, God-blessed. It makes plain that God Himself implanted the physical magnetism between the sexes for two reasons: for the propagation of the human race, and for the expression of that kind of love between man and wife that makes for true oneness. His command to the first man and woman to be 'one flesh' was as important as His command to 'be fruitful and multiply'."

"The Bible makes plain that evil, when related to sex, means not the use of something inherently corrupt but the misuse of something pure and good. It teaches clearly that sex can be a wonderful servant but a terrible master; that it can be a creative force more powerful than any other in the fostering of love, companionship and happiness or can be the most destructive of all of life's forces" (Kimball, 1974).

"Sexual experiences were never intended by the Lord to be a mere plaything or merely to sastisfy passions and lusts. We know of no directive from the Lord that proper sexual experience between husband and wife need be limited totally to the procreation of children, but we do find evidence from Adam until now that no provision was ever made by the Lord for indiscriminate sex" (Kimball, 1975).

"The normal, God-given sexual relationship is the procreative act between man and woman in honorable marriage. It was so expressed and commanded to the first man and woman on the earth as shown in Genesis 1:27-28 and Moses 3:24" (Kimball, 1969).

"First, young men throughout the Church, know that a woman should be queen of her own body. The marriage covenant does not give the man the right to enslave her, or to abuse her, or to use her merely for the gratification of his passion. Your marriage ceremony does not give you that right.

"Second, let them remember that gentleness and consideration after the ceremony is just as appropriate and necessary and beautiful as gentleness and consideration before the wedding.

"Third, let us realize that manhood is not undermined by the practicing of continence, notwithstanding what some psychiatrists claim...Let us teach our young men to enter into matrimony with the idea that each will be just as courteous and considerate of a wife after the ceremony as during courtship." (McKay, 1952).

"If sex is as sacred to us as it sould be, then it serves that status both before and after the wedding ceremony. 'Anything' does not go in marriage. Decency is as important for married people as for the unmarried. Perversions are perversions whenever indulged in, and the marriage ceremony cannot take away their stain.

"When indecency, in dignity and unnatural practices are thrust upon a good woman by a lusiful man, can she be blamed for resisting? Can any woman retain her self-respect or her regard for her husband if he insists upon and she submits to unnatural practices? How many women now called 'frigid' would resist a normal relationship? It is the unnatural, the extreme, and the indecent which sickens self-respecting women' (Petersen, 1972).

Doctrinal guidance culminates in D&C 132 where it is revealed that sexual power is both a test of moral purity and a characteristic of exaltation. If we live worthily and are exalted, then procreation and by inference, some divine manner of sexuality is granted as part of ordination to Godhood.

#### Conclusion

This paper and my work these past few years on the subject of sexuality have created mixed emotions. Sorrow and anger have mixed with empathy as I have read the literature and worked with people who seek relief from sexual distress. It is sad that detrimental illusions have been accepted by lonely, confused people. It provokes anger that some influential researchers, therapists and writers have fostered illusions about the intimate needs of people and, to borrow from C.S. Lewis, created or reinforced impossible ideas of sexuality.

Recognizing the significance sex therapists assign to technique-oriented therapy (sensate focus), I have on occasion carefully tried to teach or treat people on this basis. Admittedly, my efforts and my evaluation of those efforts are self-reported. Even so, my conclusion is that primarily technique-oriented sex education and therapy may be illusory at best and, at worst, violate both the letter and spirit of the divine gift of sexual capacity.

In treating clients with sado-masochistic troubles, my efforts to focus upon their erotic arrangements inexorably gave way to their pain about elements of relationship, e.g., unkind words, impatience, criticism, regrets lingering from courtship days, and concern about temple covenants.

Trying to cope with the damage caused by incest in several different cases, specific sexual behaviors became irrelevant. Rather, self-esteem, pathologic ambivalence about the aggressing parent, guilt and acceptance by other men (or women) and by the Lord have been the crucial matters whether the client was 11, 21, or 35 years of age.

Then, in almost mundane terms, I have found ordinary marital therapy calling for primary focus on technique. Whether it was premature ejaculation or vaginismus, progress and healing depended most upon trust and respect sufficient for the couple to nurture each other while appropriately applying technical knowledge.

That physical intimacy is only part of a greater intimate whole should be reassuring to Latter-day Saint professionals for it gives place and purpose to a powerful element of being human. Perhaps more than with any other human behavior, sexuality is defined, justified and 'v circumscribed by the Gospel and by priesthood authority. Competent Latter-day Saint helping professionals surely could render superb assistance in preventing or treating sexual problems, so long as we remain in letter and spirit well within the Gospel and the Church context.

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### SEX THERAPY WITH LDS COUPLES D. Corydon Hammond,\* Ph.D. and Robert F. Stahmann,\* Ph.D. Presented at the AMCAP CONVENTION 2 October, 1981

Recently, Allen Bergin in his President's Message in the Spring 1981 AMCAP Newsletter presented a statement of his views on sex therapy suggesting that it merely represents "modern sensual technologies" which "too frequently offer sensual substitutes for genuine intimacy" (1981a, p.1). It is our belief that Dr. Bergin has presented an extreme view which some members may have misinterpreted as an AMCAP position paper rather than an individual's opinion. The authors, having specialized in the treatment of sexual dysfunction as well as in marital therapy, will present an alternative viewpoint on the value and need for sex therapy among LDS couples.

#### The Need for Sex Therapy

Sexual dysfunction is an exceptionally common marital problem, and one that is often neglected in the treatment of troubled couples. In studying 750 couples receiving marital therapy, Greene (1970) found that 80% were sexually dissatisfied; and Sager (1976) estimated that 75% of couples in marital therapy have a sexual dysfunction. In a sample of 142 family medicine patients, Moore and Goldstein (1980) learned that 21% identified a problem with inhibited sexual desire. In their sample, 13% reported being unable to achieve orgasm, 13% rated their partner as having premature ejaculation, and 13% experienced dyspareunia (pain with intercourse). It has been Masters and Johnson's estimate that one of every two couples struggles with a sexual dysfunction.

A widespread myth exists, however, in LDS culture. The myth is that sexual problems are only a manifestation of marital discord and conflict. Therefore, if the relationship is enhanced, the sexual dysfunction will automatically resolve itself. Bergin (1981b) has subscribed to this premise and expressed his belief in the superiority of a relationship-oriented therapy over sex therapy in treating sexual concerns. This is reminiscent of an outdated psychoanalytic concept which, for example, approaches alcoholism as only a symptom of historical conflicts and underlying pathology. According to this position, if historical conflicts are resolved, the alcoholic will automatically stop drinking. Operating on this assumption, the psychoanalyst has traditionally not

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It is very true that some sexual problems originate from marital discord. Many couples seeking sex therapy also need marital therapy, which we employ prior to focusing on the sexual dysfunctions. However, in most instances, sexual dysfunctions will not resolve themselves even if the marriage relationship improves. This has been documented by various prominent sex therapy authorities (Masters & Johnson, 1970; Kaplan, 1974) who have noted that once the vicious cycle of fear of sexual failure is set in motion, the original cause of the sexual dysfunction need no longer operate to cause the problem to be perpetuated in a marital relationship.

One of the authors recalls a middle-aged LDS couple who requested sex therapy because the husband was experiencing erectile dysfunction. They had been in therapy for almost four years with four different therapists, and each therapist had offered them the same opinion: "The sexual problem is just symptomatic of relationship problems, and as you improve the relationship and communicate better it will resolve itself." The presenting complaint was never dealt with directly. The couple felt that they had a moderately good relationship to begin with, but after four years of therapy they agreed that their relationship had improved and was even better. Nonetheless, the sexual dysfunction was even more severe and was the cause of great frustration and pain to the couple.

Another young couple sought sex therapy after only a few months of marriage because the husband was unable to ejaculate during sexual relations with his wife. They were deeply in love, had been married in the temple, and essentially were still on the honeymoon. Nevertheless, a dysfunction existed. He had come from an LDS home, but his two older brothers had gotten their girlfriends pregnant and had to get married. He recalled vividly the anguish of his mother, and her threat to disown and never speak to him again if he followed in their footsteps. Throughout his dating and courtship he was very proper, and he also never indulged in masturbation. However, after marriage he was unable to dispel overnight his previous limits. Furthermore, his wife experienced serious pain during intercourse, which also caused him great concern and preoccupation. Part of her dyspareunia appeared to be caused by the "horror"

stories she had been told by her recently married girlfriend about how painful sex was for her. Gynecologic evaluation also revealed `an organic problem which required minor surgery. Conjoint sex therapy followed the surgery and was successful in less than three months. Emotional intimacy and personal righteousness had not safeguarded them against dysfunction.

#### Sexual Dysfunction in Happy Couples

In the authors' experience, sexual problems are often not a manifestation of marital discord and conflict. It is not at all uncommon for dysfunctions to be present in otherwise happy marriages. At the Sex & Marital Therapy Clinic at the University of Utah Medical School, we have seen many relatively newlywed LDS couples as well as several members of stake presidencies, numerous bishops, and stake high councilors. In the vast majority of instances their overall marital relationship and communication were very good, but they still suffered with sexual dysfunctions. They were grateful to receive sex therapy and enthusiastic about its results.

