

AMERICAN ACADEMY OF CLINICAL SEXOLOGISTS

**AN ARCHETYPAL AND INNER CAST OF CHARACTERS APPROACH
TO SEX THERAPY WITH WOMEN WHO HAVE LOW SEXUAL DESIRE**

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By

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DISSERTATION APPROVAL

This dissertation submitted by Chelsea Wakefield, LCSW has been read and approved by three faculty members of the American Academy of Clinical Sexologists at Maimonides University.

The final copies have been examined by the Dissertation Committee and the signatures, which appear here, verify the fact that any necessary changes have been incorporated and that the dissertation is now given the final approval with reference to content, form and mechanical accuracy.

The dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy.

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VITA

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ABSTRACT

While much research has been done on how sexual roles and scripts impact sexuality, an analysis of how archetypes shape sexual roles and scripts has yet to be articulated.

Archetypes are more than roles, they are inherent patterns of energy that are felt in the body and move through the human psyche shaping perception and motivating behavior.

Archetypes are at the foundation of identity. This dissertation proposes an archetypal and inner self system perspective for working with clients in sex therapy. It will outline a treatment approach that incorporates an awareness of Eros-enhancing and Eros-inhibiting archetypes and how a practitioner might work with them experientially, to treat the problem of low sexual desire in women. Introducing the paradigm of sexual archetypes opens up many creative possibilities for exploring the sexual psyche and erotic identity. An archetypal perspective acknowledges the range and multidimensionality of human sexual experience and an inner self system approach acknowledges that the human psyche is multifaceted with many sub-personalities that are in dynamic interaction. This perspective can be applied to all aspects of treatment: history taking, the conceptualization of sexual problems, treatment planning and intervention. It provides sex therapists with a new set of tools for unraveling treatment impasses while it empowers women to explore their sexual psyches and define what they truly desire.

DEFINITION OF TERMS

Archetype – A concept central to Jungian psychology. Archetypes are “inherent organizing forms for the expression of what is enduring and archaic in human nature.” They have recognizable patterns of action and thought which organize human instinctual-emotional responses. Archetypes can be personal or collective. They are innate, universal prototypes found in all places, throughout history. Archetypes are more than roles or categories, they are systems of energy that move through the psyche and motivate behavior, thought, feeling, perception and interpretation of experience (Young-Eisendrath, 1984). “An archetype is a pre-existent form that is part of the inherited structure of the psyche common to all people.” (Jung, cited in Qualls-Corbett, 1988). An archetype carries a strong feeling tone and when constellated as a psychic entity, has the ability to activate and transform the contents of consciousness. Archetypes are felt in the body as energy and emotion. For example, when the archetype of the goddess of love (Aphrodite energy) is constellated, a woman is imbued with the vitality of love, beauty, sexual passion and spiritual renewal (Qualls-Corbett, 1988).

Individuation – Individuation is a fundamental concept in Jungian Psychology. It refers to the journey by which people become the whole and unique individuals they were born to be. While the initial goals of psychoanalysis are often symptom reduction, the ultimate goal of Jungian psychoanalysis is individuation. Individuation is guided by the archetype of the Self, which operates behind the scenes as a director for this process, orchestrating situations in a person’s life that forward the process. A crucial aspect of individuation involves bringing unconscious material into awareness to be integrated into the developing personality. Before conscious integration, this material can drive a person unconsciously in the form of complexes, inflations, and projections onto others. Unconscious material

includes dark and bright *shadow* material (disowned aspects of self), and the contra-sexual aspects of *anima* (feminine aspects in the male psyche) or *animus* (masculine aspects in the female psyche (Wakefield, 2012; Ulanov, 1994).

Diagnostic and Statistical Manual of Mental Disorders- Also known as the “DSM.” This is the abbreviation which will be used throughout this dissertation. The DSM is the reference book created by the medical community that is used to define sexual dysfunctions. New versions are published periodically. The version referenced in this dissertation is IV-TR, published in 2002.

Inner Cast of Characters – A metaphor used by this author (Wakefield, 2012) to illustrate the multifaceted nature of the human psyche with all its sub-personalities. These “inner characters” have been called a variety of things by other theorists. Jung divided them into complex, archetype, shadow, anima/animus, and Self (Campbell, 1971). They have also been called sub-personalities (Assagioli, 1965-2000); inner selves (Stone, 1989); parts (Schwartz, 1995; Noricks, 2011) and ego-states (Watkins, 1997). Each inner character carries a specific archetypal energy and has a script that can be explored and re-written to promote greater satisfaction and wholeness. New archetypal energies or qualities of character can be drawn from the archetypal seedbed of the unconscious and integrated into the personality.

Inner Self System – Refers to the collection of “sub-personalities” or “inner selves” that operate within each individual, influencing thoughts, feeling, perception, and behavior. Intra-psycho conflict and many problems of life are created by arguments between various

inner selves (Stone, 1989). The inner self system is personified as an “inner cast of characters” in this author’s work (Wakefield, 2012).

Intra-psychic– The workings of a client’s inner world, mind or psyche (Gagnon & Simon, 1973; Morin, 1995).

Jungian Psychology– A depth psychology distinct from Freudian analysis. Jung believed that dreams, cultural stories, fairy tales, and mythology carried keys to understanding the human psyche. They held symbols and patterns that were universal in nature (archetypes) which manifest uniquely in each person’s life. Jung believed that the central organizing archetype of the psyche was the Self, which directs the innate drive for individuation within each individual.

Love Map – An erotic template that develops in early childhood and directs sexual desires, arousal patterns and sexual behaviors throughout adult life (Money, 1993). This template becomes knit into the personality during the psycho-sexual development of the individual. While it can be expanded, it appears almost impossible to alter its basic content. The terms *sexual template* or *arousal template* can also be used to describe this same construct.

Narrative Therapy- A method of therapy developed by White and Epston (2007) which examines the narratives of client’s lives and helps clients develop richer narratives, “re-storying” their lives. Through a series of invitational questions therapists encourage clients to deconstruct how they have made meaning of their lives and to separate their identity from their problems, so that “the person is not the problem, the problem is the problem.” In doing so, clients open space to develop alternative story lines, draw different conclusions about their lives, and to construct “preferred identities.”

Sensate Focus - A set of progressive sexual exercises designed by Masters and Johnson (1966, 1970) aimed at reducing sexual anxiety, shifting the client's focus away from "spectatoring" (evaluative observation of one's own sexual performance), and becoming more engaged and absorbed in sensual experience.

Sex- A word that has been operationalized in innumerable ways. In spite of the level of legitimacy that the field of sex therapy has attained, the field itself has yet to come up with a universal definition for "sex" (Kleinplatz, 2001). We continue to discover that the definition of "good sex" varies significantly from person to person, as each person has a unique Love Map and Arousal Template.

Sexual Agency- the capacity to confidently and effectively act on one's own behalf in order to engage in sexual interactions that are meaningful and fulfilling.

Sexual Functioning- according to the current diagnostic classifications, found in the DSM, penetrative intercourse and the achievement of orgasm is the ultimate goals of sex therapy and defines sexual function. This focus negates the importance of meaning and satisfaction, and marginalizes sexual minorities, and this is considered problematic by growing number of sex theorists (Kleinplatz, 2001; Tiefer, 2000, 2004, 2012; Ogden, 2008; 2013).

Sexual Esteem- A positive regard for and confidence in the capacity to experience one's sexuality in a satisfying and meaningful way (Snell, 1993, 2001).

Sexual Individuation- a term coined in this dissertation by the author. This term refers to how the conscious exploration of the sexual aspects of the psyche and the ongoing definition

and fulfillment of the Sexual Self (Gagnon, 1973) are pathways to an embodied self-realization and important components in what the Jungians called Individuation.

Sexual Script Theory- sociologists Simon and Gagnon (1973) proposed that our sexuality is governed by elaborate scripts: cultural, interpersonal, and intra-psychic. These internalized scripts frame why, how and when we are sexual, who the actors are, the parts we play, and how events should unfold. Sexual scripts are constructed and internalized from an individual's early environment, the media, culture, religion, peer groups and life experiences. From a psychodynamic perspective, it is thought that sexual scripts serve to reproduce or repair early experiences with childhood caregivers (Stoller, 1979). Sexual fantasies (Maltz, 1997) and preferred erotic scenarios arise as a means of fulfilling forbidden longings and resolving intra-psychic conflicts that create guilt and anxiety (Morin, 1995; Bader, 2002).

Sexual Self – The concept of the Sexual Self was first proposed by Gagnon (1973; Kimmel, 2007), who believed that this distinct aspect of our identity was socially constructed, formed in the context of family, culture and life experiences. The Sexual Self internalizes scripts on three levels: cultural, interpersonal and intra-personal. These scripts direct who we are sexually, what is deemed proper and normal, and what is important or expected (Snell, 1993).

Voice Dialogue™ – A technique developed by Hal and Sidra Stone (1989; Dyak, 1999) as a method of exploring the dynamics of the inner self system. In this method, the facilitator invites the client to name and separate out various aspects of self, personifying them as “inner selves.” The facilitator then conducts individual interviews with these “selves” to learn how they operate and impact the person's life. Learning to recognize the “energy” and unique perspective of these various inner selves helps the client to become more consciously

aware of how and when they are operating in their life, and to direct these energies more effectively. Wakefield (2012) personifies these “selves” as an “inner cast of characters.”

PROBLEM STATEMENT

While there has been significant research in the area of sexual roles and scripts, an analysis of sexual archetypes and how they impact a client's sexual identity, function and fulfillment has yet to be articulated. The predominant approach to sex therapy today is medically oriented with a cognitive-behavioral approach to treatment which promotes penetrative sex and the achievement of orgasm as the ultimate goals of sex therapy. This approach does not take into account psychological perspectives that consider clients to have many facets of sexual experience, and an inner self system of subpersonalities in dynamic interaction that greatly influences their sexuality. Women's desire disorders have been found particularly difficult to treat with the existing cognitive-behavioral models of sex therapy. Feminist sexologists suggest that the current definition of sexual function is too limited in view, and tends to frame a majority of women as sexually dysfunctional. There is a growing conversation and body of research regarding the multidimensionality of sexual experience and the need to develop treatment models that respect and reflect these dimensions.

CHAPTER ONE

INTRODUCTION

Over the course of history, people have viewed sex from many perspectives and participated in sex for a variety of motivations. Sex has been both revered and feared (Eisler, 1996). Sex has been considered a normal biological instinct as well as the primary means of procreation. In more recent times, sexologists have begun to consider how sex is a socially constructed and highly scripted phenomenon with many dimensions and subjective meanings (Teifer, 2004; Gagnon, 1973; Kimmel, 2007; Ogden, 2013; Snell, 2001). Sex is one of the primary ways that people seek and provide comfort, nurturance and human connection, and experience being valued by another person. People also have sex to escape or obtain relief from negative emotions and stress, to express or enhance a sense of power, to “mate-guard,” and to experience sensuality and pleasure. (Meston, 2007; Henrick, 1986, 1998; Hill, 1988; Goodwach, 2005; Eisler, 1995; Resnick, 2012; Ogden, 1999, 2006).

In spite of the many motivations for being sexual, sexual problems are often treated as if they were simple medical or behavioral issues. Since the days of Masters and Johnson (1966), sex therapy has been practiced primarily as a cognitive behavioral intervention. Sex therapy today is still predominantly focused on behavioral aspects, with function and dysfunction defined according to the Diagnostic & Statistic Manual of Mental Disorders (2002). A medical mindset has dominated the field since the 1980’s with medical and pharmaceutical advances increasingly dominating the field. The goal of sex therapy often appears to be body parts that function for the purpose of penetrative intercourse and the production of orgasms, rather than a deepening experience of meaning and pleasure (Teifer, 2004; Kleinplatz, 2001, 2012).

An emphasis on the medical model and the physical aspects of sex eclipses an awareness of many other aspects of sexuality, including underlying needs, desires, and the unique arousal templates that differ widely from person to person. A medical or behavioral approach does not address what an increasing number of sexologists are viewing as the multidimensional nature of sexuality, and it completely overlooks the subjective experience of clients to define for themselves what is sexually meaningful (Ogden, 2006, 2008; Meston, 2007; Snell, Fischer, & Walters, 1993). Consequently, an increasing number of sex therapists are expressing their discontent with a definition of sex that presents functioning sexual organs to be of primary importance, and a focus on erection, penetration and orgasm, as the ultimate goals of treatment (Teifer, 2004; Kleinplatz, 2001, 2012).

If having “good sex” were a matter of having functioning body parts and developing a sexual skill set, sex therapy would be simple. Unfortunately, sex is not that simple. Sex is more than a successful progression through the physiological sexual response cycle of desire, arousal, orgasm, and resolution. Additionally, using the Diagnostic and Statistical Manual of Mental Disorders (DSM)(2002) as the defining measure of “good sex” marginalizes the sexualities of many for whom intercourse is not important (Hite, 1993; Daniluk, 1998; Iasenza, 2001; Teifer, 2004; Ogden, 2008; Ellison, 2000, 2001; Kleinplatz, 2001, 2012).

There has been a significant amount of research on how sex roles and sexual scripts impact a person’s sexual behavior. Gagnon and Simon (1973) began the conversation of how sexuality is socially constructed and named the Sexual Self as a distinct aspect of our human identity. However, an examination of many possible nuances of the Sexual Self, viewed through an archetypal lens has yet to be articulated. Central to this exploration are questions regarding how the intra-psychic energy of archetypes influences a client’s sexual

identity, arousal patterns, sexual behavior and choice of partners. While working with cognitive frames and sexual scripts in sex therapy has been looked at, working with archetypal identifications has not. This dissertation will attempt to do that, incorporating Jung's theory of archetypes as patterns of intra-psychic energy that move through an individual's psyche, motivating perception, feelings, body sensations and behavior. The approach described in this dissertation is based on the perspective that clients, as well as their sexualities, are multidimensional, and that sexual identities can evolve and be enriched. It proposes that working with sexual archetypes along with the conceptual model of an inner self system is an effective way of treating sexual problems, even the confounding problem of low sexual desire. This author has found that doing sex therapy from an archetypal perspective is also an effective way of enhancing client's sexuality, as they explore their sexual psyches and the deeper realms of meaning and fulfillment. This author has also found that exploring erotic identity in the realm of sexual archetypes is an effective means of kindling or rekindling a woman's sense of desire.