In the New England Journal of Medicine Frank, Anderson and Rubenstein (1978) presented the results of a study of well-educated, white, middle-class couples-volunteers from church and community groups who were not involved in therapy. The couples felt that their marriages were working and they were definitely above average in marital satisfaction compared with the general population (83% rated their marriages as "very happy" or "happy"). Despite the high degree of marital happiness, 03% of the women and 40% of the men reported a sexual dysfunction, and sexual "difficulties" were described by 77% of the women and 50% of the men. Among the women, 48% had difficulty getting sexually excited, 33% had difficulty maintaining excitement, 46% had difficulty reaching orgasm, and 15% were unable to experience orgasm. Among the men, 7% reported difficulty getting an erection, 9% had difficulty maintaining an erection, 36% ejaculated too quickly, and 4% had difficulty being able to ejaculate. In regard to sexual "difficulties," 47% of the women and 12% of the men were unable to relax during sexual involvement, 35% of the women and 16% of the men expressed disinterest in sex, and 28% of the women and 10% of the men described themselves as "turned off."

The Frank, et al. study illustrates that a sexual dysfunction does not always have to cause widespread disruption of the entire relationship and marital dissatisfaction. Where there is emotional intimacy and high satisfaction in other areas of the marriage, some couples are successful in tolerating sexual problems with minimal disruption by compartmentalizing and insulating them from the rest of the relationship. However, sexual intimacy and fulfillment are important and valued by most couples, and in the authors' experience, dysfunction can over a period of time frequently cause deep resentment, emotional distance, and deterioration in the marriage.

Sensual Substitute or Catalyst for Intimacy? Bergin (1981b) made what seems to us a misleading and generally inaccurate statement that, "We have hastened to turn people into sensual acrobats with criteria for judging success being established mainly on a physiological base" (p. 13). He then quoted from Levine and Agle (1978) only a portion of their criteria for sexual improvement and reaching, in our opinion, an unjustified conclusion: "Such criteria mislead therapists and clients into targeting their efforts on sensual performances rather than upon the relationship qualities that are necessary for positive and lasting intimacy. It has been assumed by many therapists that either (a) the relationship in which sex occurs, its permanence or moral quality is not the therapist's business since he or she is a technician, or (b) the quality of the relationship is important; but that improving sex will improve the relationship" (p. 13).

Unfortunately, in selectively quoting from Levine and Agle (1978) their criteria were misrepresented. In the paragraph immediately prior to the one quoted by Bergin, Levine and Agle (1978) stated, "There are at least two sets of distinct standards for success in therapy for any sexual dysfunction." Their first standard, also cited prior to that which Bergin quoted, was: "The patient or couple should become aproblematic in the areas of desire, performance and emotional satisfaction" (emphasis added) (p. 236). Furthermore, in the results of their study, they found that "Of the 30 spouses, 24 reported significant gains in nonsexual areas. These included freer communication and mutual understanding, increased closeness, more 'self understanding' (p. 241). Furthermore, the couples they selected for study felt they did not have marital problems which were causing erectile dysfunction, and expressed that they were committed to their marriages.

As clinicians, we have found that in fact the majority of relationships do improve when sexual functioning improves, although if there appear to be marital conflicts which are causing sexual problems, we always employ marital therapy before proceeding with sexual counseling. Of the dozens of sex therapists the authors have professionally associated with, the vast majority emphasize and work to enhance both emotional and sexual intimacy for the couple.

Bergin (1981b) further made what we perceive to be an extreme statement, "Sex therapy with married couples can induce such concentration on bodily sensations and excitement that the broader issues of kindness, selflessness, patience, and loyalty are lost. In narrow eagerness to obtain sensations, a married couple may lose those feelings which compose a broader and deeper relationship" (p. 14). We consider this a generally distorted perception of the field of sex therapy and seldom find this to be true. Naturally, there is more to an eternal companionship than sexual expression. A skilled sex therapist will not treat the sexual relationship in isolation, but always attend to the overall emotional relationship of the couple. Sex and marital therapy are often done in combination.

We are pleased that what have been derisively called "sensual technologies" have been developed because many couples lack skills, both emotional and sensual, to sensitively and tenderly convey love to their eternal companions instead of just "having sex." In many couples, we find that sex is perceived as coitus alone; there is relatively little touching and affection exchanged in the marriage. These couples seem to only know how to relate in crude, sexual ways rather than with tender gentleness. In these couples, we might refer to this unrefined sexual expressiveness and lack of affection as "sexual substitutes for sensual tenderness and genuine initimate expression."

It is vital for us to acknowledge that sexual intimacy is also an integral part of marriage. True, many couples need to learn to be less selfish, and achieve emotional intimacy through improved commuication skills. At the same time, however, many of these same couples also need to learn how to achieve sexual intimacy and fulfillment. What about those persons who are so unknowledgeable that they are unable to please their partners and whose partners are too shy to guide them? For example, we have seen many relationships where the woman feels taken advantage of and believes that her pleasure and fulfillment are unimportant to herself and her mate. She ends up feeling that it is her duty and obligation to "service" him, and feels unloved because he is unable to show love tenderly.

Our goal must be to assist couples in achieving both sexual and emotional-spiritual intimacy. Sexual expression is for more than just procreation, as taught by Joseph F. Smith:

The lawful association of the sexes is ordained of God, not only as the sole means of race perpetuation, but for the development of higher faculties and nobler traits of human nature, which love-inspired companiumship of man and woman alone can inspire (Smith, 1917, 20,730

Sexual intimacy creates a deeper and closer intimacy and is one of the most powerful ways of communicating love, affection, and support. President Spencer W Kimball has addressed this issue on several occasions. For example, in the April, 1974 General Conference, he quoted with approval the following statement from Billy Graham:

The Bible celebrates sex and its proper use, presenting it as God-created, Cod-oriented, and Cod-blessed. It makes plain that God himself implanted the physical magnetism between the sexes for two reasons for the propagation of the human race, and for the expression of that kind of love between man and wife that makes for true oneness. His command to the first man and woman to be "one flesh" was as important as His command to "be fruitful and multiply" (Kimball, 1974, quoted in Burr, Yorgason, and Baker!

In 1975, President Kimball stated that:

We know of no direction from the Lord that proper experience between husbands and wives be limited totally to the procreation of children - (Kimball, 1975, p. 4)

#### Respect & Ethical Practice

Bergin (1981b) observed that sex therapy can produce deterioration effects, but this is not different from all other forms of therapy (Bergin & Lambert, 1978). Naturally, one who has suffered from impotence for years will be depressed if therapy is unable to alleviate the problem, and his spouse may be even more unhappy and depressed if treatment is unsuccessful. In some cases, a marriage may even dissolve because of a partner's unwillingness to continue living with severe sexual frustration.

It is likely that some clinicians of questionable ethics and training will disregard client values and suggest things that would be offensive to LDS couples and other moral persons. However, this is not a problem unique to the specialty of sex therapy. Mormon couples must always discriminatingly choose therapists who work with respect for their values and beliefs. One of the characteristics that the authors most prize about Dr. William Masters is his extreme emphasis on respectul affirmation and acceptance of the patient's moral values when engaging in the clinical practice of sex therapy. Because of his international reputation, Dr. Masters has worked with couples of many different cultures and religions from all over the world. He emphasizes very strongly the need to work within the value system of the patient and to "never get anyone in trouble with their God." It is our belief that most mental-health professionals who have specialized in sex therapy adhere to this philosophy

The Code of Ethical Standards of the American Association of Sex Educators and Therapists (AASECT) specifically states: "Sex therapists should be aware of the personal value system that they introduce into the therapy context and should disclose these values to the client when such information is relevant to treatment. Moreover, therapists should avoid gratuitously enunciating opinions or prescribing values that reflect their personal biases rather than being responsive to the needs and well-being of the client" (Masters, Johnson, Kolodny, & Weems, 1980. p. 415). In explicating these views, those specializing in sex therapy have taken a stronger stand on the importance of atfirming client values than most other professional groups in their ethical codes.

We agree that it is a travesty when an unethical clinician urges clients to violate their values and stresses only physical technique and gratification without the perspective of emotional-spiritual intimacy and respect for the partner's individuality and free agency. In considering destructive outcomes, however, is it any less a travesty for an ignorant or inhibited helping professional to cause istrogenic damage to clients?

One of the authors recalls a young LDS couple, married in the temple. The husband suffered ejaculatory inhibition and was unable to ejaculate with his wife by any means. Seeming to operate on the assumption that sex is only for procreation, a physician unempathically told them not to worry. "There is always artificial insemination." Similarly, we recall physicians telling men in their forties and fifties that they should not be concerned with their loss of erection because "You can't stay young forever." Is it any less a travesty for an unknowledgeable LDS counselor to tell a couple that if they continue to pay tithing, pray together and stay close a sexual dysfunction will work out by itself? As clinicians it is heartwarming to see a young couple, in deep pain and turmoil because of vaginismus which has prevented the consummation of their marriage of over a year, report that after brief sex therapy (8 sessions) they are expecting a child and fulfilling an important goal in their marriage. Vaginismus is a condition that may be cured virtually 100% of the time through "sensual technology." It is heartbreaking to see a couple unable to consummate their marriage because the 45-year-old husband suffers from primary erectile dysfunction and has never been able to maintain an erection sufficient for intercourse, although nothing is physically wrong. We see couples every week who have been frustrated by years of sexual rejection, whose temple marriages have gradually deteriorated through hurt, resentment, and deprivation. In utter hopelessness some divorce, while a few, although married, seek consolation in the arms of a lover.

Bergin (1981b) wondered about negative effects on children, saying, "The sex therapies become so preoccupied with pleasure that the consequences for marital stability and positive development in the child are lost sight of" (p. 14). We find that such a position cannot be supported. What about the potential impact of marital dissolution on the children if frustrating sexual dysfunctions are not treated? The couples we counsel have often had relationships deteriorate because of sexual frustrations until they are unable to model a healthy relationship for their children or educate them constructively about the sexual aspect of an eternal marriage. Our great concern is the negative impact on children of sexually dysfunctional couples who model aloofness and lack of affection.

#### The Specialty of Sex Therapy

Annon (1970) described a four-level PLISSIT model for conceptualizing the levels of intervention which are needed in treating sexual problems. The first level of intervention is Permission. It is our hope that all counselors, as well as all physicians and other health professionals, will acquire a level of personal comfort with sexual issues so that they can convey permission to discuss sexual concerns to their clients. The next two levels of intervention require more in-depth knowledge and training, and essentially comprise what we refer to as a sex-counseling level of work. Limited Information and Specific Suggestions can often be provided in a short period of time by the therapist who has studied sexuality and acquainted himself with factual information (Calderone and Johnson, 1981; McCary, 1978; 1973). This information may also include LDS philosophy. However, we express concern with what LDS counselors may present as Church doctrine. We have often heard of individual Church members passing on information which reflects their own opinion and inhibitions about what is acceptable instead of Church policy.

There are definitely times when limited information is all that is necessary to resolve a problem or conflict for a client. One of the authors remembers receiving a telephone call last year from a young returned missionary. He was feeling very guilty and thinking he was over-sexed, "carnal, sensual, and devilish" because he awakened with erections several mornings a week. He had gone to a physician to discuss the problem, but had been given no information and was referred by the physician back to his bishop, who in turn referred him to the Sex & Marital Therapy Clinic. He did not realize that every male spends 20-25% of each night from birth until death having erections, and that this is a natural physiological occurrence for men during their life cycle. The pattern of having occasional morning erections simply meant that he was alive and aware, not depraved. This limited information greatly relieved him and helped him understand both himself and a natural physical occurrence.

The final level of intervention in the PLISSIT model is Intensive Therapy. Sex therapy requires the highest level of training and expertise. The Ethical Standard of Psychologists and the Standards for Providers of Psychological Services clearly stress the ethical obligation to recognize the boundaries of our competence and training as professionals. Practice in a new area of specialization such as sex therapy ethically requires both a base of thorough knowledge obtained through advanced coursework, and supervision in the new specialty area. We deplore the blatantly unethical trend among helping professionals to teach themselves how to practice sex therapy, usually by attending one brief workshop and then trying to stay a chapter ahead of the client couple in reading a sex therapy text.

The ethical practice of sex therapy particularly requires the non-medical mental-health professional to carefully master a complex body of medical knowledge relevant to conducting a thorough assessment. It is vital for the sex therapist to be knowledgeable concerning gynecological, urological, endocrinologic, neurologic, and vascular impediments to sexual function, as well as the effects of various illnesses and medications on sexuality. Without such a foundation of knowledge (Kolodny, Masters & Johnson, 1980) the therapist cannot differentially diagnose organic from psychogenic dysfunctions, and know when to have special medical consultants conduct tests and evaluations.

Dr Bergin (1981b) noted that psychotherapeutic research in general shows "few differences in the effects of different techniques" (p. 3), and "in most cases, only a modest amount can be attributed to technical factors." In the psychotherapy literature, few differences are found in outcome rates between different technical and theoretical approaches, and most of the variance appears to be accounted for by client and therapist characteristics and relationship factors. This evidence does not appear to hold up as well, however, in much of the sex therapy research literature. In the treatment of vaginismus and premature ejaculation, for example, treatment programs using modern sex-therapy techniques typically have outcomes of 90-100% effectiveness, whereas traditional verbal therapies have been very ineffective (Stuart & Hammond, 1980; Hogan, 1978). Ovesey & Meyers (1968) describe a 30% effectiveness rate in treating retarded ejaculation by psychoanalytic therapy, while more recent sex-therapy completed on page 27

## SEXUAL AND EMOTIONAL INTIMACY: A NEED TO EMPHASIZE PRINCIPLES Val P. MacMurray,\* Ph.D. Presented at the AMCAP CONVENTION 2 October, 1981

I would like to make it very clear at the outset—in fact, I must make it clear--that in discussing the topic of sexuality, I am speaking for myself as an individual and not for the Church. As you know, the Church has not issued a global statement on sexuality; were such a pronouncement to be made, I would not be its spokesman.

With that understanding, however, I would like to explore some ideas about sexuality with you in the context of our common membership in the Church, our joint commitment to the principles of the gospel, and our pursuit of both spiritual and intellectual excellence as professionals.

To provide a context for my comments, I would like to summarize a lively and provocative session dealing with the topic of sexuality which I attended last spring at the Mormon History Association meetings in Rexburg, Idaho. Harold T. Christensen of Purdue presented the results of a 1978 study of premarital sexual attitudes and behavior among Mormon and non-Mormon students, compared to the equivalent data for 1968 and 1958. He concluded that sex norms for Mormons are conservative and resistant to influence from secular values, primarily because of Church teachings and attitudes, and that the distance between sexual attitudes of Mormons and non-Mormons is increasing. He also found that Mormons who were sexually involved before marriage felt more guilt than non-Mormons and were likely to leave the Church because of their negative feelings.1

Marvin Rytting of Indiana University, Purdue at Indianapolis, and his wife, Ann, presented another paper in the same session analyzing a random sample of articles from the Improvement Era, Ensign, New Era, Instructor, Church News, and General Conference talks from 1951 to 1971 for references to chastity. They found that the admonitions to be chaste increased fairly steadily, starting by the mid-sixties until, in the seventies, the increase was "dramatic." Statements about chastity also became more explicit. "In the fifties, it was most common to make very general statements about being clean and pure and chaste or saving yourself for marriage." The sixties began adding admonitions "about what not to do. In the seventies most of the admonitions were specific." Furthermore, during the fifties, "chastity was generally presented in positive-almost romantic--terms as the best way to be happy and to make others happy. More recently, the focus has been on the negative reasons to avoid sexual activity." The talks also began showing great concern with the immorality of society as well as with personal sexual morality.

The authors summarize their findings by characterizing the message they think Church members receive: "Social control has broken down and individual self-control is being rejected...In order to control our sexual urges, our best defense is to avoid sex as much as possible...In the midst of our deep concern to avoid evil, there is little room for sex to be a beautiful and natural expression of affection."<sup>2</sup>

Without any data to confirm or refute the Rytting study, I wish to share my personal impression that the concern for sexual misconduct has indeed intensified in public pronouncements and that the General Authorities have been faithful in their duty to define sin and describe its painful consequences. At the same time I have been in a position to have had more private consultations on the subject with some of these Church leaders and these experiences have left me with a feeling that they have a very positive attitude and stance toward the broader issue of sexuality. If we assume that statements made in a context of "misconduct" are representative of broader attitudes, we may be making unsound conclusions.

The commentator on those two papers, Marybeth Raynes, a marriage counselor and clinical social worker with Salt Lake County Mental Health, West Side Unit, observed that Mormons are frequently placed in a "double bind: On the one hand there is a stated positive goal of happy marriages and happy people with the positive theological stance toward eternal sexuality (eternal lives in eternal marriage). On the other, is a negative approach to teaching that goal. Most essentially, this is a means and ends problem. It is impossible to achieve a positive end using negative means. Knowing what *not* to do is not very helpful in trying to decide what *lo* do."

She shared with the audience a number of suggestions

Harold T. Christensen, "The persistence of chastity within contemporary mormon culture: A case of built-in resistance to secular trends," Mormon History Association annual meeting, 1981, typescript.

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Marvin and Ann Rytting, "Exhortations for chastity in church literature: A content analysis," Mormon History Association annual meeting, 1981, typescript, pp. 2, 4, 15-16.

she thought helpful: The first was "that the process of teaching, discussing and exhorting about sexuality (should basically) change from a negative to a positive one. The means and ends must match to increase the likelihood that members of the Church can gain the goal of happiness or eternal lives." She gave an example. When a child is told, "Don't spill the milk," he must "understand and be able to image the forbidden behavior...before (he) can imagine the absence of the action. However, if a person is told, 'Hold the cup firmly and bring it carefully to your lips,' only behavior wanted is called to mind." Marybeth then said, "In my view, translating all of our injunctions about sexuality in the moral code into positive phrasing and meaning will result in more willing obedience with (perhaps) fewer negative...effects."3

Because of our increasingly unique religious value system as a people and a culture, we're accustomed to hearing sexuality talked bout in terms of negatives and prohibitions ("Thou shalt not commit adultery," "Their whoredoms are an abomination unto me"). While these are important there is also reason to give equal time to the scriptural statements emphasizing the positives of sexuality. I found it to be refreshing to go to the scriptures and read some of these:

1. "The wife hath not power of her own body, but the husband: and likewise also the husband hath not power of his own body, but the wife. Defraud ye not one the other, except it be with consent for a time, that ye may give yourselves to fasting and prayer; and come together again, that Satan tempt you not for your incontinency"(1 Cor. 7:4-5).