Working with sexual archetypes moves sex therapy beyond the single-dimension DSM (2002) definition of "good sex" as sexual functioning. It moves sex therapy into a multidimensional and integrative view of sexuality that allows for the subjective meaning of fulfillment as defined by the client. It invites creativity and empowers clients to explore and define their Sexual Selves, and to work through intra-psychic conflicts about their sexuality. It invites clients into a life-long developmental process of unfolding meaning and expression and helps them venture out and risk expanding their sexual identity. Incorporating an archetypal perspective in treatment does not supplant some of the best practices of sex therapy, but offers a depth perspective that can enhance other approaches.

The client base for the development of this treatment model has consisted primarily of Caucasian women seen individually and in couple therapy, who self-identify in a variety of sexual and gender identities. The age of these clients has ranged from 13 to 72. The case study offered in this dissertation is of a forty five year old heterosexual woman, in a long term marriage, presenting with the problem of low sexual desire.

This treatment approach is assumed to be gender, cultural, and value neutral, as it encourages the client or couple to define what is important to them in terms of sexual values, standards, behaviors, as well as sexual fulfillment. It is proposed that this client centered approach would be applicable to the wide variety of gender identities, cultures, races, classes, and sexualities that exist in the world today.

CHAPTER TWO

LITERATURE REVIEW

COGNITIVE BEHAVIORAL SEX THERAPY

Sexuality is a fundamental part of life. Sex has to do with *who we are*, and as an important component of human identity, it is deeply imbued with meaning. That is what makes sex so complicated and why treating sexual problems can sometimes be perplexing. (Gagnon, 1973; Kimmel, 2007; DeLamater & Shibley Hyde, 2004; Ogden 2008; Kleinplatz, 2012).

Sex therapy as a distinct field began with the pioneering work of Masters and Johnson (1966, 1970). In its inception, sex therapy was primarily a short-term behavioral intervention designed to reduce anxiety, increase sensory awareness, reduce self-consciousness (spectatoring) and improve sexual communication. The cognitive component of Masters and Johnson's sex therapy assisted clients in exploring and reframing negative sexual attitudes. Masters and Johnson's brief treatment approach was a sharp divergence from the established approach of Freudian psychotherapy, which was lengthy, expensive, and had a poor track record for resolution of sexual dysfunctions. Freud's unenlightened perspective on female sexuality caused immeasurable distress for a generation of women seeking to have "mature" (vaginal) rather than "immature" (clitoral) orgasms (Hite, 1976; McDougall, 1995; Teifer, 2004). Masters and Johnson's brief treatment approach of sensate focus, sexual education, sexual attitude reformation, and permission-giving was shown to be significantly more effective and female friendly than the Freudian approach. In their view, all orgasms were good orgasms.

Cognitive behavioral approaches to sex therapy, based on the Masters and Johnson model, continue to be the most commonly practiced approach to sex therapy today. Over the past twenty years, this has been combined with a strong emphasis on sexual pharmacology. During the intake process, most sex therapists today will ask focused questions to assess a client's general health, referring to medical practitioners when deemed necessary. Sex therapists also explore sexual history, and the cognitive frames that shape sexual attitude, behaviors and experiences. Sex therapy interventions includes education, myth busting, re-framing, specific behavioral suggestions such as the "stop-start technique," structured homework assignments such as "sensate focus" (non-demand touching), permission-giving to normalize desires and encourage exploration, and coaching for the development of sexual communication skills. This intake and intervention process is the general cognitive behavioral approach, which works well for many clients (Goodwach, 2005), but not for all.

Emmerson (2003) suggests that the shortcoming of the cognitive behavioral approach is that it cannot address problems that are driven by unconscious processes which by their very nature are outside of awareness and thus cannot be identified or explored as cognitions. Helen Singer Kaplan (1974) found that it was impossible to make progress with certain clients without doing some short term psychodynamic work to resolve deeper issues.

The kind of issues that today's clients bring into sex therapy differ from those that Masters and Johnson treated. Through a careful pre-screening process, Masters and Johnson could screen out couples with concurrent issues that would interfere with successful sex therapy treatment. In their day, the most common disorders were premature ejaculation and anorgasmia (Rosen and Leiblum, 1995). In recent years, the most common disorder that

brings women into treatment is low sexual desire, which has been found to be far more challenging to treat (Basson, 2000; Leiblum & Rosen, 2000).

THE POST MASTERS & JOHNSON ERA- MOVING BEYOND COGNITIVE BEHAVIORAL SEX THERAPY

An increasing number of sex therapists are emphasizing that sex is multidimensional. Most of sex therapy's current interventions are too simplistic to address the diversity of problems and sexual realities that sex therapists will encounter in a typical practice today. The field needs multidimensional treatment models that can address this complexity of sexual experience (Ogden, 2006, 2008, 2013; Ellison, 2001; Snell, 1993, 2001; Kleinplatz, 2001, 2012). Leiblum & Rosen (2000) and Kleinplatz (2001, 2012) suggest that the field needs to become more interdisciplinary, integrating the medical, behavioral, intra-psychic, interpersonal, and systemic approaches. Teifer (2004, 2012) and Basson *et al.* (2003) both have been strong advocates for a major reconceptualization of women's sexuality. They hold that the traditional sex therapy and medical model are sexist and inevitably conceptualize women as sexually dysfunctional. The problem with the DSM (2002) model of sexual dysfunction is that it is without consideration of the relational, sociocultural, or situational factors that are formational and important in women's lives. Teifer (2012) and Bason *et al* (2003) have outlined a more wholistic way of conceptualizing women's sexual functioning (see appendix for A New View of Women's Sexual Problems) .

Kleinplatz (2001) suggests that sex therapists are in a post Masters & Johnson era, having progressed far beyond their cognitive-behavioral foundations. Kleinplatz outlines a number of alternative approaches to sex therapy including narrative and systemic, solution-focused, feminist, experiential, and integration of other post-modern modalities. She

challenges the double messages promoted by the field of sexology where on the one hand, performance is not important, but on the other hand, the measure of sexual function is shaped by the performance standard of the DSM, and treatment interventions are aimed at remediating “dysfunctions” that fall short of these standards. She states that, “we focus too much on parts rather than the people attached.” Kleinplatz (2001) suggests that sex therapists need to tailor their interventions to what lies *within* a given individual. She criticizes the DSM categories of sexual dysfunction as too abstract and vague to describe a client’s underlying phenomenology. A person’s sexual satisfaction or dissatisfaction is directly linked to the extent to which the *events* of sexuality are tied to *subjective meaning*. “Combinations of subjective, sexual/erotic meanings are as distinctive as fingerprints. They are intricate, complex, subtle and powerful.”

EXPANDING THE PRACTICE OF SEX THERAPY- THE REALM OF MEANING

Sex is a series of symbolic interactions (Mead, 1934; Delamater & Hyde, 2004) and the subjective realm of meaning in sex will determine whether sex is satisfying (Gagnon, 1973; Ogden, 2006, 2008; 2013; Kleinplatz, 2001, 2012). When we reduce sexuality to overt behaviors, we eliminate the wellspring of eroticism, subjective meaning and the symbolic richness that sexuality can hold (Kleinplatz, 2001, 2012; Morin, 1995; Bader, 2002). People have sex for many reasons, motivated by a variety of subjective needs (Meston and Buss, 2007) and scripts (Gagnon, 1973; Kimmel, 2007). Sex involves more than just the body, it involves the mind, heart, and spirit as well (Ogden, 2006, 2013). Sex involves the full spectrum of vulnerabilities and bonding patterns possible between two inner self systems (Stone, 2000).

We need to look at what sexual experiences evoke, permit or open up. The greatest predictor of real sexual satisfaction occurs when there is a match-up of symbolic meaning (Ogden, 2006, 2008, 2013; Bader, 2002; DeLamater & Shibley Hyde, 2004; Kleinplatz, 2001; White, 2007). In order to do this, sex therapists must move into the intra-psychic and the symbolic interpersonal realms (Stone, 2000; Young-Eisendrath, 1984, 1993).

A more recent book, *Quickies: the Handbook of Brief Sex Therapy* (Green & Flemmons, 2004), provides an excellent collection of essays addressing sexual issues from a variety of post-modern treatment perspectives beyond the medical and cognitive-behavioral perspective that prevails in sex therapy today. Other sexologists who have offered alternative models for doing sex therapy are Kleinplatz (2001, 2102) and Ogden (2008; 2013).

Ogden's (2013) narrative and experiential approach emphasizes that we need to look beyond behaviors and focus on client's sexual stories. How do clients make meaning out of their sexual stories, and how do these stories help or impede them in experiencing the fulfillment they seek? How might shifting the lens through which they view their story change their experience? Ogden's ISIS work offers an experiential method of externalizing problems and exploring client's sexual stories as well as exploring the symbolic aspects of sexuality in their lives. She incorporates the ancient template of the four quadrant medicine wheel, assigning sections to heart, mind, body and spirit. This template is laid out on the floor and clients are invited to travel from one quadrant to another, experiencing how they are different in each realm. As clients begin to talk about their sexual experiences, moving around the quadrants of heart, mind, body and spirit, their sexual stories unfold and they begin to see how they have been framing and compartmentalizing them or how some aspect has been missing. In the process, they begin to view their sexual stories in new ways. Ogden

also invites clients to bring in symbolic objects to represent aspects of their sexual story they want to let go of or to hold onto and deepen. This multidimensional experiential method creates space for clients to re-interpret their experiences and re-author the sexual story of their lives.

White (2007) and Ogden (2013) note that the frames that clients construct around their histories and current difficulties shape the meaning and determine whether these phenomena are experienced as problems or possibilities. As sex therapists, we begin to gather our clients stories at intake and whenever we gather sexual history. Narrative therapy holds that the stories we tell about our lives shape our reality, what we deem important, and how our experiences define us. One of the strategies of narrative therapy is to encourage clients to talk about their *relationship* to a problem or diagnosis rather than speaking of it as a core component of their identity. When people get diagnosed or “labeled” they begin to think of themselves in terms of that label, as if it represented their whole self, rather than just a part of them. *Having* a sexual problem or concern is quite different than *being* sexually dysfunctional. When we help clients externalize their sexual problems, we take those problems out of the realm of their identity. In this open space of new possibility clients can discover options they didn’t have when they viewed themselves as inherently defective (White, 2007; Freedman and Combs, 1996; Ogden, 2006, 2013). In changing the meaning of a situation or experience, it is possible to change the interpretation of it as well. Shifting the meaning of a problem can open up whole realms of possibilities that were previously occluded by the limiting or negative ways clients frame their experience. Changing the interpretation of a situation can cause a “problem” to disappear altogether.

SCRIPT THEORY AND THE PARTS WE PLAY

Script theory in sexuality was first articulated by Gagnon and Simon in 1973. They researched the many ways in which our sexuality is governed by elaborate scripts that tell us what to do, who the actors are, what part we play, why, how and when the events should unfold. Scripts operate on three levels: cultural, interpersonal, and intra-psychic. Sexual scripts have a performance aspect (governing the sequence and acts of sexual behavior), and a cognitive aspect, (shaping thoughts, fantasies and attitudes). Sexual scripts are internalized from influential people in our upbringing, culture, religion, the media, peer groups and life experiences.

The founder of Transactional Analysis, Eric Berne (Stewart & Joines, 1987) wrote extensively about the scripts that people live. Jungian theorists (Shinoda Bolen, 1984; Pinkola Estes, 1992; Gould, 2006; Landau, 2011; Leonard, 1982, 1993; Young Eisendrath, 1984, 1999; Ulanov, 1994; Johnson, 1983) draw heavily from enduring myths, fairy tales and great stories to illustrate archetypal patterns, roles and the corresponding scripts that people play out.

OUR MULTIFACETED SELVES- THE NEED FOR MULTIDIMENSIONAL TREATMENT MODELS

While most people think of personality as a singular entity, several significant theorists over the history of psychology have suggested that personality is multifaceted, naturally divided into sub-personalities, which are often at odds with one another. Early psychological theorists who viewed the psyche in this way included Pierre Janet and William James (cited in Phillips & Frederick, 1995), Roberto Assagioli (2000), and Carl Jung (1969). Sigmund Freud divided the psyche into ego, id and super-ego (Stoller, 1979). All of these

thinkers built psychological theories on the understanding that the psyche is composed of multiple aspects or dimensions. These aspects are in a constant state of change, stirring up emotional states, shaping perception and cognition, and creating body sensations, and influencing us in ways that are often outside of our conscious awareness.

Jung (Hopcke, 1989; Singer, 1994) divided the psyche into ego identity (self), archetypes, complexes, shadow, and the Self. In Jungian thought, the “capitol S” Self is considered the central organizing principle of the psyche differentiated from the “little s” self which operates as our ego identity. The Self operates behind the scenes, always seeking balance, the ongoing integration of unconscious material into conscious awareness. This unfolding process of growth into wholeness is called Individuation. Jung also conceptualized a “contra-sexual” function in the psyche, which he termed the “anima” (the undeveloped feminine aspect in men) and the “animus” (the undeveloped masculine aspect in women).