2. "Live joyfully with the wife whom thou lovest all the days of thy life" (Eccl. 9:9).

3. "My beloved is mine, and I am his" (Song 2:16).

4. "Rejoice with the wife of thy youth...Let her breasts satisfy thee at all times; and be thou ravished always with her love" (Prov. 5:18-19).

#### A PROFILE OF THE "SEXUALLY WELL"

These scriptures not only admonish but commend married love, including its sexual aspects. Perhaps it would be useful for us to consider a profile of the sexually well person. Let's review a few of the things that I think might help us in constructing this important view:

1. Sexuality is apparently a characteristic of divinity. President Kimball has affirmed: "The sexual drives which bind men and women together as one are good and necessary. They make it possible to leave one's parents and cleave unto one another."4

2. We have no details on the relationship between divine sexuality and divine procreation, but we know that procreation ("A continuation of the seeds," D&C 132:19) is promised those whose righteousness in this life qualifies them for the highest degree of celestial glory in the next.

3. When the Gods created the bodies of Adam and Eve, they were created neither neuter nor androgynous, but "male and female" (Gen. 1:27). Sexuality thus became an inherent part of our mortal experience.

4. The Gods, furthermore, did not create those bodies primarily as snares and temptations to us, as impediments to our righteousness, but as instruments for expressing righteousness; literally, we would not become like them without bodies. Eating and drinking are possibly the most common and the most necessary of physical activities after the sheer act of breathing. It is these very activities of eating and drinking--common, ordinary, daily--through which we participate in the sacred ordinance of the sacrament. In much the same way. I believe, there can be something sacramental about the sexual relationship between marriage partners. As Elder Boyd K. Packer says: "In marriage all of the worthy yearnings of the human soul, all that is physical and emotional and spiritual, can be fulfilled."5 "This power (of creation) within you is good. It is a gift from God our Father. In the righteous exercise of it, as in nothing else, we may come close to Him."6

As I thought more seriously about the profile of the sexually well person, I found myself recalling an influential essay by David Wulff that I had encountered at the University of Michigan. He noted: "In profoundly healthy people...sex and love can be and most often are perfectly fused. (They) tend not to seek sex for its own sake, some preferring to give it up for the time being when it comes without love and affection. Sex seems to be less important to these people because of their enjoyment of the fulfillment of higher needs."<sup>77</sup>

As Wulff has pointed out, the sexually well person appreciates his or her sexuality, rejoices in it, and is fulfilled by it, but, if I could paraphrase his idea, is not defined by it. In other words, the sexually well person gives his sexuality an honored place in his life, but balances and controls its expression with other values and principles. (In the discussion that follows, I will use the feminine pronoun; the concepts apply to men as well, of course.)

I think to the extent that the sexually well person accepts and appreciates her sexuality, it would become a force that made her relationship with herself, with her spouse, and with her God better, stronger, and more binding. In other words, sexuality would not be an unacknowledged element in a person's life, something she tried to ignore about herself, something that was present but not talked about in the marriage relationship, or a part of one's life from which God was excluded. It would be prayed over and for. In fact, I

Marybeth Raynes, "Response to Harold Christensen and Ann and Marvin Rytting's Paper[s], Mormon History Association annual meeting, 1981, typescript, pp. 5-7, 9-10.

Spencer W. Kimball, "Privileges and responsibilities of sisters," women's meeting 1978, Ensign, November 1978, p. 102.

Boyd K. Packer, "Marriage," conference address, Ensign. May 1981, p. 15.

Boyd K. Packer, *Teach ye diligently* (Salt Lake City, UT: Deseret Book, 1975), pp. 260-61; as cited in "Thoughts on marriage compatibility," (no author), *Ensign*, September 1981, p. 45.

David M. Wulff, "Some thoughts on personal sexuality," Perspectives, University of Michigan Office of Orientation, n.d., p. 14.

became convinced that the dominant attitude of the sexually well person toward her sexuality would be gratitude. Let me share some thoughts with you about what I mean:

1. The sexually well person would feel gratitude toward her own body for its ability to respond to pleasure. I think it's important to make the point that someone who is grateful for her body respects and appreciates it. She does not deny it, punish it, or ignore it. On the contrary, she pays proper attention to it, and welcomes appropriate opportunities to understand its possibilities and potentialities.

2. The sexually well person would feel gratitude to her husband. The possibility of loving a well-beloved other should be a tremendous source of happiness, especially since it is mingled with the realization that our own fulfillment has been made possible by that same spouse's desire to give pleasure as well as receive it. Related to this, and I think it is fairly obvious, there is a sense of a unique bonding created by that sexual union. We break bread with many people. We work on different projects with many people. We even share our hopes and fears with many people, though certainly not to equal degrees. Though the idea is losing popularity in the culture and society around us, one of the characteristics of a healthy marriage is its sexual fidelity--the luxuriant certainty that only the two of you know and understand that part of the relationship, that only the two of you share that activity, that pleasure, that learning and loving.

3. The sexually well person would also feel grateful to God, not only for the blessing of a physical body, but for knowing and loving another person, and, in a temple marriage, for the sealing ordinances that make the possibilities of that union extend beyond death. In addition, just as sexual activity can enhance our respect and love for our own bodies and can increase our loving knowledge of our spouses, so our sexual activity can increase our love, reverence, and knowledge of our heavenly parents. Obviously much of our mortal probation is designed to help us develop godly attributes by giving us opportunities for growth. We are used to thinking of service, of charity, of missionary work, of patience, of forebearance, and forgivenesse as such opportunities. I would like to suggest that another such opportunity to understand godliness occurs in the cherished privacy of our most intimate relationships as husbands and wives. And to the extent that we perceive it as such, so it is,

Now, just speculate with me for the moment. If our chief attitudes toward our sexuality were respect, appreciation, and gratitude instead of fear, guilt, or perhaps anger, what would we teach to ourselves, our children, or our clients? How would we reteach concepts that may have been badly learned in the first place, and how would we go about healing some of the wounds left by damaging experiences that people have had up to this point? And how would we be sensitive to members of the Church who do not fit easily into the categories of premarried youth and married people who have sexual access to each other? Here I'm thinking of the physically handicapped members who need help in working out the sheer mechanics of the sexual relationship. I am thinking of older, single people who, unlike teenagers, need to cope with long-term frustrations, fears about diminishing fertility and potency, and the need to establish a repertoire of ways to communicate affection physically but not sexually. I am also thinking of the large population of divorced and widowed Mormons, who have the memories and the desires of married people but not the lawful means of gratifying all of those feelings.

For one thing, I suspect that we would want to give at least equal time discussing the positives as well as the parameters and limits, or "thou shalt nots." For example, my wife and I have thought seriously and praved earnestly regarding teaching our children about their sexuality, particularly as they approach adolescence. Taking the positive stance I'm suggesting has meant more than simply telling them to stay out of the back seats of parked cars. We feel it important to discuss how they feel about their bodies, share our own feeling of gratitude for ours, and suggest some appropriate ways-given age, maturity, and relationships--that they can express their own sexuality. Again, despite the negative models abundant in our society there are still positive models both within and without the Church for our children to look at, think about, and talk about.

We want our children to be proud of their bodies. We want them to know that just as their hands and minds can do wonderful things, so can their sexuality. We want them to understand the preparatory changes, both physical and emotional, as being both important and natural developments.

We also want them to understand positive reasons for waiting and for avoiding experimentation. We want to talk about self-control and fidelity to an as-yetunchosen mate. We ourselves want to provide positive models for thinking about, talking about, and acting on our sexuality. We believe that our example needs to extend to positive speech as well as avoiding vulgarity or crudeness. We want them to understand that the sacredness of sexuality and the sacred use of our bodies is related to our eternal destiny as gods and goddesses and that we will understand that sacredness as we understand more and more about the plan of salvation and exaltation. But we also want them to know that sexual activities, as well as other dimensions of a marriage relationship, have problems to be worked out.

I suspect that we would want to emphasize the holiness of sexuality and eliminate some of the mysteriousness which makes it frightening and tempting. It would not be something that separates us from God, but something that links us to him. One of the things I noticed as a teenager is that all of the descriptions of sex as "sacred" didn't seem to relate meaningfully to my own barely controllable urges. How could something so powerful and exciting be sacred? I frequently solved the dilemma by deciding that I didn't fully understand what sacred meant and would simply feed bad about those feelings. However, for some, guilt may prevent sharing feelings about sexuality with the Lord--which means that we are excluding him from that part of our life. No more there than anywhere else will he intrude without an invitation.

#### TOWARD A SYSTEM OF ETHICS AND DELINEATION OF PRINCIPLES

As a Latter-day Saint, I think it is important to begin a discussion of sexual morality by understanding how sexuality is part of our total theology. We need to emphasize not just the surface meaning of those scriptures about purity, but the insights they give us into the eternities. I was deeply moved by reading President Romney's message in the September 1981 Ensign on the subject of chastity. Even though it was primarily directed toward the young, he started me thinking with his statement: "I can think of no blessings to be more frequently desired than those promised to the pure and virtuous. Jesus spoke of specific rewards for different virtues, but he reserved the greatest, it seems to me, for the pure in heart; 'For they,' said he, 'shall see God.' (Matt. 5:8.) And not only shall they see the Lord, but they shall feel at home in his presence. Here is his promise: 'Let virtue garnish thy thoughts unceasingly; then shall thy confidence wax strong in the presence of God.' " (D&C 121:45).8

I have pondered that scripture and the broad meaning of virtue as the word was defined in the 1828 dictionary to which Joseph Smith would have had access: strength, moral goodness, excellence, and efficacy.<sup>6</sup> The magnificent revelation on the nature of priesthood in the rest of the 121st Section, together with the Sermon on the Mount also provide for me a fruitful place to begin understanding principles of sexuality.

So I prefer to begin with the scriptures and explication of principles rather than making a laundry list of "acceptable"sexual practices. I think I understand why Church leaders have chosen to be selective in what they say about sexuality and why they have generally spoken out only on subjects where they have felt compelled--in specifying the areas of behavior that would separate members from the Spirit and jeopardize their membership in the Church. With that in mind, it should be clear I am not recommending that every denunciation of sexual sin be paired with ecclesiastical endorsement for a permitted activity. I feel that the focus on practices, whether positive or negative, will simply raise more and more questions until the principles by which questions can be resolved are also taught. A young woman of my acquaintance asked, "If it's all right to hug standing up, is it all right to hug lying down?" The question obviously is not the practice of hugging at all, but the principles that would govern such a decision.

In Marybeth's response that I've already referred to, she called for the creation of a system of ethics--those principles I'm talking about--from which an individual system of morality--or practices--would grow. As Latter-day Saints, we are in the somewhat unpopular position of believing that some types of sexual expression are wrong--for example, homosexuality or extra-marital involvement are wrong, offensive to God, and damaging to our relationship with the Spirit and each other--not just wrong if someone is hurt or wrong when the results turn out badly, but just plain wrong.

However, our very clarity in describing these offensive types of sexual expression may have led to the paradoxical situation that we know what's wrong much better than we know what's right; hence, if something is not on the prohibited list, we sometimes wonder, or have others ask us doubtfully, "Are you sure it's all right to do such and such?" or "What is the Church stand on such and such?" As Marybeth has pointed out, having a clear consistent system of ethics would eliminate the need for mentally or literally thumbing through the handbook, either for ourselves or others.

I do not consider myself prepared to set up such a system of ethics, but I'd like to continue, in the same spirit of exploration and tentativeness with which we began this discussion, to suggest some possible directions. I have extracted from David Wulff's essay some principles that would be relevant in delineating a system of ethics:

1. "The integrity--the wholeness and soundness--of persons, including ourselves, is something inviolable, something we must cherish. Persons should never be used for ends, including one's own, for to use another person is to make him into an object and thereby violate his personality. And when one violates the integrity of another, he simultaneously violates his own."<sup>10</sup> In other words, respect for integrity is a key principle that must be considered in the development of any relationship.

2. "To express oneself sexually in a personal and responsible way with another, (one) must know what the meaning and result of that expression will be for the other; (one) must know how the other will experience it." Or, sensitivity and empathy are as important as basic physiological and psychological information.

3. "No sexual act is...(exclusively) sexual in nature; every act reflects other needs and values, and thus the way one expresses himself sexually tells us a good deal about the kind of person he is...And of course, 'sexual expression' includes the entire gamut for embodying one's manhood or womanhood, from the most obvious-sexual intercourse, for example--to the most subtle--the way one dresses or speaks, the qualities to which he responds in others, the profession he chooses, and so on."<sup>12</sup>

4. "Sexuality should be integrated...into personality" yet powerful forces in our society "encourage the sexualizing of all of life. Rather than helping men and women to discover the depths of human potentiality, they encourage obsession with the surfaces created by fashion and the worship of youth...The result is a continued on page 27

<sup>8</sup> Marion G Romney, "We believe in being chaste," Ensign. September 1981, p. 4.

Noah Webster, An American Dictionary of the English Language (1838; reprint ed., Anaheim, CA: Foundation for American Christian Education, 1967), s.v., "virtue."

<sup>10.</sup> Wullf, "Personal sexuality," p.10.

<sup>11.</sup> lbid., p. 11.

<sup>12.</sup> Ibid., pp. 11, 12.

## PERSPECTIVES ON HUMAN INTIMACY: A RESPONSE Marybeth Rzynes\* Presented at the AMCAP CONVENTION 2 October, 1981

When Richard Johnson asked me to speak, he indicated that he would like, in addition to some response to the papers presented, a woman's point of view concerning sexuality. Also, would I moderate a question and answer session afterward? Well, that sounded like a juggling act to me. Not being a competent juggler, nor sure that all three roles are entirely compatible, I shall try to handle them by considering them consecutively.

First, I would like to respond from a woman's point of view. The question, "What is a woman's perspective about sexuality?" itself raises some interesting questions: Does the request contain an assumption that male sexuality and female sexuality are basically different? And does that presuppose any problems with that difference?

#### A Woman's Perspective

We simply do not have any conclusive evidence about whether male and female sexuality is more different than similar. My sense is that we have been enculturated to view ourselves as basically different. Given such striking anatomical differences, it may not be difficult to draw that conclusion! However, by starting with the supposition that men and women are basically different, we are very likely to construe our own experience and understanding to fit that world view. The more we look for differences, the more we can find them.

On balance, I believe that men and women are sexually more similar than different. Sexual response cycles for men and women are similar When asked to describe the sensations and processes of erotic feeling and the experience of lovemaking, they give descriptions that turn out to be amazingly alike. Men and women get turned on by the same things. They also give approximately the same personality qualities when asked what is desirable in a sexual partner.

Taking a view that we are more alike than different can create new areas of understanding. Some bridges can be built between people, in or out of the Church, that cannot be constructed when a position of basic difference is adopted. For example, rather than assuming women to be more emotional, love-oriented and passive, we are now free to consult a particular woman about her pattern of experience. Also, we are free to look for the traditionally assigned characteristics of one sex in the other sex's experience. Many men report enjoying being approached sexually as much as

\*Sister Raynes is a Clinical Social Worker with the Salt Lake County Division of Mental Health. approaching. We do better by assigning the full range of emotions and characteristics to both sexes. Doing so, I can expect that a man with whom I am talking might experience much of his sexuality in a way similar to meand then we have a lot of common ground to talk about.

However, my experience in talking with women of the Church is that many do believe that men are very different from themselves. Actually, they assume what many American women assume about American men. I believe our views about sex within the Church come more from American culture than from Mormon theology. However, because women make those assumptions, it is important to listen to them. Even when what they say may not be real in an objective sense, because they believe it, it is real to them.

So when we as therapists hear women clients talk about sex, we should listen with open ears. Tune in as they talk about themselves and adopt that point of view while listening. Do not assume you are an expert on anyone else's life; consult *them* to learn.

With these ideas in mind, I would like to share with you some views that I hear from women in the Church.

First, dichotomies between men and women are often drawn. One I have heard from time to time is that men like sex and, incidentally, love. Women like love and, incidentally, sex. This view suggests to me that these women are not educated about their sexuality nor about men's. If they understood that both sexes can enjoy sex for love, love for sex, and sex for sex, the dichotomy would be dissolved.

Another idea that I hear is a corollary to the first: men are more sexual, and women, in order to get love, have to work around that sexuality. This notion is even more dangerous than the previous one. It implies that a certain amount of manipulation or competition is inherent in the sexual relationship. Most sex therapists, as well as marriage counselors, would agree that what occurs within the sexual relationship is a microcosm of the larger relationship. Let me state this view more clearly: do women see their relationship with men as oppositional rather than cooperative? Do men likewise see women the same way? Anytime a strong partitioning in roles occurs, stereotypes easily abound and people can readily view differences as opposition or competition.

If I have been hearing women correctly and if these views are representative of women in the Church, there is a strong basis for continued misunderstanding between men and women. I think that as therapists there are at least two interventions that we could use to help change these ideas.

First, I would like to relate a personal experience. As many other women. I have heard and believed at times that men want sex more than love, or at least they don't feel much love until they get turned on. If that is the case, women reason, then it must not really be love if they can feel it only when aroused By listening carefully to male clients and friends, I recently detected some different ideas. All of the men I talked to said that they felt love in many ways that were not sexual. Additionally, romantic love did not have to be connected to sexual feelings. However, at times erotic arousal serves for many of them to heighten the loving or caring feelings. Some said that getting turned on helped them express themselves more openly and fully. Saying "I love you" came more readily when aroused. At other times, consciousness of loving feelings did not take place until the erection occurred. Interest in lovemaking primarily for relief of sexual tension did not happen very often. Consistently they said that the lovemaking experience was most satisfying when feeling in love was coupled with erotic arousal.

l interpret all of these responses as simply statements about a pattern of how men experience their sexuality. They are not statements about the veracity of their love. Men experience love, just as women do. Many of the above statements are true for women. It may be helpful to stop labelling diferences in patterns of sexual expression as differences in love.

It may be that there is a difference in wiring between the sexes. Whether genetically or culturally caused is unclear to me, but from my perspective it does not matter. What matters is understanding the sequence of how each person experiences the intertwining of erotic and loving feelings.