Assagioli’s system of Psychosynthesis worked with the psyche as a system of sub-personalities (Assagioli, 1965-2000). Fritz Perls, in Gestalt Therapy (1969), and Eric Berne (1961) in Transactional Analysis, all operated with an understanding that people shift in and out of a variety of ego states, the matching up of which can create a great deal of intra-psychic and interpersonal conflict.

EGO-STATE THERAPY, INNER SELVES, CHARACTERS, AND PARTS PSYCHOLOGY

Contemporary theorists include Hal and Sidra Stone (1989), who work with client’s “inner selves” through a process called Voice Dialogue. Watkins(1978), Phillips and Frederick(1995), and Emmerson (2003) work with “ego states” and Schwartz (1995) and Noricks (2011) work with “parts.” This author refers to these subpersonalities as an “inner

cast of characters” (Wakefield, 2012). All of these theorists view the inner self system as something that is in dynamic interaction and must be worked with “systemically.”

Working with the inner-self system in this way has begun to be referred to as Ego State Therapy (Emmerson, 2003) and Parts Psychology (Noricks, 2011; Schwartz, 1995). The label of Parts Psychology sprang from the awareness that clients often say things like, “a part of me wants to do this, but another part wants to do that.” People often have parts that are at odds with one another. Different parts represent ego states that hold different attitudes, sets of feelings, needs and desires. The most extreme version of these internal splits results in dissociative disorders, but psychologically healthy people have these opposing parts as well. The more aware a person is of these various ego states, the more healthy and self-regulated they become. Rather than operating as a “multiple personality,” they become more conscious and integrated. What is important is an *awareness* of when various ego states are in operation and having an executive ego function to direct the process.

Parts psychology understands that different inner selves or “parts” can hold opposing views about sexuality. The more aware we are, the more we can work out the conflicts that occur between them. Ego-state therapy, Parts psychologies and Voice Dialogue have been shown to be effective as brief therapy interventions for people in conflict with themselves. A number of brief case studies addressing sexual concerns are outlined by Noricks (2011), who describes how he used Parts Psychology to resolve a case of low sexual desire and a case of pornography addiction.

Richard Schwartz’s (1995) *Internal Family Systems* (1995) has become a well-established therapeutic approach within the Parts psychology field. In *Internal Family Systems*, clinicians work with “parts” to heal the burdens of trauma carried by inner selves

that are then driven to become controlling, polarized or over-reactive in ways that interfere with the client's capacity to live fully from the directive Self.

Hal and Sidra Stone (1989, 2000; Dyak, 1999) developed their work with the inner self system in a method they call Voice Dialogue. Their method of working with individuals and couples around sexuality recognizes that each partner houses a variety of inner selves that can pair off with their partner's inner selves in various bonding patterns. These pairings can be positive or negative and are usually unconscious. Raising awareness about "who" is relating to "who" is part of the intervention. Changing the pairing of the inner partners can shift the relationship dynamic significantly, breaking up stuck bonding patterns and resolving relationship and sexual problems.

THE SEXUAL SELF

Gagnon and Simon (1973) were the first to name the phenomenon of a Sexual Self, that part of our identity that we construct through the interaction of socialization and sexual experiences. While sex involves instinctual drives, it also involves the enactment of complex sets of cultural meanings which become our sexual scripts. Gagnon considered the Sexual Self a central building block of a person's identity (Kimmel, 2007). John Gagnon began his work with Alfred Kinsey. Gagnon came out of the Chicago-School of Sociology, with its legacy of formation by George Herbert Mead. Kinsey studied behaviors. Mead was interested in the social construction of identity. Gagnon eventually left the Kinsey Institute and began to focus on sex as a socially constructed phenomenon. Gagnon and Simon (1973) wrote a seminal text for the field of sexology that is not often referenced in sexology today, but the concept of the Sexual Self has much relevance in relation to the topic of sexual identity and the conceptualization of sexual archetypes in this dissertation.

Sexual identity became a focus of research in the 1970's, when it began to be conceptualized as having four dimensions: biological sex, gender identity, socialized sex-roles, and sexual orientation (Shively & DeCecco, 1977).

Snell (2011) has devoted a good portion of his career to the study of the multidimensionality of sexuality. He outlined 20 different dimensions of sexual self-concept, measured by his research instrument called the Multidimensional Sexual Self-Concept Questionnaire (Fisher et al, 2011). These dimensions include sexual anxiety, sexual self-efficacy (sense of agency), sexual-consciousness (being sexually self-aware), the motivation to avoid risky sex, the consideration that sex happens by chance/luck, sexual preoccupation, sexual-assertiveness, sexual-optimism or depression, blaming oneself for sexual problems, sexual-monitoring, sexual-motivation and desire, sexual-esteem, confidence in sexual problem management, sexual-satisfaction, external or internal locus of sexual control (whether one's sex life is determined by others or by oneself), sexual self-schemata (organizing cognitive frames), sexual fear, and sexual problem prevention (the belief that one can prevent sexual problems from developing). The sexual self-schemata dimension of sexuality carries our deeply embedded sexual scripts. How those scripts are fulfilled or not fulfilled becomes a central theme in client's sexual stories. Snell notes that a person's sexual self-concept is an important determinant in how satisfied or dissatisfied they are in their sexual experience. Sexual problems can be sourced from any of these dimensions and one of the reasons people can be highly conflicted about their sexuality is because sex *has* so many dimensions.

AROUSAL TEMPLATES, LOVE MAPS, SEXUAL SELF-SCHEMAS, CORE EROTIC THEMES

According to John Money (1988) we each have an “arousal template” that was formed in early childhood and permanently in place by the time we reached adolescence. He called this template our “lovemap.” The complexity of our individual love maps points to how necessary it is to look more deeply into the psyche to discover the real source of sexual satisfaction. Whenever we experience a matching up of lovemaps between ourselves and another human being, we experience profound exhilaration, the feeling of “being in love.” An awareness of one’s lovemaps and arousal templates increases the likelihood of achieving deeply fulfilling sexual experiences.

Andersen and Cyranowski (1994) have researched sexual scripts as “sexual self-schemas.” Sexual self-schemas are cognitive representations of the self derived from past experience and manifesting in current experiences. These self-schemas function to interpret and organize sexually relevant actions and experiences, and to provide standards that guide sexual behaviors. Women “with positive sexual self-schemas tend to view themselves as emotionally romantic or passionate, and behaviorally open, while reporting low levels of embarrassment or conservatism in sexual contexts. Women with negative self-schemas report low levels of romantic or passionate emotions and low behavioral engagement in sexual and romantic relationships.”

Morin (1995) writes about how peak erotic experiences show us our “core erotic themes.” These themes can be drawn from fantasies, scenarios, and memories and they inform us about our true arousal patterns, what really turns us on. Bader (2002) has explored the secret logic in the scripts of our sexual fantasies, where aggression and forbidden or

hidden desires can be played out without the burden of responsibility or the risk of negative consequences.

Maltz (1997) has explored the most common themes that pervade the scripts of women's sexual fantasies. Common characters in these inner plays are: Pretty Maiden, Victim, Wild Woman, Dominatrix, Beloved, and Voyeur. In the context of this dissertation, all of these can be considered sexual archetypes, energies that reside in the seedbed of women's psyches.

ARCHETYPES AND WHY THEY MATTER

Carl Jung was a Swiss psychiatrist and psychoanalyst who diverged from Freud to found a field of psychology that is called Analytic or Archetypal Psychology. A major focus of Jungian analytic work is deconstructing the meaning that clients (called analysands) bring to their life experiences. Jungian psychology views all of life as fundamentally symbolic, woven through with archetypal patterns and themes sourced from the seedbed of the unconscious. Being in connection with this substrate of symbolic material is what brings meaning to life (Johnson, 1986; Stevens, 1982; Young Eisendrath, 1984; Ulanov, 1994; Wakefield, 2012).

Jung believed that archetypes are part of the innate structure of the human psyche and he spent a major portion of his life studying archetypal patterns, particularly those found in archaic images, myths and fairy tales, which he thought of as expressions of the collective unconscious of humankind. Jung incorporated the concept of archetypes into his psychological theory and looked for them in people's dreams and life stories. Some post-Jungian thinkers have attempted to construct a manageable list of archetypes commonly encountered in the human experience (Myss, 2003; Kipnis, 1991; Pearson, 1991; Shinoda

Bolen, 1984; Moore & Gillette, 1990; Grant, 1988), but it is important to understand that there is no definitive or comprehensive list of archetypes.

People often think of archetypes as categories, but they are more than categories, roles or cognitive schemas. They are patterns of human expression, “inherent organizing forms for the expression of what is enduring and archaic in human nature (Young-Eisendrath, 1984).” They lie dormant in the seedbed of the psyche until activated by developmental passages, or by the requirements of an environment or experience. When an archetype is awakened, it becomes a system of energy that motivates behavior and shapes cognitions, perceptions and reactions. Archetypes provide a directive template by which innate human characteristics become personal characteristics. These energetic states or patterns of human experience are easily recognizable.

ARCHETYPES AND ROLE THEORY

Because many people think that the word archetype refers to a role or category, it is important to distinguish the overlaps and differences. Roles refer to a position a person occupies within a social system, and the norms and expectations associated with that position. People have family roles, interpersonal roles, occupational roles and situational roles. People assume and fulfill roles, acting them out. Social systems punish individuals who do not comply with role expectations. People are rewarded for conforming to social norms and priorities and will tend to comply with the social pressures and expectations of others. While people may comply outwardly, they may also harbor forbidden longings or find ways to live secret lives (Longres, 1995).

People can house archetypal energies that are in conflict with their expected roles. People can also fulfill a role from a variety of archetypal energies. Because sexuality is an

important component of what is “enduring and archaic in human nature,” it would naturally follow that there are patterns or archetypes of sexuality within sexual behaviors and experience. These archetypes would energize and shape the qualities of the Sexual Self. When the Sexual Self is in conflict with certain role expectations, or in conflict with socially accepted scripts, the Sexual Self can easily become marginalized, disowned, devalued, or wounded.

Jungian theorists tend to approach sexuality from a psychological, even spiritual stance. The primary focus of their writing is on how people project their internalized love ideals onto others. Women are drawn to and fall in love with men who carry aspects of their undeveloped personality which the Jungian’s call the “animus” (the unconscious masculine aspect in a woman’s psyche). There is a similar function in the male psyche, where a man will be drawn to a woman based on his unconsciously projected “anima” (the undeveloped female aspect in the masculine psyche). Jungian theory addresses this intra-psychic phenomenon of “contra-sexual” projection and attraction with little reference to overt sexuality, or the variety of possible nuances of sexual energy that might be carried or expressed by individuals (Singer, 1972; Ulanov, 1994). (Jungian theory has also not resolved how contra-sexual theories of projection apply in a wider range of sexual identities and orientations.)

In Jungian psychology, *eros*, the root word of “erotic,” is considered to be the psychic energy that pertains to connection, mediating, relatedness, and joining. Jungians tend to talk about female sexuality under the umbrella of Venus/Aphrodite, the archetypal goddess of love, beauty, and sexuality. Shinoda Bolen (1984) and Ginette Paris (1986) have described the qualities of women who carry Aphrodite energy. Landau (2011) and Leonard (1993)

have written about the difficulties that women who identify strongly with Aphrodite, the Muse or the Femme Inspiratrice archetype encounter. Aphrodite women have a difficult time as they grow older and lose the power of youth and beauty. In *Women Who Run with the Wolves* (1992) and *How to Love a Woman: On Intimacy and the Erotic Life of Women* (1993) analyst Clarissa Pinkola Estes has come the closest to exploring how the deep energies of sexuality operate in women who are seeking to individuate. Jungian analyst Polly Young-Eisendrath (1997, 1999) has done some excellent writing on the basis of women's fragile self-worth and the conflicted relationship of women and desire. She writes about how women can move beyond needing to be *objects* of desire and into Self claiming. Marion Woodman (1985) has written extensively on women's struggle with conscious femininity and embodiment, important components in a Self-aware sexuality. Qualls-Corbett (1988) devoted a book to the remembrance of an ancient time when women's sexuality was revered through the archetype of the Sacred Prostitute.

While many Jungian analysts have explored aspects of attraction and the love experience, an articulation of the nuanced range of sexual archetypes carried by women and men, and played out in couple's relationships has yet to be found in the Jungian literature. (Hollis, 1998; Johnson, 1983; Young-Eisendrath, 1984, 1993, 1999; Leonard, 1982, 1993; Paris, 1986; Landau, 2011; Pinkola Estes, 1992; Ulanov, 1994; Qualls-Corbett, 1988; Woodman, 1985; Shinoda Bolen, 1984; Moore & Gillette, 1990; Grant, 1988). This dissertation will begin that exploration.

Jung emphasized that archetypes could not be grasped academically. To define an archetype objectively fails to convey its "feeling tone." He concluded that ultimately to understand an archetype, it must be experienced (Stevens, 1982, Johnson, 1986). This

observation is relevant to sex therapy and an archetypal treatment approach, because in the approach outlined in this dissertation, the sex therapist will be working experientially with the *energies* of archetypes, not just categories, scripts, roles or behaviors. There is a wide range of possible energies or styles that a woman might carry in the realm of sexuality. The impact of an archetypal treatment approach lies in its capacity to open a client up to a new experience of self and hopefully into a more empowered and meaning filled erotic identity.

NEURO-PSYCHOLOGICAL RESEARCH- OUR SEXUAL BRAINS

The human brain is a complex network of millions of neurons. Patterns of neural connectivity underlie all perception and thought as well as archetypal experience. Experiences generate neural activity and particular pathways become habituated as neuron pairings are repeated. This is how memories and scripts are formed. Certain patterns become so familiar that we consider them to be “who we are,” but recent brain research is teaching us that neurons do not necessarily “mate for life.” They are highly poly-amorous. Their connectivity can be changed with new experiences, which alter the patterns of connectivity. New experiences change the brain. Neuroscientists are now able to map these changes. This new awareness that experience can change established neural pathways in the brain proves that we are not stuck in self-limiting patterns of being. Through retraining the brain, we can learn and expand our identities so that our lives can become more fulfilling (Siegel, 1999).