The sequence for many men may be: loving feelings, erotic arousal, heightened love feelings. Or it may be: erotic arousal, love feelings. For many women it may be: loving feelings, erotic arousal. Of course, there are a lot of examples in which, for both men and women, there is sexual arousal with no love and love with no sexual component. But the difference in sequence does not prove a presence or lack of love. So, a man may get turned on in order to feel love, or he may feel love and then erotic arousal lowers the threshold of restraint so that the love finds a channel in tender talk or action.

I shared these ideas with a few men, and they heartily agreed. Granted, my sample size is small and obviously nonrandom, but the idea solves the dichotomy and allows us to explore which particular pattern each person had adopted. A couple may thus make adjustments since they are dealing, they feel, with individual difference, not immutable gender differences.

The intervention in therapy would be to carefully examine each person's pattern of erotic and love feelings. Clarify each person's pattern to both partners and then help them find a mutually satisfying way to help fulfill each person's needs.

Secondly, we as therapists could work on the broader issue of the basic nature of the relationship between men and women. Is it cooperative or competitive? I believe it is best when cooperative. That seems to fit best with the gospel principle of love: caring, sharing and serving. If I am right, then we can educate by persuasion in many direct and indirect ways to help marital partners cooperate so they may fulfill both couple and individual needs.

For example, rather than give a couple a lecture on the basic rightness of cooperation, it might be more productive to give them a task with a double purpose: to cooperate with each other and to have each of their own needs met. Guiding a husband to experiment with different caresses in order to discover which more fully arouse his wife while simultaneously noting which of those same caresses heighten his own excitement is such a task. Asking a woman to share with her husband her most exciting or loving memories of their sexual past while attending carefully to his response to her stories so they can recreate the delightful times for both of them is another assignment with a double purpose. Using this type of instruction in therapy implies careful watching by the therapist in order to truly understand each partner's need well enough to assign a task that would satisfy both husband and wife individually while simultaneously accomplishing couple cooperation.

Women in the Church have also expressed from time to time a "sex as work" theme. Given the lists of jobs that must be done daily by a typical homemaker such as cleaning, caring for children, cooking running errands, and caring for her husband, sex is one more item on the list. Again, I think that this is true of American women and is not unique to Mormon women. However, it may occur often enough among Mormon women to deserve some focus. The "sex as work" idea may be perpetuated because sexual interaction generally comes after everything else--after being tired and hurried during the day, after coping with numerous changes and disappointments as well as joys and satisfactions, after getting dinner and getting kids to bed. If sex is always after everything else, it will likely be seen as one more task. Most people report sex to be at its best when unhurried and uninterrupted, and when both partners feel relaxed with a reserve of energy. Women report needing time to let the world go in order to become excited and sufficiently aroused to enjoy lovemaking. Many also want time to express love afterwards. One of the documented gender differences is longer arousal time for women than men. If these leisurely conditions do not exist on a somewhat regular basis, sex may become perfunctory, timed primarily to the man's quicker response.

If a therapist, particularly a male therapist, is listening to truly learn of the woman's experience, it may help if the husband is taught to listen also. It may also be beneficial for another understanding male to guide the wife into hearing her husband more deeply. Men and women in marriage often polarize their thoughts and feelings about significant issues they see differently. Sex is often such an issue. Since sexual relaitonships are rarely discussed outside of the marriage, the therapist may be the only person allowed a view inside their world to unpolarize their feelings by underscoring some basic similarities between them and teaching each partner the other's bias or pattern.

For those therapists who also have a Church role, I would like to highlight three ares in which women have expressed a particular vulnerability concerning sexual issues. It seems to me that in each one of these areas, the healing and priestly roles could combine to help these women have a positive experience with men. As a result, both men and the Church would be viewed more positively.

Church court organization and procedure can leave women vulnerable. In this arena, entirely composed of men, there is no opportunity for women to give another woman support or to provide an ally. Court trials for sexual misconduct may sharpen the "us" and "them" division held by many women. For example, if a woman being considered in a trial views her sexuality in a negative manner (or at least different from men's) she may feel particularly exposed in an all male court. I have talked to a couple of women who expressed feeling utterly alone, with no possibility of being understood.

It seems to me that Church courts are "courts of love" only when conducted in a loving manner. The needs of the person involved in the trial should be paramount. The procedural issues should be clearly secondary. In other words, every step of the process should be considered in terms of this particular person's needs, and then tailored as much as possible to fit the individual. Only then does it start to qualify as loving. If it does not, the negative impact is double. Not only is it a negative trial episode with all the feelings of being judged. deemed unworthy and rejected, but it is also hypocritical. The concept of love is being used as a way of justifying to those engineering the proceedings that everything is alright. But it does not feel like love to the recipient. The result may not only be disillusionment with the Church but also undying feelings of resentment towards those conducting the proceedings and worse, towards oneself.

Two interventions might be employed to further a loving process. One is to provide a woman ally in an understanding woman who has a sensitive and nonjudgemental attitude towards sexual issues. The woman being tried (whether in a bishop or high council court) then has a place to ventilate, be comforted, and be supported. The woman involved may not want another woman to talk with, but if the opportunity is offered, she can have access to a companion in the process that is occuring. Additionally, she may see the priesthood as more compatible with her interests and may easier feel it to be truly a court of love.

The other intervention would be to allow a woman to talk with a male who will take part in the proceedings in advance of the court. It is often the practice of the Rape Crisis Center to have a considerate, understanding male available to talk to the woman or her family so that she will not generalize her horror and anger to all men while in crisis. The theory is that a considerate person of the same sex as the one who committed the crime can have a positive effect in neutralizing some of the feelings about all men and will catalyze the trust-building process with men that she will need to work on when the crisis is past. A second area of concern is the issue of sexual abuse. Although it is true that women do sexually abuse boys or men, far more often women are sexually victimized by men. Very often these victims form generalizations about all men. If the abuse occurred while a child, the woman often carries those negative experiences and feelings with her throughout the ensuing years until they are unravelled by more positive experiences with other men or women in adolescence or adulthood.

Male therapists who hold Church callings should be aware that just being male may create suspicion in the woman they are encountering. Some statistics estimate that between 20 and 40 percent of all American women are subjected to some type of sexual abuse (molestation, incest, rape) before the age of 21. If that is the case, and I have no reason to believe that Mormon women are excluded from this statistic except for a lower set of family disruption rates, in general, for religiously active families, then a significant proportion of all the women in the Church will have had some sexual abuse and may view men wholely or partially in a negative light.

The male therapists among us are in a unique position to effect some change in the stereotype that may be carried within such women. A consistently warm, caring model that behaves as considerately toward the feminine sex as toward the masculine will go far to defuse negative past experience. In other words, a male therapist or Church leader should take careful note not to bias judgements or actions in favor of himself or other males. Warmth and evenhandedness should prevail, and it should come from an internal, generous sense that women and men are similarly vulnerable, strong, weak, changeable, etc.

Discussion of gospel topics in therapy needs to be treated with extra sensitivity. In my experience, the way the gospel principles are often transmitted are unhelpful even though the principle being discussed is right. Often a person is told rationally what he or she *must* feel, rather than acknowledging what he or she *actually* feels before considering how he ar she *would like* to feel. Most people are already aware of the recommended state of feeling, such as the spirit of forgiveness or lack of guilt. They need help experiencing it, however, not more descriptions. A teenage client of mine who suffers intense guilt about her grandfather s sexual abuse of her at a young age reports that chastity lectures many times only serve to increase her guilt, not solve it.

Continual reiteration of the desired state doesn't make it necessarily come about for sexual abuse victims (or anyone else). The admonitions or lectures may only serve to heighten the discrepancy between the idealized state and their own negative experience. In talking to women with a traumatic sexual past, it is more often than not underscored that they might be permanently lost, bad, or used. Instead, the therapist or church person might focus on the feelings and experiences that the person is currently having. Starting where the person is rather than where the person should be is a well-known counseling principle. Searching for the core of guilt or shame and reworking those feelings is a crucial first step. Once that condition begins to come clear, discussion of feelings the woman would like to gain is more appropriate.

I do not believe that men (therapists, teachers, leaders, husbands, fathers) are consciously inconsiderate in this area. I do believe they are blind. Many just do not realize the high incidence of sexual abuse nor do they understand the internal devastation of being abused. Misunderstanding may often come simply because the man may have had little or no common experience to help him understand her feelings. For those men who want to gain some personal understanding, some of their own past experiences may be applicable. Thoroughly recalling a past event--often a childhood, school, or neighborhood incident--of being bullied, shoved, shamed, ridiculed, or forced into some action will arouse feelings similar to those felt by sexually abused women. Having felt those feelings intensely yourself, it is hard to ignore or discount them in others.

The third area deals with nonmarital sexual behavior. Again, a similar principle applies: because women may perceive that men are different, they will likely be hesitant or closed about sexual discussion. A woman who knows that a therapist is both male and LDS may have double difficulty in speaking freely. She may wonder how much she will be judged rather than how much she will be understood. An air of tolerance about sexual behavior is rarely communicated openly in Church publications or over the pulpit. Because of this, women may feel that the individual men thay are approaching will be carrying identical attitudes.

It seems to me that it might be very helpful if the man (therapist or Church leader) could take the initiative to inject some degree of tolerance or understanding of whatever situation is presented, even though the behavior may be inappropriate even to the woman herself. This would pave the way for a more open and honest discussion of sexual feelings and actions. Often people only disclose the amount they think the other person can tolerate--not the full measure. If the client perceives the therapist as not understanding or ignorant of sexual issues, she may protect the therapist! If a full measure of tolerance is offered, a full measure of disclosure is more likely. The more a person can discuss openly all of the thoughts, feelings, and actions around the issue involved, the more likely they will discover themselves and their deepest values. That person is then more easily able to choose the right or moral course of action for himself or herself rather than choose it out of fear of punishment, loss of status, etc.

Recently a bishop of my acquaintance told a young woman in his ward who was troubled about her past sexual behavior to freely sift through what parts of those experiences had been good and bad for her, to hold on to the good and to discard the bad. He said he felt the sexual experiences gave her a good measure of the closeness, feeling needed, and enjoyment that she needed. Only the situations were inappropriate. He told her he had full confidence that she could sort out what was best for herself and that eventually, if her best choices coincided with the Church's, she would be welcomed into full fellowship. There was no punishment or judgement rendered.

To express this degree of tolerance, at least two qualities are important: an ability to love and respect a person while possibly disagreeing with their actions, and a sexual maturity in oneself that easily accepts and expresses the sexuality in all of us. Only by being sexually whole ourselves can we hope to transmit a hope of sexual goodness to clients.

#### **Response to Papers**

When asked to give a response to this session, I noted that the session is titled "Human Intimacy." I was prepared to see papers on both sexual intimacy and emotional intimacy. However, when I received the program, all of the papers concerned sexual intimacy. As in the labelling of this program, intimacy is often used as an euphemism for sex. But intimacy doesn't need to mean sexuality.

If we fail to make a distinction between sexual and emotional intimacy, we lose sight of an important resolution to a dilemma many people face. Many single people see no way to fully enjoy intimate relationships if intimacy can only be equated with sexual interaction. One single friend told me, "In the past, whenever I heard the word intimate I always equated it with love, sex, romance, marriage. I cut myself off from a lot of enjoyment with people I cared about but with whom I would experience any of those things." If we can give intimacy-loving, caring, sharing--there are wonderful ways to closeness that do not entail sexual interaction.

Also, married people are freed, with this broader definition of intimacy, to have friendships of both sexes that can be caring and loving without feeling that such relaitonships are wrong or suspect. Val MacMurray hinted at these possibilities for single and married people in his paper during his discussion of emotional and affectionate intimacy with sexual interaction.

Let me first make two comments on the papers collectively, then consider each briefly.

I grew up with a fairly negative sexual history. During adolescence and early adulthood, I held many negative associations about my own sexuality and sexual actions. Later on, I discovered sexuality to be an area of positive growth and discovery. That period in my life was like springtime. Fresh ideas, warm feelings, and a budding view of myself positively as a sexual being all came during that season. These papers bring some of the feelings of that time back again. We have experienced collectively in the Church a winter season of buried feelings, ideas, actions. Discussing sexuality openly has been difficult. These papers, along with other recently presented, seem to open this important topic more fully as we give ourselves permission to discuss, explore, and share common concerns with each other. I truly hope that we will continue.

Just as one good turn deserves another, these good papers deserve others. All of these topics provide important background information to the therapist and Church member about sexuality among Mormons. As therapists, we need information. But possessing information is only the first step in helping people. Just as a diagnosis doesn't provide the treatment, information does not bring about change. Information is only meaningful if skillfully woven into the relationship between therapist and client. None of these papers addressed this issue: How do you use these ideas in therapy?

One of my greatest satisfactions with the field of therapy is that it confronts directly and consistently the problem of how to turn theory into practice. Giving a person a philosophy or pointing to a desired goal rarely supplies the needed insights or skills about how to accomplish what is desired. Using the therapist's seat to preach is not enough. We must tailor and time these principles discussed to the individual (or couple or family) situations presented to us, hopefully catalyzing our client's own thinking and acting.

Each of these papers raises a question of practice. I would like to suggest what one might be for each paper in the hopes that we will each orient the ideas we have heard to our own practice. Coombs' paper needs to ask, "How should the statements given by Church leaders be interwoven into therapy sessions? What techniques are most helpful for delivering information in a positive light?" MacMurray's paper might ask a similar question, "How do we help clients search for principles in their sexual choices?" Finally, Stahmann's paper could helpfully add guidelines about how and when to refer couples with sexual problems to competent sex therapists who respect our clients' value systems.

Now to brief comments about each paper

A good paper not only lets the audience digest the information easily, but presents the ideas in a readily discernible outline so that the hearer can recognize patterns and concepts that are important.

David Coombs work is such a paper. I found myself, while listening, fantasizing about the possibility of succinct two-page summary of the ideas given being prepared for general usage by Church members. This helpful summary would give a clear view of two important patterns in his paper: I The central ideas and principles about sexual choices stressed by Church leaders. 2. Trends over time about sexual topics emphasized within the Church. This paper, added to others, such as Ann and Marvin Rytting's paper on trends about sexuality in the Church cited by MacMurray, provides a wider perspective that is needed by members embarking on an open discussion of sexuality within the Church.

Two patterns that emerged in his paper disturbed me somewhat. First, in comments by General Authorities, sexuality was almost always discussed by using a comparison of good and evil. Constant presentation of sex as good/bad rather than good in and of itself ingrains an ambivalent association with all of sex whether it is one's sexuality or one's sexual actions. My impression might be spurious, so a content analysis over the decades might yield different results.

Second, in many of the quotes concerning birth control, the wording implied that women were mainly responsible for this area of sexual decision making. A comment such as "Women should not seek to limit the number of children" reflects an assumption that the heaviest responsibility is on the woman. While it certainly is true that women bear the larger burden in childbearing and usually in childrearing, the decision about the sexual relationship and about the number of children should not necessarily rest primarily with her. Many times the number and spacing of children can become a power struggle between the marriage partners rather than an equal decision.

I was delighted that Val MacMurray talked about the topic of principles of sexual interaction from a positive stance. Two elements were especially worthwhile in my eyes. First, citing quotes about the positive nature of sexuality from the scriptures and providing a profile of the sexually well person starts one thinking about the positive roles sex plays in our lives. Carlfred Broderick has also taken a similar view in an interview for Dialogue magazine. He says that we all have a "sexual stewardship" and should seek to enhance our sexuality further our growth generally. Second, I am glad that Val took a leap and started the process of delineating possible principles of ethical sexual behavior. His principles might be more clearly stated, along with practical examples for easy transference to the sexual dilemmas we all face.

I hope that many of us will follow suit and enlarge on his example. The more writers we have who are suggesting sexual principles, the more likely we will generate a broad consensus about which principles are basic or core to sexual interaction. What may initially look like scores of separates lists may actually be many pieces of the puzzle. Let us get them out on the table. This process will take years and many people with good mind, hearts, and spirits to pull together a coherent system of ethics.

It occurs to me that sexual ethical principles are similar if not identical to ethical principles in other areas of human interaction. Basically, ethics addrssses the question of how we conduct our lives with each other. All of the commandments are statements about what is good between two or more persons. Even "following the Lord" or "sinning against God" includes this idea. We are our most responsible, moral and good selves when we extend our circle of interest beyond ourselves to equally include the interests of other persons--the more persons the better. Within sexual practice, it implies that many of the basic principles of righteous human interaction are also operative: hence, we can search the entire field of ethics for help and do not need to limit our focus to writings about sexuality.

Many of Val's quotes and ideas come from writers out of Church circles. I applaud his freedom to look beyond ourselves, to find truth wherever it is to be found. I am also saddened that we have paid so little attention to this area that most of the significant thinking about one of the central areas of our lives has been done by others.

Bob Stahmann and Cory Hammond's paper is an important addition for Mormon therapists. In addition to clarifying the nature of sex therapy for those of us completed on page 28

### BOOK REVIEW By Carlfred B. Broderick,\* Ph.D. of HUMAN INTIMACY: ILLUSION AND REALITY By Brown, Victor L., Jr. Parliament Publishers, SLC, 1981

The author makes it plain that this book is aimed at a general audience. To this end Mormon bishops are codereferenced as "religious lay leaders," and a moving tribute to President Kimball identifies him only as "one well known man." On the other hand, the Church has sent every bishop and stake president in Canada and the United States a copy of this book with an accompanying letter suggesting that they will find it a helpful aid in their counseling with members. Willy-nilly it thus takes on the character of an approved and even authoritative text.

Brown's confessed objective is to persuade the reader that the world's version of exciting, impulsive, sensual, sexual intimacy is based on illusion. The real treasures of intimacy are reserved for those who are willing to invest their whole selves in a comprehensive, committed, exclusive, benevolent relationship with a lifetime mate. The author's style is literate, compassionate and persuasive. He enriches the rhetoric with clinical case material, and quotes from the biographies and essays of famous persons. He manages to avoid nearly all of the cliches that numb.

Chapter 1 (The Illusions and Realities of Human Intimacy) establishes the author's premise crisply and effectively. In a real sense the remainder of the book is only an elaboration of this first statement. Illusions "deal with fragments of human beings, not with whole human beings," "deny the consequences of human behavior" and "deal in indulgence, not discipline." By contrast, the reality of intimacy deals with "risk and commitment" (emphasis in original). The "increasingly subtle and sophisticated pleasures of a secure long-term relationship" are contrasted with "the monotonously similar beginnings of repeated promiscuity."