This recent brain research illustrates how clients can change dysfunctional patterns of relating and heal from sexual trauma. From this perspective sex therapists can help clients to activate new archetypal energies and move out of old, limiting identifications. The experience of carrying a different archetypal energy is brain changing. This means that a

woman trapped in the archetype of Shrinking Violet (Ogden, 1990), Ugly Duckling, Abused Child, Co-Dependent, or Armored Amazon can shift out of these eros-inhibiting archetypes and integrate new archetypal identities that will allow her to open to meaning and pleasure. Anyone can integrate new archetypal energies from the seedbed of the psyche, opening up new possibilities for healing and improving long standing patterns that interfere with sexual meaning and satisfaction.

OTHER THEORETICAL IDEAS INTEGRATED INTO THIS MODEL

Theoretical ideas interwoven in the interdisciplinary treatment model outlined in this dissertation are drawn from: Jungian thinking on archetypes, contra-sexual projections and individuation (Hopke, 1989, Jacobi, 1959; Stevens, 1982; Johnson, 1986; Ulanov, 1994), a Jungian approach to couple therapy described by Young-Eisendrath (1984; 1993), role theory, script theory, and social constructionism (Gagnon, 1974; Foucault, 1978; Kimmel, 2007; Longres, 1995; Hite, 1993), the technique of Voice Dialogue™ and the Psychology of the Selves described by Stone & Stone (1989; Dyak, 1999), the theory of interactive bonding patterns (Stone & Stone, 2000; Hendrix, 1988; Young-Eisendrath, 1984; 1993), ego-state therapy (Emmerson, 2003; Phillips and Frederick, 1995), Parts Psychology and Internal Family Systems (Noricks, 2011; Schwartz, 1995), Narrative Therapy (White, 2007; Freedman & Combs, 1996); Transactional Analysis™ (Berne, 1961, James & Jongeward, 1971; Stewart and Joines, 1987), Bowenian differentiation theory (Gilbert, 2004; 1992) and systemic couple therapy (Schnarch, 1991), psychoanalytic sexual theory (McDougal, 1995; Stoller, 1979, 1985; Person, 1988; Offit, 1995; Bader, 2002), neuro-psychological research (Siegel, 1999; Cozolino, 2006; Seung, 2012), and sexologists (Masters and Johnson, 1966, 1970; Kaplan, 1974, 1979; Weeks & Hof, 1987; Ogden, 2007, 2008, 2013; Morin, 1995;

Kleinplatz, 2001, 2012; Leiblum, 2000, 2010; Zilbergeld, 1999; Nelson, 2008; McCarthy, 2009; Perel, 2007, 2010; Maltz, 1997; McCormick,1994; Ellison, 2000, 2001; Daniluk, 1998; Katerhakis, 2010; Hendrick and Hendrick, 1986, 1998, 2011; Teifer, 2004; Green & Flemons, 2004; Savage,1999; Resnick, 2012).

CHAPTER THREE

AN ARCHETYPAL TREATMENT MODEL

PHILOSOPHICAL ASSUMPTIONS

There are some important philosophical assumptions that need to be established before an archetypal/inner self system approach to sex therapy can be viewed in its proper context.

- 1) **Sex is ultimately about meaning and fulfillment.**
- 2) **Everyone houses an “inner cast of characters” and the Sexual Self is one of them.**
- 3) **A woman can engage in sex, but in order for her to *want or desire* sex, she must have an erotic identity and experience herself as a sexual being.**
- 4) **Self-awareness, and personal and relational maturity are necessary for profound sexual experiences.**
- 5) **The sexual journey can be a profound means of individuation.**
- 6) **People continue to evolve over the course of a lifetime, this includes their sexuality.**

1) SEX IS ULTIMATELY ABOUT MEANING AND FULFILLMENT

While sex therapists are interested in sexual health and issues of sexual functioning, the main objective of sex therapy is not merely to improve sexual skills and function. Sex therapy should also address the larger issues of sexual pleasure, fulfillment and meaning, which can only be determined by exploring the client’s unique sexual psyche. Sex therapists who also possess clinical skills can help clients develop the necessary personal and relational maturity needed to create profound sexual experiences. Sex therapy can support partners in choreographing the complex and creative dance that occurs when two sexual psyches intermingle.

2) EVERYONE HOUSES AN INNER CAST OF CHARACTERS & THE SEXUAL SELF IS ONE OF THEM

Human beings are complex creatures with many needs and desires, fears and longings, some of which are in conflict. Thus, the human psyche is comprised of many sub-personalities which come to play in various domains and situations of life. Each of these sub-personalities carries an archetypal energy, and thus every person has a set of personal archetypes that they embody. These archetypes can be conceptualized as “inner cast of characters” (Wakefield, 2012). One of these inner characters is the Sexual Self, which may be developed or undeveloped, healthy or impaired in some way. This Sexual Self is unique to the sexual psyche, having a wide variety of possible nuances and expressions. The Sexual Self operates in a systemic relationship with the rest of the inner cast of characters.

The inner cast plays out the roles and scripts of client’s lives. Each inner character has a history, set of needs, goals and a script that they follow. They also have a very specific “felt sense.” Each inner character carries an archetypal energy that is distinct from the others. It is not uncommon for these inner characters to get into conflict with one another because their priorities, needs and agendas can differ significantly.

Gagnon and Simon (1973) began to explore the phenomenon of the Sexual Self, as that part of our identity, socially constructed through developmental interactions and sexual experiences. While sex involves instinctual drives, it also involves the enactment of a complex set of cultural meanings, which Gagnon referred to as “sexual scripts.” Scripts operated on three levels, cultural, interpersonal and intra-psychic. The Sexual Self is a central building block of identity (Kimmel, 2007), and is a project that continues to change,

grow and adapt across the entire span of one's life in interaction with one's environment and in relation to others (Jackson, in Kimmel, 2007).

3) WOMEN CAN ENGAGE IN SEX, BUT IN ORDER FOR HER TO *WANT OR DESIRE* SEX, SHE MUST HAVE AN EROTIC IDENTITY AND EXPERIENCE HERSELF AS A SEXUAL BEING

Many women have sex without wanting to have sex. In working with women struggling with desire disorders, the sex therapist realizes that low desire can stem from a number of factors including: exhaustion, role overload, lack of privacy, intra-psychic conflict, partner conflict, negative sexual scripts, sexual pain, health factors, unrewarding sexual experiences and unresolved trauma. A central component of the treatment approach outlined in this dissertation is the exploration and development of the Sexual Self. Does this woman "house" a Sexual Self? If so, how is this inner character currently defined? What is the archetypal energy? Is the Sexual Self understood, claimed and celebrated or is the Sexual Self abdicated, undeveloped, wounded, or thwarted? What are her authentic arousal patterns, love maps and sexual style? What feels good for her and is rewarding and meaningful in engagement with a partner? What does she offer as a partner? What is the "flavor" of her unique sexual essence? Is she fluid and deep, fiery and fierce, playful and flirtatious, earthy and sensuous, easygoing and companionable, dramatic and adventurous, nurturing and generous?

For a woman to desire sex, being sexual must be something that she experiences as a part of her core identity, something that is rewarding enough to make time for. She must value her sexuality for what it brings her, not just to please a partner. If a woman can envision herself as a sexual being, she will be motivated to resolve barriers to engaging in rewarding

sexual experiences. She will want to heal the wounds that separate her from her birthright of sexual pleasure. If the client does not have a sense of her Sexual Self, this is where the work begins, in re-discovering or perhaps discovering for the first time her unique sexual essence.

Often, when I am working with women, we must go on an archaeological dig to discover their Sexual Selves, they are so buried under scripts, roles and cultural standards. In working with women to define and actualize their Sexual Self, we may find that she is undeveloped, frozen in time, disowned, or disabled by traumatic events. The Sexual Self also gets crowded out by other inner characters who are blocking, protecting, or suppressing her expression. If you trace a client's developmental history how has their sexuality changed over the timeline? Dialoguing with inner characters along the timeline will provide a much richer revelation of pivotal experiences.

4) SELF-AWARENESS, AND PERSONAL AND RELATIONAL MATURITY IS NECESSARY FOR PROFOUND SEXUAL EXPERIENCES

Every client houses a set of personal archetypes that can be thought of as an inner cast of characters that play out their roles and their scripts. We need to become aware of what lives inside of us. Personal maturity begins with self-awareness. It also involves the developed capacity to self-regulate, the willingness to learn and grow and to be responsible for the choices one makes. These factors, when applied to sexuality, lead to sexual agency, sexual self-esteem and sexual satisfaction. Becoming aware of the sexual archetypes that one carries enables a client to make more conscious choices about the sexual energies they wish to express and how they want to interact in sexual relationships. When they become more adept at directing their internal processes, they can deepen their capacity for meaningful interaction.

By relational maturity, this author means that a woman embraces the philosophy that relationships are not just about achieving stability and security. Relationships are also about growth and discovery. In relationships where people don't grow, the partnership inevitably becomes confining and stale. Sexuality in such relationships becomes familiar and predictable and the erotic relationship suffers. Ideal partnerships are about mutual curiosity, authenticity, compassion and cooperation. When couples operate from the paradigm that relationships are about control, duty and obligation, their relationship often deteriorates into boredom, disillusionment, hurt, anger, retaliation, resentment, and withdrawal. Good sexual relationships also require good communication skills and the capacity to negotiate differences.

5) THE SEXUAL JOURNEY CAN BE A PROFOUND MEANS OF INDIVIDUATION

Sexuality can be a significant means of personal individuation. "Sexual individuation" is a term coined by this author to describe what develops when a person practices a conscious sexuality that is sourced from their core identity and integrated into the totality of their life. Individuation is a process rather than an endpoint.

6) PEOPLE CONTINUE TO EVOLVE OVER THE COURSE OF A LIFETIME, THIS INCLUDES THEIR SEXUALITY

Individuals who are on the path of sexual individuation are continually evolving across the life-span, open to evolution and change, redefining their sexuality at every stage of life. An archetypal and inner self system treatment approach to working with sexual issues is a developmental model, as it allows for life stage changes and changes in situation, the body and health across the lifespan.

TREATMENT OVERVIEW

PROCEED FROM SIMPLE TO COMPLEX – WORKING WITH LEVELS VERSES STEPS

This treatment process is conceptualized as a series of levels rather than a progression of steps, because the behavioral, cognitive, and archetypal are all interconnected. Actual practice resembles a decision tree, a spiral or an onion rather than a linear progression of tasks. There are times in treatment when sudden breakthroughs occur and the client resolves something at lightning speed. At other times, treatment seems to go in endless circles or stalls out completely. This is when returning to the archetypal and inner self system level can be so helpful. We become curious. We might back up and evaluate the behavioral level, or open up new doors in the psyche. Certain topics, history or dynamics might get revisited as the client looks from a new perspective or moves deeper into the core of the issue. It is always best to begin with a simple focus and intervention strategy and then proceed into more complexity as it is required.

INTAKE AND EVALUATION

All treatment begins with an intake in which the sex therapist starts to formulate the problem and design an intervention strategy. How does the client view the problem: its history, development, impact, and meaning. What have they done to attempt to solve it? What would solving it look like *for them*? What are they not aware of or not seeing?

Are there physical health issues that need to be addressed? Are there mental health issues interacting? The sex therapist asks questions about health, lifestyle, medications, situational stressors, the relationship, and determines if there are issues that need to be

resolved before sex therapy can be effective. The sex therapist may offer referrals to appropriate resources to assess or remediate problems in any of these areas.

The sex therapist evaluates how self-aware the client is. How self-accepting and self-claiming are they? How anxious or self-rejecting? “Who” comprises their inner cast of characters? Do they have a sense of a Sexual Self? What are their sexual scripts? What part do they play in these scripts? How does this contribute to the presenting problem? Do they have a sense of agency, resolution and confidence that they can resolve the problem? What would a resolution look like for them?

LEVEL ONE INTERVENTION

At this level of intervention the sex therapist is primarily utilizing education and behavioral coaching. The client may need information about sexual anatomy, the sexual response cycle, ideas for resolving specific problems at different phases of the response cycle or support and coaching for more effective communication with a partner. Homework assignments may be given to help clients reduce performance anxiety, “spectatoring” (critical self-monitoring), and to help them develop sensory and pleasure awareness. Sex therapists encourage clients to tune into their bodies and support them in exploring their individual and shared lovemaps.

LEVEL TWO INTERVENTION

When practitioners encounter difficulty with the behavioral level of intervention, it indicates that there are more complex issues involved. At this point the sex therapist moves into a decision tree, exploring a number of possible intervention strategies. Is there a contextual or situational component that has not been identified before? Does the problem exist in the *interpersonal* realm, requiring improvement in their relationship or

communication skills? Helen Singer Kaplan (1979) found that toxic couple dynamics often prevented clients from reaching their sex therapy goals and needed to be resolved before sex therapy could proceed successfully. In other cases, resolving the sexual difficulties that plagued a client or couple infused the relationship with so much positive feeling that other problems faded into insignificance.

Problems can also originate from the *intra-psychic* realm, which includes the cognitive content of scripts and frames, distortions and irrational conclusions about sexuality. The sex therapist begins to explore sexual expectations and narratives about sexuality, pleasure and connection. What is considered proper and improper, safe or anxiety provoking? Clients are invited to reconsider their sexual scripts, and additional education may be provided to dispel myths and clear up unrealistic expectations. Given the confusing messages that society conveys about sex, all clients have some degree of intra-psychic conflict about sexuality. Likewise, very few individuals grew up with truly positive relationship role models or teaching about how to have a successful relationship.

At this point, introducing the metaphor of the “inner cast of characters” provides a means to begin working out the intra-psychic conflicts. These conflicts can stem from different parts of self wanting different things, for example, the Sexual Self may be bumping into restrictive injunctions coming from Good Girl script adopted in childhood. The topic of Gatekeepers and Voices of Warning will be discussed in greater depth later on. The sex therapist can act as a moderator to help “negotiate an inner peace treaty” between inner characters at war (Wakefield, 2012).

LEVEL THREE- THE ARCHETYPAL REALM

The efficacy of working from a cognitive behavioral approach in sex therapy has been well documented (Goodwach, 2005). But some sexual problems do not originate in the behavioral or cognitive realm. In these cases, trying to *think* about sex in a new way is not enough to shift long standing problems. These clients need an intervention that will help them shift their fundamental way of *being*. They need to adopt an entirely new *identity* from which different choices, behaviors and interactions will naturally flow.

When a woman is grounded in the identity of being a nonsexual person, she will not seek or value sexual experiences in and of them. The shift of identity into becoming a “sexual woman” can entail a signification redefinition of self and engender a great deal of anxiety and resistance (Pridal & LoPiccolo, 2000). It is not likely to be sustainable if the woman feels she is doing this simply to please or hang onto a partner. The shift must be experienced as something that emerges from a deeper sense of Self, viewed as something that will enhance *her* life. This is where working with the client’s archetypal identity patterns is particularly effective.

As a practitioner of an archetypal approach to sex therapy, my work is to assist clients in exploring the archetypes that populate their inner world and how these archetypes influence their sexuality. The Sexual Self is one inner character within the inner self system that is often constrained, undeveloped, fearful, or seemingly absent. How does this inner self operate in relation to the rest of the inner system?

Although this dissertation does not address working with couples, it is important to note that in any couple there are two inner self systems inter-relating. This larger system holds many potential connections, conflicts, and possibilities. Practitioners who understand

how to work with archetypal energy can help clients explore the spectrum of energies they can operate from in relating to partners, opening up new pathways for enhanced sexual experiences.

TREATMENT PROGRESSION – WORKING WITH ARCHETYPES AND THE INNER SELF SYSTEM

From the moment a client or couple enters the office, the sex therapist with an archetypal orientation is listening on all three levels of intervention: behavioral, cognitive and archetypal. Even at the behavioral level, the sex therapist is observing the changing states of the client, sensing what archetypes they may be inhabiting and forming a hypothesis about the inner self system. Who populates their inner cast of characters and plays out the client's deeply embedded narratives? Who is playing the parts in their sexual scripts. What are the themes, distortions, struggles, delights, expectations and inhibitions? What are the fairy tales and myths that match the client's experience? How can they be used or shifted to open up new possibilities? Who lives in them as an introject from childhood influencing or overshadowing their adult experience? Does one inner character dominate the inner system, crowding out the Sexual Self? What archetypes might be integrated to balance, heal, or expand this client's experience? Everything is possible because all archetypes exist in the seedbed of the human psyche.

In Jungian psychology we say that we “house” archetypes, but we can also say that archetypes “live us.” This is because we are not always conscious of the degree to which archetypes are shaping perceptions, stirring up emotions, creating body sensations, influencing choices and motivating behavior.

“WHO” HAS COME IN FOR TREATMENT?

Archetypes are so influential that determining “who” (which inner self) has come in for treatment will shape diagnosis, problem formulation, goals of treatment and method of intervention. Who in the inner self system cares about this problem? Remember that archetypes are systems of energy moving through the psyche that create a recognizable pattern of action and thought which organize human instinctual-emotional response and shape perspective. “Who” are we working with and how does the view change if we shift to another inner character? What archetypes are at play?

For example, the vaginismus that one woman suffered was related to the Armored Amazon that functioned as a dominant inner character in her inner self system. We need to understand how a woman’s Poor Little Match Girl (Odgen,1990) impacts her sexuality in feeling that she has nothing to offer. What about the inner Orphan, frightened of being abandoned, or the Scared Little Girl, overwhelmed by a partner’s sexual demands, or the caged up Sexual Tigress, afraid to reveal the intensity of her sexuality lest her partner label her a Whore? “Who” we are dealing with in the inner self system, will shape the intervention. Is this woman’s low sexual desire related to the Clam who is protecting her against a Demanding Bully? Do we have a Dutiful Wife, who has serviced her partner for years, while never expressing any needs or desires of her own? Is this woman a Super Mom, or exhausted Sandwich Caregiver, unable to relax, or set limits on what she does for others? Is she a sexually avoidant Ice Princess, disillusioned with the failed promises of the Spoiled Prince she married? Is she a Fallen Woman, caught in an affair, shutting down her sexuality out of guilt or fear of “straying” again. These are just a few of the potential archetypes that inhabit women’s sexual stories. Each of them will require a *different* intervention strategy.

Some of the archetypes that live in the inner cast of characters may not be directly sexual, but they influence a woman's sexuality by the mere fact that they crowd out all else. Examples of this are the Responsible Mother, the Good Girl, the Pleaser, the Perfectionist, the Dutiful Wife, and the Self-Sacrificing Caregiver. A major intervention may be "recasting the characters" that are standing on a client's sexual stage crowding out any space for a Sexual Self. We may also need to rewrite the sexual script that is guiding this woman's life.

EARLY SESSIONS - INTRODUCING THE MODEL

Early sessions of sex therapy are devoted to evaluation and establishing trust and confidence in the process. In working archetypally, the sex therapist provides some basic information about archetypes and the inner self system. What is history of the problem and what has been tried, not tried, worked or not worked? How is the problem impacting the client's life? Some specific suggestions, a bit of education, affirmative feedback, or the reframing of a problem can help to instill an early sense of relief, hope and possibility.

The intake paperwork and interview process should provide answers regarding the client's health, medication, substance use, and surrounding circumstances that may be creating stress in the client's life. What roles does this woman occupy and from what archetypes does she live them? Who is she in the domains of work, finances, parenting, caregiving or other responsibilities? Is there room left over for a pleasure oriented Sexual Self? If so, what is the relationship of the Sexual Self to the rest of the inner cast of characters? Is there cooperation or conflict? What were this woman's formative sexual experiences and what inner characters were formed in the process?

For the sex therapist who is tuned into archetypal energies, the clients will move through a spectrum of archetypes during the course of one session. The sex therapist's job is

to note these shifts as the client moves in and out of each of these states. We are beginning to silently map the inner cast of characters and determine who comprises the client's "sexual committee." Who are the main players in the cast, who is in the supporting, or not-so-supporting cast (Wakefield, 2012)? After introducing the metaphor of the "inner cast of characters," we can begin to invite the client to give names to the inner characters at play, raising awareness of how their inner self system influences their experience.

Tuned in clinicians can pick up on visual and energetic cues, watching client's body language, listening to the voice changes, and noting the eye contact. In addition to the factual information that is being gathered, the sex therapist is listening for the language the client uses, what they emphasize as important and why. The archetypal sex therapist is sensing the resonance of "who" is speaking as the client moves through various states as they relay their story. Does the energy shift or is it consistent? What is the quality of the energy? How old do they seem? What might this indicate about inner arguments or splits in the client's psyche? How is the client framing the problem and what meaning are they ascribing to it? Why is it important that it be solved at this time?

ARCHETYPES AND THE INNER CAST OF CHARACTERS

The metaphor of the "inner cast of characters" is immediately relatable to clients who are already talking about their inner contradictions, saying things like, "a part of me wants to do this, but another part wants to do that." Each of these "parts" can be personified as an inner character, which can then be interviewed and explored in sex therapy to discover how they are influencing the client's sexuality. There are a variety of conflicts that differing inner characters might experience regarding sexuality. As clients develop more awareness of these

inner dynamics, they can take the position of director in their sexual lives. Clients can recast the characters and rewrite the scripts.

When we personify archetypal energies as an “inner cast of characters,” we can begin to work with them experientially. From this position, the sex therapist can conduct a Voice Dialogue (Stone, 1989; Dyak, 1999) interview with relevant inner characters, to gain a deeper understanding of how they operate. What are their needs and agendas, their desires and concerns? The meaning that clients assign to their experiences is as important as the experiences themselves and provides the sex therapist with a window into their archetypal identity. From what point of view are they reporting their experiences? What is the feeling resonance of this perspective? Can new archetypal energies be explored and invited into the client’s inner cast? As clients resolve intra-psychic conflicts and “try on” new sexual archetypes, they expand their erotic identity and begin to feel empowered to make changes. From this place they can rewrite their sexual scripts in a way that allows their sexual selves to express and explore.

PERSONAL AND RELATIONAL DEVELOPMENT

In listening to the inner self system, the sex therapist is also assessing the client’s level of personal development. How old does the client seem? Are we speaking to a Scared Little Girl, an Exasperated Mother or a Rational Adult? How much self-awareness do they seem to have? How much sexual knowledge and sexual agency do they demonstrate? Eric Berne (1961) first pioneered an evaluation of the age of the ego state that clients were manifesting as they interacted and communicated with others. Was the client in a Child, Parent or Adult ego state? When we are thinking archetypally, we are interested in the nuances of these ego states. What is the specific quality of the Inner Child? Is she

compliant, scared, playful, sad, obedient, pleasing, or rebellious? Is the Parent critical, indulgent, rescuing, martyred, withholding, exasperated, saintly, responsible, spiritual, protective or nurturing? Is there an Adult on board anywhere? When we look into the sexual realm *how old* is the Sexual Self? What is the quality of the energy? The therapist is always observing the movement and changes of the client's facial expressions, eye contact, gestures, body language, speech, and physical and emotional energy to determine this.

MYTHS AND FAIRY TALES

Children are raised on a variety of myths and fairy tales, family stories, cartoons, and favorite children's books. All of these shape expectations. Women have deeply internalized the story of Sleeping Beauty, waiting to be awakened by a Dream Lover who will scale the walls of their unawakened sexual potential. Some women live as Cinderella, waiting to be rescued from their boring or miserable lives by a rich and handsome Prince. In exploring a woman's favorite fairy tales or movie characters, the sex therapist can wonder if she is living these scripts out unconsciously. The sex therapist can wonder if a woman is living like the overprotected, imprisoned Rapunzel, who longs to let down her hair, or an Ugly Duckling, who is waiting for someone to see her true beauty. Is she bypassing worthy offers of love in waiting for the perfect Prince Charming? Is she just passively waiting and never initiating? Has she been devastated because she innocently trusted in a "happily ever after?" All of these fairy tales keep a woman emotionally young, passive, and disempowered in the archetype of Idealistic Girl.

The sex therapist is also listening for story themes in client narratives. Themes provide clues about the client's scripts and the parts they play in the story of their lives. Tracing scripts back to the characters raises awareness of the parts that the client is playing

and the archetypes they are living. For example, if their story is one of loss or betrayal, how does this client respond? Is she in the archetype of Victim, Brave Heroine, Saint, Avenger, Scorned Woman, or Sadder but Wiser Woman? Does she engage her partners as a lively Sexual Elf or is she a Worthless Waif, desperately trying to keep herself warm with what little she has to offer, like the Poor Little Match Girl of fairy tale lore (Ogden,1990). Is she playing the part of the Martyr, Good Daughter, or Old Maid, who passed up her chance for love in order to care for an aging father? Is this a Fairy Tale Princess who has become a disenchanting Dutiful Wife? What does this woman long for, and who does she long to be? All of this is part of a story that can be rewritten with the help of an archetypal sex therapist.

Tracing narratives back to characters opens a window into identifying the inner character playing the parts. It also helps clients to untangle confusing clusters of thoughts, feelings, and behaviors and to move into a place of observation, ultimately taking the director's seat in their lives. Getting to know the inner characters that carry all of this material can be accomplished in any way that invites clients to delineate and dialogue with aspects of self that exist in their inner world. Possible methods include: Ogden's ISIS Wheel work (2006, 2013), Gestalt two chair techniques (1969), Ego State Therapy (Watkins, 1997), Parts Psychology (Noricks, 2011; Schwartz, 1995), hypnosis (Phillips & Frederick, 1995), Pesso Boyden Psychomotor (1991), or Jungian "active imagination" (Johnson, 1986; Singer, 1994). The method that this author most often engages in is called Voice Dialogue (Stone, 1989; Wakefield, 2012). Working with Voice Dialogue will be explained in more detail in a subsequent section of this dissertation.

SEXUAL MOTIVATIONS AND LOVESTYLES

Meston and Buss (2007) remind us that clients are motivated to have sex for many reasons. In the perspective of the inner self system, each of these motivations can be viewed as held by an inner character.

The nine main motivational themes were: 1) pure attraction, 2) to experience physical pleasure, 3) as an expression of love, 4) to feel desired by another, 5) to escalate the depth of a relationship, 6) curiosity and seeking new experiences, 7) marking a special occasion, 8) mere opportunity, and 9) uncontrollable circumstances.

Meston and Buss also found that people had sex for stress reduction and tension release, as an exchange for resources or privileges, to achieve social status, for revenge, to nurturing one's partner, for reproduction, to experience personal power or a partner's power, for conquest, to experience emotional closeness, to boost self-esteem, out of duty or in response to pressure, as a reward for favors, or to mate-guard (detering a partner from seeking sexual satisfaction elsewhere). Reasons for sex outside of a relationship included: the desire to experience sexual variety, as retaliation for an affair or to enact revenge, and to improve one's skills. While these categories were not initially presented archetypally, they can all be considered in an archetypal framework, with inner characters that play them out. Personified as archetypes we find the Pleasure Seeker or Sensualist, the Lover, the Explorer or Adventuress, the Opportunist, the Victim, the Social Climber, the Scorned Woman, the Nurturer, the Dominatrix, the Submissive, the Groupie, the Jealous or Possessive Wife, the Sexual Virtuoso, etc.