Chapter 2 (The Reality of Identity) seems less well focused and less thoroughly worked out. The basic premise seems to be that intimacy is only possible for those who have achieved a sense of identity and identity in turn is founded upon reliable, invested parenting. This is, essentially, Erik Erikson's model with its pyramid of developmental tasks leading step by step from the establishment of basic trust in infancy through the adult stages of intimacy, generativity and integrity. In my opinion, Brown could have strenghtened the chapter a great deal by explicitly tying his discussion to this congenial and well recognized developmental model.

In Chapter 3 (The Illusion of Stereotypes, The Reality of Roles) Brown attempts to negotiate a difficult path. On the one hand he wishes to make it perfectly clear that he is free from irrational sexist stereotypes. On the other hand he wants to leave no doubt that he stands foursquare on the issue that God intended for men and women to have distinct assignments in life. This is treacherous terrain these days and few of us are in a position to criticize a bit of creative waffeling as he attempts to keep his balance in the transit.

Chapter 4 (The Illusion of Sexual Exploitation, The Reality of Relationship Skills) seems to be the least coherent and substantial in the book. Having made his general point in Chapter 1 and his specific point in the title of this chapter, he seems to have a hard time finding enough on-target new material to flesh out the chapter. Because of my own interest in this area I was particulary disappointed in an opportunity lost. For example, at one point in this chapter he addresses the issue of sexual development in childhood and youth. His choice to set up Freud as a Straw Man and compare the "illusion of childhood sexuality" to the "reality" of an innocently asexual childhood was, in my view, unfortunate. The real reality is more complex and one can only hope that at a future time he will treat the subject more helpfully.

Chapters 5 (Beginning Marriage: The Illusion of Cohabitation, The Reality of Homebuilding) and 6 (Enduring Marriage: The Illusion of Eroticism, the Reality of Complete Intimacy) plus the Afterword round out the argument with further illustration and cases.

In our view, despite minor flaws, both the general reader and the local Church leadership will find this thoughtful book helpful. It sets forth the Christian view on the place of sex in life as well as any source we know.

A partly annotated bibliography is helpful in leading the reader to other writers in the field of Christian marriage and related topics.

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longer laugh and play together are losing their love for each other and their capacity to stay together. True love includes a joyful, almost childlike quality. In other words, have fun.

*Tenth*, pray often. Adam and Eve, during a period of insecurity, compounded their brief rebellion by hiding from God's presence. God does not hide; only man does. God was vitally involved with that first marriage, and he is just as concerned and involved in every marriage today.

Ideally, husband and wife and their children will kneel together in prayer. But, when that is impossible, you husbands and wives be sure to pray for a strong marriage and for the happiness you deserve.

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methods have produced successful outcomes in to 60-80% range on two and five year follow-ups (Stuart & Hammond, 1980; Masters, Johnson & Kolodny, 1977).

At the present time there is primarily one national organization which is providing certification in levels of minimal competence for practice as a sex therapist. The American Association of Sex Educators, Counselors and Therapists requires documentation of training, coursework, and specialty supervision for certification. They provide a national register of some 1300 certified sex therapists throughout the United States. AASECT certification does not insure competence, but it is making a helpful step in this direction by setting minimal standards of ethical practice. The ultimate responsibility

for selecting competent referral sources in the area of sex therapy rests with counselors and clients. As in phychotherapy in general, we must counsel clients to question therapists as to whether they are willing to work respectfully within the client's value framework. LDS clients must further be educated to assertively speak up with therapists if they are insensitive to their values, and if this continues, to terminate therapy and seek help elsewhere. We do not believe, however, that AMCAP should be in the business of prescribing acceptable therapeutic approaches, either in sex therapy, psychotherapy or marital therapy. We hope that more LDS counselors will pursue specialty training and supervision in sex therapy, and that we will educate LDS clients on how to avoid disrespectful and psychonoxious therapists in any field of specialization.

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culture which knows a great deal about sex but very little of sexuality." There is an important distinction between *sex*--something that one uses in the service of many needs, accurate or distorted--and *sexuality*-something which embraces all the tender, sensitive, caring, reflective, and responsible expressions of love. In this context, sexuality requires us to learn "that exquisitely sensitive give-and-take, much like the mutual imitation of birds in flight, where one shares a common world and destination with another, neither moving ahead and hence dominating and preempting, nor dropping behind, thereby abdicating responsibility and mutuality."<sup>13</sup>

5. And I would add, to these four principles, a fifth which possibly for Latter-day Saints should come first: the earnest cultivation of the companionship of the Spirit, deliberately including our positive and our negative feelings about sexuality in our prayers. This would include thanksgiving for intimate experiences that would strengthen the marriage relationship with our spouse. It would include recognizing and bringing before the Lord feelings that we identify as sexual temptations. It would include our questions about areas in which we lack understanding. It would also include profound and trusting petitions for help in areas where we find ourselves lacking sensitivity, control, expressiveness.

As a therapist, I have learned to rely on experience and reason as well as on moral sensitivity to teach values. I feel that the heart, the spirit, and the mind combined can present the most persuasive arguments to resist temptation or to begin the process of therapeutic change known as repentance.

I feel that it behooves us as Latter-day Saints to reinforce our spiritual understanding of the power of chastity with the most persuasive constellation of social, personal and familial arguments we can, having faith that the Lord's way will be demonstrably better viewed from any aspect. This has been little done in our community, but it is certainly not an impossible or improper goal. Let me offer just one example, again from Wulff's thoughtful discussion, on how such an approach to sexual behavior might work, even though his discussion is limited because it excludes the spiritual dimension:

Wulff acknowledges that:

Certainly (masturbation) does not lead to insanity, pimples, reduced fertility, or any of the other disorders once attributed to it. Yet it is not harmless in the sense of having no effect. The practice of masturbation, and the fantasies usually accompanying it, will serve as preparation for other sexual expressions, and hence, in such activity one is laying down attitudes and habitual ways of responding which may aid, or disturb, one's later adjustment. Autoerotic practices help one become familiar with his own sexual potentialities, especially because in such exploration he does not need to worry about a partner's needs or uncertainties or perhaps even rejection; his fantasies will be exactly what he wants them to be, and he is precisely in control of the physical stimulation. Unfortunately, these circumstances may complicate considerable his adjustment later on. Sexual experience with another person is never as ideal as fantasy, though, of course, the mutuality of interpersonal expression promises fulfillment masturbation can never provide. Some masturbatory fantasies and techniques may condition an individual to feel or respond in a way that will make normal heterosexual relations difficult or fearful. If one becomes accustomed to a particular type of stimulation, to fantasies of one kind or another, or to specific

13. Ibid., p.12.

circumstances for sexual arousal, he may not have the flexibility, responsivity, or even interest necessary to achieve the free and total intimacy and unity that characterizes sexually-expressed relationship at its best.<sup>14</sup>

There are correct principles in this area, as in every area of the gospel. The prohibitions, I think, tell us where it is not safe to go. They are the chain-link fence blocking off the cliff. Surely it is the act of children and teenagers to cling to the fence, to shake it, to try to find a way around or over or under it; it is the act of mature adults to note where the fence is, then turn and face the open meadow before them.

It seems so natural and important to me that we express in specific loving terms our gratitude to God who created us sexually and anointed us to communicate that sexuality in living, loving ways, and who will, if we are valiant, crown us with an eternity of sanctified and glorified creation that certainly, as one if its instrumentalities, includes our sexuality.

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who have faced sexual dysfunction in our clientele (or ourselves) and have not known where best to turn, I am appreciative of their consistent stance that good sexual skills learned through "sexual technologies," if one does not have them otherwise, can increase the loving and caring within a relationship.

It is also reassuring that the field of sexual therapy is concerned about moral guidelines for sexual interaction and that sex therapists are concerned about ethics. Again, I urge them to supplement this paper with guidelines about when and how to refer. Referral and training sources would be additionally helpful. As all sex therapists are not equally concerned about ethical issues or clinically skilled to handle sexual dysfunction, I think some of Allen Bergin's cautionary tone referred to in Stahmann and Hammond's paper is justified. We simply need to know more about this field and become competent ourselves. I applaud both men for their efforts to become skilled sex therapists and to meld professional insights well with their views of LDS principles.

### YOU MAY WANT TO READ:

- Bigler, E.D. & Ehrfurth, J.W. The continued inappropriate singular use of the Bender Visual Motor Gestalt test. Professional Psychology, 1981, 12, 562-569.
- Bigler, E.D. & Tucker, D.M. Comparison of Verbal IQ, Tactual Performance, Seashore Rhythm and Finger Oscillation tests in the blind and braindamaged. Journal of Clinical Psychology, 1981, 37, 849-851.
- Bigler, E.D., Steinman, D.R. & Newton, J.S. Clinical assessment of cognitive deficit in neurologic disorder. I: Effectis of age and degenerative disease. *Clinical Neuropsychology*, 1981, 3, 5-13.
- Clinical Neuropsychology, 1981, 3, 5-13. Bigler, E.D., Steinman, D.R. & Newton, J.S. Clinical assessment of cognitive deficit in neurologic disorder. 11: Cerebral trauma. Clinical Neuropsychology, 1981, 3, 13-18.

<sup>14.</sup> Ibid., p.11.