Hendrick and Hendrick (1998) researched a variety of "love styles" (discussed in detail later) that can be conceptualized as categories for sexual archetypes. Possible

archetypes that correspond to these love styles might be: Hopeless Romantic, Fool for Love, Traditional, Proper or Dutiful Wife, Conquering Seductress, Siren, Companion, Soul Mate, Best Friend, Help-Mate, Self-less Saint, Martyr. Each of these archetypes has a different script and sexual motivation. This author has found that determining the Love Styles of a client often provides valuable information about partner misunderstandings and erotic mismatches.

Mosher (1980) grouped sexual scripts into three categories which he termed Sexual Path Preferences. Each of which could serve as an umbrella for a group of archetypes. The first is "*role enactment*." This style of sexual engagement is highly scripted and partners coordinate and take on dramatic roles. Sexual skills are valued, as well as the use of erotica, mirrors, sex toys, lingerie, unusual settings, lusty talk and anything that creates novelty or dramatic intensity. Partners who tend towards this style of sexual interaction enjoy sharing and enacting fantasies. The second script is "*sexual trance*." People who enjoy entering into a sexual trance enjoy privacy and freedom from intrusion. They want a sense of protected insulation from the world so that they can become absorbed in their sensuality and focus on pleasurable sensations. They enjoy atmosphere that helps them get in the mood, such as music and candles. Technique and lusty talk are not as important as communication of feelings and sensations, pacing and a sense of erotic attunement. The third script is "*partner engagement*." Their motivation for sex is to strengthen the bond of love. The mood is warm and romantic with an emphasis on closeness and communion between the lovers. These partners would object to engaging in fantasies of others and seek to focus on each other. They enjoy full body contact and all forms of affection as well as intercourse and intimate conversation and endearments during the sexual experience.

THE NOT-SO-SUPPORTING CAST – GATEKEEPERS AND THE VOICES OF WARNING

It is important to consider that there are characters behind the scenes who do not present themselves initially in sex therapy. While they may not show their faces, they can significantly influence the progress of treatment (Wakefield, 2012). In the early stages of treatment, it is a good idea to consider whether all the crucial players have been identified and have expressed their perspectives, agendas and concerns. Who might be hiding in the wings, that has yet to be engaged? Does the client harbor unrevealed secrets or Shadow Selves? Are there Traumatized Inner Children that are in hiding? Are vulnerable selves being protected by a power self? Who are the Sexual Gatekeepers and the Sexual Guardians? What do the Voices of Warning say? What about the Voices of Pressure (Wakefield, 2012)?

Any time the sex therapist experiences a treatment impasse, we need to consider who is hiding in the wings. It is also important to understand that different inner characters show up in roles and life situations. The practitioner must keep in mind that the client may not bring the Sexual Self that shows up in the bedroom into the consulting room. The client may be presenting “who” they feel the sex therapist wants to see, a false persona to protect their vulnerability. If the client can bring the “hidden” Sexual Self into treatment, many mysteries may be solved and much progress can be made.

BASSON’S MODEL

An important model of female sexual response has been proposed by Basson (2003), which is more relationally oriented and better represents women’s sexual interests and motivations. Basson emphasizes that women often engage in intercourse for the “spin-offs”

they receive as a result: emotional closeness, love, affection, commitment, acceptance, tolerance.

While Basson describes reasons that motivate most women to engage in sex, it also explains why some women may lose interest in sex in and of itself. These spin-off reasons are relational and partner oriented, but all of them can be met in ways that do not involve being “sexual.” Basson’s model swings the pendulum in the direction of relational sex, which is part of the socialization of women in relationships. We are trained to be *other* oriented. Basson’s model does not invite an exploration of female sexuality that is more erotic, pleasure or power driven. The archetypes that might match Basson’s model are in the spectrum of Soul Mate, Nurturer, Earth Mother, Buddy, Best Friend or Loving Companion. Her model does not necessarily capture the archetypal energies of Alluring Siren, Pleasure Seeker, Sex Kitten, Bold Temptress, Honkey Tonk Angel, Babe, Sensualist, Initiator into the Sexual Mysteries, Adventuress, Free Spirit, Naked Nymph, Private Dancer, Saucy Wench, Dominatrix, Geisha, Hungry Tigress, or other expressions of pure eroticism. These are archetypes of sexuality that don’t quite fit into the relational Basson model.

REVISITING TREATMENT GOALS OVER THE COURSE OF TREATMENT

Throughout an archetypal and inner self treatment approach, the sex therapist will continue to support the client with education, specific suggestions, encouragement, and an exploration of the inner self system. What are her sexual scripts and who is playing them out? Who is showing up in the bedroom? Do domineering main players (primary identities) need to be toned down or retired? Do old scripts need to be re-written? Is there a need for new supporting cast? Does the client want to integrate some new archetypal energies? How will the client explore and play with expressing their sexuality through these new archetypal

energies. With conscious awareness the client develops an increased capacity to shift states and determine who they want to be in their sexual experience.

When working from an archetypal perspective, the definition of the problem may shift as the archetypal identifications in the inner self system shift. As previous archetypes are retired or reduced in dominance, new archetypes are incorporated. What are the goals, values and priorities as these changes take place? Over the course of treatment, sex therapists need to revisit treatment goals. Entire paradigms may shift depending on whose “eyes” the problem is being viewed through. Sometimes an increase in awareness and self-acceptance, or a shift in archetypes will cause the problem to disappear altogether, without a single change in the situation or the behaviors. Is the client looking to change *what they are doing* or *how they are being*? Do they want to improve their sexual skills sets or does the client want a different experience of their sexuality: more agency, self-confidence or a different erotic identity? Are we working towards sexual functioning or a deeper experience of connection, meaning and fulfillment?

What is the love story this woman longs to live? How would she like to engage with a partner? What corresponding energies would she enjoy interacting with in a partner? What are the dance-steps of these two archetypal systems in interaction with each other and how will this client manage her side of the dance? What archetype might she communicate her wants and needs from that is most likely to evoke a positive response in partner? For example, if she communicated from Critical Mother in the past, it has likely evoked compliance, defiance, or retreat. If she now communicates from Earth Mother or Sultry Seductress, she will evoke a different response.

CHAPTER FOUR

CASE HISTORY

To illustrate the application of this treatment approach, let's take a forty five year old woman, whom we shall call Marie. This case history is used to demonstrate how an archetypal and inner self system perspective can be integrated with traditional assessment and treatment. Possible archetypes or "inner characters," will be capitalized and placed in parentheses to draw attention to how a sex therapist is listening with "archetypal ears," making note of "who" might be inhabiting the client's inner self system. These notes are made silently by the sex therapist in the initial stages of treatment and will be held for a later exploration.

MARIE

Marie sat in my treatment room looking anxious and sad (Vulnerable Child). She stated that she needed to "somehow want to have sex more often, and to be better at it." In a recent argument with her husband, Jack, he had suddenly announced how bored he had become with their marriage and her passive sexuality. He told her about a younger woman at the office who had been flirting with him (this archetype is called by many names: Adoring Girl, Desire Awakening Maiden, Flirt, Seductress and the husband is demonstrating the archetype of the Mid-life Crisis). This young woman had told Jack that she found him sexy and this made him feel vital and young again. He had begun to think about his life and was feeling trapped and depressed with his life and their marriage. Marie was shocked and distressed by this disclosure. Jack had always been such a reliable, responsible, stable guy (Boy Scout). She reminded Jack that she was constantly on the run with the children, was

often exhausted, but that she had never denied him sex when he really wanted it. He said that was the problem. She never really wanted it. (Marie has been living in the archetype of Dutiful Wife). Jack stated that this was not enough for him anymore. He wanted to be with someone who desired him. Her mood suddenly shifted as she announced, “The nerve of that man, after all these years of my taking care of his needs, when I’m almost too tired to keep my eyes open!” (This energy moves into angry Critical Mother, mixed with a bit of Martyr).

I asked Marie how long she had been “providing sex” for Jack. She stated that she had never really liked sex, but she wanted to be a Good Wife and to please Jack. She did enjoy the little bit of closeness that sex brought (one of Basson’s “spin-off” motivations for women to have sex). Marie quieted down and looked anxious and sad again. “I really do want to save my marriage. If my marriage ended I don’t know how I would support myself alone.” (This is the archetype of the Dependent Daughter, which exists in all women who are economically or emotionally dependent on their Protector/Providers, a fatherly archetype. This dependent position in a relationship is inherently eros-inhibiting).

We began to talk about Marie’s sexual history and I asked Marie if she ever remembered wanting sex or having sexual feelings of her own. She admitted that she occasionally masturbated and she seemed to feel OK about doing so. Jack didn’t know about it. I asked her to describe a typical sexual experience with her husband and she stated that they usually “made love” at night. She stated that she could be orgasmic with her husband, but it took her a while to get there and she was usually very tired already and just wanted to go to sleep. She looked sheepish as she admitted that she often hurried things along by faking a small orgasm (this behavior in some women can originate from the desire to appear or “act” sexual, as in the Sexual Actress or Porn Star, but in Marie’s case I suspected that this

“act” was sourced from the archetype of Reassuring Mother). When she indicated that she was “happy,” Jack would go ahead and climax. “This makes it less work for both of us. I hate it when he wants asks me if I had an orgasm, so I just act like I do.” (Here the Nurturing, Reassuring Mother is thinking about the needs of others. She is non-demanding, protects feelings and wants others to feel good). Marie never initiated sex (the archetype of the Sexual Initiator is absent in many women who take a passive role in their sexuality). Marie viewed sex as an obligatory nurturing task, not unpleasant, provided it was over as quickly as possible and didn’t require much physical energy. The reward was in having some form of closeness and a seemingly satisfied husband....at least until recently.

In asking Marie about her general health, I learned that she had gone to see her primary care physician six months ago to ask for some sleeping pills. She stated that she seemed to be far less patient than she used to be, hadn’t been sleeping well this past year and that this added to her fatigue and irritability. I asked her more questions about her sleep patterns and learned that she had begun to have nighttime hot flashes and periods of wakefulness. Marie stated that she was still menstruating, but I wondered if she was suffering from symptoms of peri-menopause. Her primary care physician had not discussed peri-menopause with her. She seemed surprised to learn that many women had hormonal issues that interfered with their sleep patterns, as well as desire, even before a complete menopause. I gave her a referral to a local practitioner who specialized in assessing and supporting women’s hormonal health and worked with bio-identical hormones. Marie’s primary care physician had suggested that she seemed depressed and wrote her an SSRI anti-depressant prescription. Marie stated that she took the anti-depressant for five months, but her sleep had not improved. She had discontinued it because she didn’t like how it made her

feel “flat.” Granted, she was less anxious, but she was also less excited about her children’s lives, and this was an area that usually brought her great joy. I asked her if her physician had mentioned that one of the side effects of SSRI medication is reduced libido. She replied that her doctor never talked to her about sex.

In my third session with Marie, I learned more about her parent’s relationship and her early sexual relationship with her husband. Marie’s parents had divorced when she was eight, after her mother discovered that her father was having an affair (with the Office Floozy). Marie rarely saw her father after that (Abandoned Child) and her mother had never recovered from this loss, remaining alone and bitter towards men for the remainder of her life (the archetypes that Marie’s mother likely carried were: Hurt Child, Betrayed or Scorned Woman). Her mother gave her many messages about relationships and men. In particular, she warned her about attractive men. These men could not to be trusted. They were all ultimately selfish and just wanted to play around, then move on (Rounders, Players, Playboys, Seducers). You always had to be on your guard with them (Armored Amazon, Mate Guard). She told Marie that seeking pleasure was dangerous, besides, it always faded. Marie should marry an Ordinary Guy, with a good job, who would be grateful to have such a pretty girl. Someone who would provide for her (Provider). She also told Marie that she should never be “easy” allowing herself to be used by men for sex, treated as a Sex Object (for Marie, “easy” sexuality equaled Cheap Slut. This also included being seen as a Sexual Woman, a big conflict in her psyche, which inhibited expressions of sexuality with her husband. We would explore this more in later sessions).

Marie revealed that she had had two sexual partners before Jack. Her first sexual experience in High School was with a cute boy who dumped her soon afterwards. It was

physically painful and emotionally heartbreaking. This cemented her mother's edict that attractive men were dangerous and "out for one thing." She had one other lover in college, with whom she had some very positive sexual experiences with, but her mother did not approve of his career prospects and he was far too good-looking (echoes of her mother's "Voice of Warning"). Her mother liked Jack. He was an Ordinary Guy, a Boy Scout with prospects, majoring in computer science. He would be a Responsible Provider and a Good Father. Jack was sort of shy and awkward, but he seemed to admire and respect her as a person. He was not sexually demanding, therefore he did not treat her as a Sex Object. When I asked Marie if she ever experienced herself as an "erotic being" with Jack, she laughed and replied, "Are you kidding? Look at me. I'm old, tired, and dumpy (Archetype of the Frump). There's nothing erotic about me." (This response indicated a lack of an erotic identity, an undeveloped Sexual Self). Marie talked about her mid-life weight gain. She stated that she had no time for herself, and was too tired to even think about exercising. She was busy attending to other people's needs (Selfless Mother, Servant, or Martyr).

Marie worked as a book keeper for a local merchant for thirty hours a week. Although the work was not particularly interesting, she liked making some money of her own and having a role beyond being a Nurturing Mother. She talked about how she really would have liked to have become a nurse, but her husband made a good living and Jack discouraged her from pursuing such a demanding educational endeavor. Marie didn't like being economically dependent on Jack (Dependent Daughter is an inherently de-sexualizing archetype) and felt even more insecure about her life now that he was expressing an attraction to another woman. "He is right, of course. I'm already exhausted with my current responsibilities, certainly too tired for sex. School would just stress me out more, and it

would be hard on the children.” The one area in her life where she felt empowered was in her role as a Devoted Mother (the archetype which I was coming to understand as dominating every area of her life, including the bedroom). Marie took great pride and pleasure in her children. Her face lit up when she talked about them. Her afternoons and evenings were filled with her involvement in her children’s activities which included driving her fourteen year old daughter to ballet lessons four times a week and being present for her high school son’s basketball games. (It was evident to me that Marie “mothered” everyone in her life. She even “mothered” her husband in bed, making the archetype of the Devoted Mother the primary archetype in her life.)

During our next session, I asked more detailed questions about Marie and Jack’s sex life, to get a sense of the kind of sex they usually had, how it progressed, and to ascertain why it was so uninteresting to Marie. Marie stated that Jack was not overly demanding sexually. They had settled into a “sexual routine,” reached without discussion, early in their marriage. Jack’s cue for signaling that he wanted sex was that he shaved before coming to bed. Marie would go to the bathroom and quietly insert some lubricant. This kept the sexual flow going smoothly and avoided those uncomfortable discussions about whether Jack “turned her on.” They always followed the same sexual scenario. He would kiss and caress her for a while and then gently manually stimulate her genitals for about five minutes. She would say “that feels good” as her cue that they could move to intercourse, which seemed easiest for both in missionary position. After about five to ten minutes of thrusting, Jack would proceed to climax. She would smile at him to convey that she was happy with the experience, and she noted that it made her feel good to know that Jack was happy. (I noted that the entire sexual scenario entailed Marie “performing” as a sexually available, even

responsive woman who enjoyed giving pleasure and wanted her husband to feel good. This is the sexual archetype of the Dutiful Wife and Reassuring Mother- two archetypes that are inherently de-sexualizing for women).

I asked Marie if they had ever tried anything other than this routine. She told me that occasionally they would try other positions. When they had more time, like on vacation, she really did have an orgasm. Things worked better when Jack was in charge. Marie relayed a story about their early married life, where she had made some suggestions about some differing erotic scenarios, one involving him surprising her and seducing her in the shower. She had found the idea exciting, but her husband had seemed embarrassed and became defensive. He made a comment that her idea was silly. It sounded like a scene from some soft porn movie and he didn't like the idea of thinking of her in that way. He stated that he was no actor and she was his wife. The inference was that the idea was somehow "unseemly." Marie remembered feeling ashamed. She wanted him to respect her, and being a Good Wife, she never brought up another fantasy again. After the children came, she was often tired, and lost interest in sex completely. She stated that her husband was a Good Father and Provider (both key masculine archetypes that are inherently de-sexualizing. They go hand in hand with the corresponding archetypes of Devoted Mother and Dependent Daughter in a woman).

ASSESSMENT:

In looking at a woman's lack of desire, it is always important to assess health issues and sexual pain problems. Marie reported no sexual pain problems. She used an artificial lubricant to help with dryness and indicated that she was able to reach orgasm easily when she masturbated, as well as with her husband, when they took more time for additional

genital stimulation. The fact that they rarely took the time, and that she did not ask for additional stimulation I considered as a contributing factor in her low sexual desire. But a central inquiry in my assessment of Marie was the question of whether she had a Sexual Self on board. Marie seemed to lack this sense of erotic identity.

Health, life stage, and situational factors were taken into account in assessing Marie. I referred her for a hormonal evaluation to a local practitioner who specialized in treating women in perimenopause. Since Marie came in alone, I was only able to gather information about the couple's dynamics from her point of view. There did not appear to be any substance abuse, emotional abuse or domestic violence issues. From Marie's report, the couple sounded emotionally and erotically disconnected, fulfilling their roles as Responsible Father and Nurturing Mother. They had never been Soul Mates, but had existed as Role Mates. Both of them sounded like they were at the mid-life developmental milestone of a life review in terms of achievement, meaning and satisfaction.

THOUGHTS ON TAKING A SEXUAL HISTORY

Most sex therapists incorporate taking a sexual history into their evaluation. Taking a sexual history was a cornerstone of treatment established by both Masters and Johnson (1966, 1970) and Helen Singer Kaplan's (1979) work. The method and complexity of history gathering differs with practitioners, but the general purpose is to gather information about the client's formative experiences, sexual education, sexual attitudes, family history, feelings about touch, trust, body image, self-esteem, interaction skills, and boundaries (Masters and Johnson, 1970; Kaplan, 1974; Bennett and Holczer, 2010).

In recent years, an emphasis on "brief treatment" has increased client impatience with lengthy treatment protocols and complex assessment procedures (Green and Flemmons,

2004). Client's want help fast. Taking a formal, in depth sexual history can take up several sessions and the scope of information collected *may or may not* be directly applicable to the presenting problem.

Ogden (2006, 2013) was one of the first sex therapists to recognize that significant change can happen *in the present* by changing the frame in which events of the past are held. In one axial moment, symbolic meanings and interpretations can shift and everything can seem different. All of this can occur without the need to gather an extensive formal sexual history. There is growing support for a narrative approach to history gathering, which allows information to unfold in the context of the client's story, as the work evolves (Ogden, 2013; White, 2007). Most of the practitioners in the *Handbook of Brief Sex Therapy* (Green & Flemons, 2004) bypass the practice of taking a lengthy, formal, in depth sexual history in the initial evaluation.

Information gathered from sexual histories in a formal interview is influenced by *inner characters behind the scenes* who can block information or shape it in particular way. Clients sometimes feel that these intimate questions, asked early on, are too dangerous or intrusive to answer candidly. On the other hand, some inner characters report events quite willingly, in a very adult fashion, seemingly detached from the significant emotional content. The relevancy of the sexual history depends on "who" reports it. Depending on which inner character is speaking, we will get an entirely different sexual history.

Working from an archetypal/inner self system perspective changes the way histories are gathered. Utilizing the experiential method of Voice Dialogue, inner characters directly related to the immediate problem are invited to speak. They are the ones who have something at stake here. Their perspective is most salient in providing the sexual history. This

approach creates a zip line into the core of the problem. Rather than sifting through a large pile of past data, a specific area is highlighted and can be worked with. When histories are presented in this way, they have a living quality to them, almost as if they were being reported from inside the time frame that they occurred. The Rational Adult may provide dispassionate facts, with the appearance that they are utterly undisturbed by them, clear and well adjusted. Hiding in the wings may be a Vulnerable Child, who is terrified that she is worthless or shameful and will ultimately be abandoned or humiliated. It may be the child who is putting on the brakes in the treatment goals. If the sex therapist can make it safe enough for the child to emerge and speak, they will get an entirely different download of information with considerably more emotion. The interventions that the sex therapist designs will need to include *all* of the inner characters related to the client's sexuality, not just the one who brought them in for treatment.

A sexual history should be viewed as a prism, a multidimensional puzzle, rather than as a timeline of developmental or factual events. Depending on which inner character is communicating and what archetypal perspective is being represented, the information conveyed, as well as the importance and interpretation of events will change. One of the important aspects of working from this perspective is helping the client to become aware of *whose eyes* (which inner character) they want to look through and *who* is scripting the action in their situation.

SEXUAL DESIRE DISORDERS

Sexual desire disorders are one of the most common reasons that clients come for sex therapy today (Leiblum, 2010), particularly for women. "Inhibited," "low" or "hypoactive sexual desire disorder" has been a major focus of writing and research in recent years. Many

recent books have been written on this difficult treatment topic (Leiblum, 2010; Schnarch, 2009; Resnick, 2012; Ogden, 2008; McCarthy, 2003; Hall, 2004; Young-Eisendrath, 1999; Weiner-Davis, 2003, 2008; Mintz, 2009; Watson, 2013; Cervenka, 2003).

HYPOACTIVE SEXUAL DESIRE DISORDER

The Diagnostic and Statistical Manual of Mental Disorders IV-TR (DSM, 2002) defines Hypoactive Sexual Desire as:

A. Persistently or recurrently deficient (or absent) sexual fantasies and desire for sexual activity. The judgment of deficiency or absence is made by the clinician, taking into account factors that affect sexual functioning, such as age and the context of the person's life.

B. The disturbance causes marked distress or interpersonal difficulty.

C. The sexual dysfunction is not better accounted for by another Axis 1 disorder (except another Sexual Dysfunction) and is not due exclusively to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition.

While the DSM (2002) clearly states that clinicians should take into account factors such as age and the context of a person's life, it has been noted by a number of feminist sexologists that the DSM does not adequately acknowledge the realities of women's lives. This includes a lack of interest in sexuality that does not please them, chronic fatigue, or lack of time due to family and work obligations. Many women have never defined what is meaningful and pleasurable in the first place (Teifer, 2012; Basson et al, 2003; Ogden, 2008;

Kleinplatz, 2001, 2012). In Ogden's view, the important question to ask is "desire for what?"

In contrast to the DSM classification of "low sexual desire," Leonore Teifer (2000) and Rosemary Basson (2003, 2010) offer differing perspectives on women's sexuality and what contributes to or inhibits sexual desire. Teifer (2004, 2012) and Basson *et al.* (2003) advocate a major reconceptualization of women's sexuality. They object to the DSM model of sexual dysfunction that is without consideration of the relational, sociocultural, or situational factors that are formational and important in women's lives. They state that traditional sex therapy and the medical model are sexist, inevitably conceptualizing women as sexually dysfunctional (see appendix for the *New View of Women's Sexual Problems*).

In this researcher's review of the literature, there has yet to be a diagnostic or sexuality model that acknowledges how women's archetypal profile impacts their sexuality.

MARIE- FROM A DSM PERSPECTIVE

If we were to evaluate Marie from a DSM (2002) perspective and according to the current ethos in sex therapy, she could easily be diagnosed as having a "hypoactive sexual desire disorder."

Although Marie reported a long standing lack of sexual desire and this issue is clearly causing distress and interpersonal difficulty in her marital relationship (both DSM criteria), she is also clearly suffering from role stress, role overload (Longers, 1995) and some mid-life perimenopausal hormonal issues. Even though her physician had prescribed an antidepressant, in this clinician's view, she did not meet the DSM criteria for an Axis I Depressive Disorder or an Anxiety Disorder. In this author's opinion, anti-depressants are far too readily prescribed for women who are more likely suffering from role overload,

situational stressors and a need to be “all things to all people.” Doctors often do not take into account the libido inhibiting effects of medications such as SSRI anti-depressants, and because doctors rarely ask women about their sex lives in a meaningful way, these medications only add to a woman’s sexual desire problems.

I supported Marie’s decision to go off the medication, and instead we began to work with her inner cast of characters in order to recast “who” was running her life. Marie did present with some health factors, such as sleep disturbance and hot flashes, that indicated that she might be suffering peri-menopausal symptoms. These were assessed and addressed in subsequent sessions by a practitioner who prescribed some herbal remedies and bio-identical hormones. This seemed to help with Marie’s sleep problems, and reduced her general fatigue.

In echoing the views of feminist sexologists, one of the major contributing factors in Marie’s low sexual desire was a lack of interest in sex that had little meaning or pleasure for her beyond being a Dutiful Wife who took care of and accommodated her husband. We discussed an inner character named the Compulsive Pleaser. My primary intervention with Marie was to support her in discovering, defining and claiming her own self-affirmed erotic identity. After claiming her unique erotic identity, she would then need to recalibrate her inner self system to make space for this new aspect of Self. It was clear that Marie did not regard herself as a sexual being. She was following a sexual script which told her that sex is about “pleasing your husband.” There was no personal pleasure component in this script, no sense of entitlement or sexual agency. She had also internalized a number of negative relational and sexual messages during her adolescence from a mother that had become a Voice of Warning inside her head. We later conducted some Voice Dialogue and peace-

making sessions with this Voices of Warning (her introjected mother) to reduce the constricting impact of those early messages. We then wrote some new scripts based on who and how she wanted to be at this stage of her life.

THE DIFFERENCE BETWEEN ROLES AND ARCHETYPES

Roles are highly scripted forms of behavior usually formed out of an interaction with the expectations of the group in which the person is a member. (Longres, 1995; DeLamater and Hyde, 2004). Other people's expectations of how the role should be performed creates a pressure from outside, but there is also pressure from within. One role can have a variety of archetypal cores, in other words, they can be played from a variety of archetypal positions, changing the shape of the role. For example, the Mother is an archetype, but the Mother can take many feelings and forms. Archetypes are systems of energy that move through the psyche, shaping choices and perception and motivating behavior. Archetypes carry strong feeling tones felt in the body as emotion.

I explained to Marie that many women face the challenge of role conflict, strain and overload (Longres, 1995), particularly in midlife. It was impossible for her to meet the competing expectations of the many roles she was occupying "perfectly" and have any energy left over to be a passionate sexual being.

A TREATMENT PLAN FOR MARIE

- 1) Assess and address health and hormonal issues.
- 2) Explore Marie's sexual identity, her Sexual Self as a member of her inner cast of characters. Looking through an archetypal lens, what was the unique essence of her sexual self? What place did her sexual self hold in relationship to the other inner characters in her

inner self system? What other archetypes were at play that impacted the sexual self and how did they operate? Look at the systemic relationship of the Sexual Self with other eros-inhibiting inner characters such as her Compulsive Pleaser, Nurturing/Reassuring Mother, Selfless Sexual Servant, Dependent Daughter and Dutiful Wife. Assess role overload and intra-psychic conflict and evaluate sexual scripts. Evaluate lingering eros-defeating, disempowering script messages. Employ eros-enhancing scripts and archetypes that would support her in her efforts to actualize her sexuality. Work experientially with the inner self system, creating space for a Sensual/Sexual Self. Develop a sense of sexual-esteem and sexual agency. Explore and develop a self-affirming erotic identity sourced from the client's essential Self, with an awareness of templates and love maps, needs and desires. Integrate new sexual archetypes and energies, including the archetype of the Initiator, who could and would take action on behalf of the Sexual Self.

3) Support client in the inevitable cybernetic changes in her relationship. Changes in Marie would invariably evoke a response in her husband. It is important to understand that changes are not always well received. The sex therapist must continue to support the client in maintaining her evolving sexual identity and in holding steady while her partner adjusts. Emerging eroticism in a woman can be anxiety provoking to a man accustomed to a subdued, or passive sex partner. Sometimes it is helpful to bring the partner in at this stage of treatment to provide psycho-sexual education as they learn to "dance" with this new woman and the emerging energies she is integrating.

4) In finishing treatment, the sex therapist should encourage the client to realize that sexuality is a journey. She can continue to grow, change and develop her erotic identity across the lifespan, integrating more material from the archetypal seedbed, with sexuality as

part of her total journey of individuation. Even as an Eldress or a Widow, a client can continue to carry Aphrodite energy and see herself as a Sensual Being because a woman's sexual identity begins with and is sourced from her Self.

WORKING WITH MARIE'S INNER CAST OF CHARACTERS

In the early sessions with Marie, I gathered factual and script information and noted the archetypal energies she seemed to be inhabiting. I began to map her inner cast of characters and the scripts that they were playing out in her sexual life.

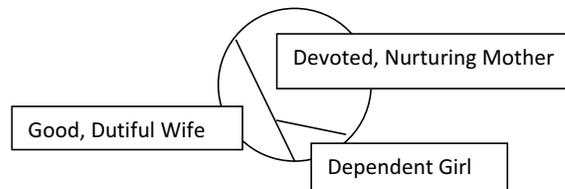
Marie easily related to the metaphor of her inner cast of characters and the scripts that they lived. She grasped the concept, and understood that she was operating from a script that was no longer working for her. She recognized that the Dutiful Wife was sexually available at the required interval, but passive and uninspired. She also realized that this script was not working for her husband either, and she was highly motivated to explore being sexual from a different place in the psyche. We began to discuss the inner characters that populated her world. Marie also recognized the deep vulnerability she felt as a Dependent Daughter. Her primary archetypal identification was the Devoted, Nurturing, Reassuring and Selfless Mother. She operated out of this archetype with her children as well as her husband. Marie's sexual script had been written by her husband and she had passively given over her sexual power to him. I explained to Marie that it was the archetype of the Dutiful Wife and her desire to please her husband that brought her into my office rather than a desire to find personal pleasure. Where was she in this picture? Why would she want to add one more responsibility to her already overwhelming to-do list? The problem with a sexuality orientation focused on pleasing another person, is that for most women, this sexual script

becomes more work than play. It is uninspiring, and as her life responsibilities multiply, most women lose interest in this kind of “task list” sex.

In recent years, Marie had increasingly become a Suffering Servant and Martyr and she recognized that this didn’t please anyone, including herself. In recalling her college lover, she remembered that she had once experienced being a Sexual Woman without shame, but this Erotic Self had long since left the theater.

CHARTING MARIE’S INNER SELF SYSTEM

If we were to illustrate Maries’ archetypal profile in a pie chart it would look something like this:



When charted out in this way, it was visually evident to Marie that there was no room in this arrangement for a Sexual or Erotic Self. 100% of her identity was occupied by Eros-inhibiting archetypes. We discussed how hormonal re-balancing had helped her sleep and translated this into an analogy of how she also needed a re-balancing of her inner self system. The inner self system was primarily dominated by the Devoted, Nurturing Mother (she even operated out of this archetype in sexual encounters with her husband), and the Good Dutiful Wife.

Marie was also clear that she was financially dependent on her husband, which meant that developmentally, she was living in the archetype of a Dependent Girl or Daughter (Stone, 1997; Murdock, 1994). Marie’s Dependent Girl was especially anxious in recent

days. Being a Dependent Girl or Daughter is inherently de-eroticizing in that it evokes a subtle incest taboo in both partners, dampening the intensity of the interaction.

Adult eroticism belongs in the realm of adults. The work of cultivating and integrating a woman's Sexual or Erotic Self into her inner cast begins by making space for the entrance of this energy. She must separate out and dis-identify with the "main players" that have become so natural and familiar to her. Then she can welcome some new energies onto the stage and into the script of her life. We began this process by conducting a Voice Dialogue session.

VOICE DIALOGUE- HAL AND SIDRA STONE

One of the fastest and most effective ways of exploring the inner self system and increasing client awareness of their inner self system is through a process called Voice Dialogue. Voice Dialogue is a method developed by Hal and Sidra Stone (1989) in which the facilitator (sex therapist) identifies a distinct sub-personality and interviews this inner "self." In this author's model (Wakefield, 2012), these inner selves are personified by utilizing a "theater of our lives" metaphor, and referring to them as an "inner cast of characters." Inner characters carry archetypal energies and significantly influence the goals and process of sex therapy by generating strong feelings, body sensations, and interpretive frames.

Voice Dialogue is a particularly effective technique that allows therapists to zip-line into historical information that might otherwise remain hidden behind the self-protective persona or not revealed due to a lack of awareness that this information is relevant to the presenting problem. The process allows clients to hear themselves speaking sexual scripts written by others and understand that they have been playing parts assigned to them by

others. As the client separates out from these unconscious identifications, they gain psychic breathing space and begin to develop an Observing Self (Wakefield, 2012). In this process they grasp that they could become the “directors” of their own sexual experience. Rather than unconsciously playing out the scripts and roles assigned to them, they can rewrite the story and choose to play new parts. As they are introduced to the possibilities within the archetypal spectrum, it opens new worlds and empowers them to explore new ways of being and expressing their sexuality.

The goal of these Voice Dialogue sessions is to:

1) Increase a client’s awareness of her inner cast of characters and how they operate and influence her. What are the primary archetypes she has been living?

2) Create more psychic space by having the client experience the degree to which she has been identified with these archetypes. In separating each inner character from the pack, the client begins to realize that the way she has been operating is not a permanently fixed state. It is open to renegotiation.

3) Increasing awareness moves the client increasingly into the position of director of her inner cast, in charge of the allocation of life energy, determining who is “on stage” in the various domains of her life. The client can decide how much space each of these archetypal inner characters is taking up in her world. She can then create space for the emergence and development of a Sexual Self that can seek and express what is meaningful and pleasurable to her.

CONDUCTING A VOICE DIALOGUE SESSION

In conducting a Voice Dialogue session, we select inner characters that appear to be directly related to the client’s current sexual situation. We also look for those that are in

hiding, but influencing the client's sexuality just as well. These often include Vulnerable Selves and Gatekeepers, which we will talk about in more detail later on.

The process begins by selecting one inner character to dialogue with and then asking the client to make an actual physical shift, moving to the left or right, in order to emphasize that they are now speaking distinctly as this one particular inner character. The character they choose can refer to the client by name, as if she were sitting beside them. By moving from one physical spot to another, the client gets a sense of separation between different inner characters (states of being) and can experience how the felt sense of the energies differ from one another. This intentional separation may seem disconcerting for some clients, who are concerned about being "multiple personalities." I generally handle this by explaining that we all have multiple ego states and healthy people are aware of their shifting internal states, can self-regulate, and operate as the organizing director of this inner self system. The more aware the client becomes of their various inner self states, the more integrated they become and the more cohesive their life choices. This is how we begin to resolve internal conflicts between warring parts of self who have different needs, desire, perspectives and agendas (Wakefield, 2012). I assure the client that we will "put them back together" before they leave, and *I always check very carefully* to make sure that they *are* re-integrated and oriented in present time and space before they leave the treatment room. If I assess that a client is having any problems with re-integration or dissociation, we address this as a goal of treatment before proceeding further. It is usually indicative of a deeper trauma. Sex therapists who are not trained in how to work with dissociative states stemming from trauma should have a referral source for someone who works in this area.

Moving into the interview, the client is asked to give a name to this chosen aspect of the psyche. The facilitator attempts to match the energetic state of each inner character as closely as possible in order to create a sense of attunement and affinity. Therefore, if the inner character they are dialoguing with has a boisterous energy, the facilitator would respond by becoming more lively. If the inner character is shy or quiet, the facilitator would slow down and proceed more quietly and gently. Interacting in this way encourages the character being interviewed to feel safe and understood and leads to greater disclosures of important information. The client may move to several positions and speak as several inner characters in one Voice Dialogue session. Often while a client is speaking from one “self,” others want to chime in to qualify, disagree or re-interpret what is being said. I try to keep one inner character talking at a time rather than allowing them to “skitter” around. I do this by assuring the other selves that they will have their opportunity to speak. The client is always returned to their original position before the session is ended.

The sex therapist would open the Voice Dialogue session by thanking the inner character for coming forward to talk with them. A good opening query is “*Tell me about yourself.*” This may be enough to encourage this inner character to present a great deal of the information from the question list below. Voice Dialogue sessions should flow rather than feel like a formal interview. The following list of questions is offered as suggestions. They are not in a list of “must asks,” nor are the questions presented in any specific order. The sex therapist should ask those questions which feel most relevant to the situation. It is also perfectly all right to create questions of your own that feel relevant to this client. Some of the information will be provided without asking a follow up question. The flow should be

conversational rather than like a checklist. The blanks indicated below should be filled in with the client's name.

Possible Voice Dialogue queries:

- Tell me about yourself. What is your history?
- How old was (client's name) when you came into being? (note how old the client seems to be as she is talking. You might ask her how old she is.)
- What was happening in her life at that time?
- Who were your major teachers and role models?
- How are you trying to help or protect (client's name)?
- What do you need?
- What do you fear?
- (Client's name) has been coming for help with her sexuality and I have been suggesting some things to explore. How do you feel about that?
- What are *your* thoughts and feelings about sex? What is OK and not OK?
- How did you come to feel this way?
- How do you feel when (client's name) is asked to do homework assignments or conduct themselves in a new way?
- How do you feel about (client's name)'s partner?
- Is there anything you long for in the world of sexuality? Is there anything you would like to do, be or have? Do you have any unmet needs? How might they be filled?
- Do you have any concerns? What kind of assurance do you need in order to feel safe enough to allow (client's name) to move forward in this work?

- What is the most important thing for you?
- (Revisit the naming of this inner character) Now that I have gotten to know you more, what would you like to be called?
- Is there anything you would like to say to (client's name) ?

In the Voice Dialogue process, we are seeking to really get to know and understand this inner character that lives in and affects the client's world view and functioning. We are also learning to recognize how this energy is carried in the body. What does the client feel like when this archetype is activated in their system? As our understanding of the inner self system builds, relationships between inner characters can be explored and conflicts discovered. Negotiations for cooperation and resolution can be conducted (Wakefield, 2012). Resolving conflicts between inner characters is similar to any kind of conflict resolution: clarifying values, needs and concerns, judgments and misconceptions, identifying areas of commonality, seeing where one party is willing to compromise in exchange for some compensation or assurance from the other party. Sometimes bringing in a third party can be helpful, an inner character to provide some energy that neither of the two parties can provide. This requires a discernment of what is needed here: support, safety, challenge, spontaneity, courage, firm limits, or something else? Does this client have an aspect of self, an inner character who carries this quality or ability? How might they be called in to help in this situation? If the energy or quality is unfamiliar in the inner self system, how might it be integrated or cultivated? Who would be a role model?

After the Voice Dialogue session is complete, I move the client back into their original position and ask them to reflect on what just happened, commenting on anything they learned or noticed. Was there anything that surprised them?

DIALOGUING WITH THE NURTURING MOTHER

Here is a small sample of a verbatim Voice Dialogue with the Nurturing Mother in Marie. She moved over on the couch to indicate that she was in the psychic space of the “Nurturing Mother,” and we began the interview.

Facilitator (Sex Therapist): Thank you for coming forward to speak with me. Can you tell me about yourself and how you operate in Marie’s life?

Client in Nurturing Mother: Well, I take care of a great many details for the children. I have to keep track of how they are doing in school and stay in contact with their teachers. I have to make sure they eat good food, are healthy and well adjusted. I pay attention to any little shift in their wellbeing. If they seem to be distressed about anything, I try to make it better for them. My daughter doesn’t have her driver’s license yet. She is involved in ballet, and that takes up a lot of my time because I must drive her to classes four nights a week. And then there is my son, who is on the Varsity Basketball Team this year, and I have to be at every home game, cheering loudly of course. I am so proud of my children. (Marie is beaming as she speaks of her children. Her energy is high and bright in this state, unlike the woman that came into treatment, who was anxious and sad).

Facilitator: You sound very devoted indeed...and busy too! Tell me how you learned to be such a Devoted Mother? Was your own mother a good role model for you?

Nurturing Mother: Actually, she was not. My mother was a single mother and she had to work very hard to raise me and my brother. She was always working, got home late a lot, and I raised my little brother. I was often scared when I got home from school and went into that empty house. That is one thing I always wanted to make sure of – that I would be home when the kids got home from school. That’s why I only went back to work after my kids got into High School and I still only work thirty hours a week. I didn’t go back to school to get that degree in nursing because it would have meant too much time away from the kids. I have always prided myself in my home cooked meals. No boxes of Macaroni and Cheese or frozen TV dinners for my kids. When I was growing up, I looked around at my friend’s moms. They were my role models. That’s how I learned what a Nurturing Mother was like. (We continue to dialogue for a while and learn more about the Nurturing Mother. I ask her how she operates in relationship to Marie’s husband).

Nurturing Mother: You know that most men are little boys. Marie’s husband is no different. My job is to make sure that his needs are met and that he is secure and confident in his life. I listen to his troubles and take care of him. If my mother had hung on to her husband, she wouldn’t have had to work so hard, but she obviously could never figure out how to be a good wife.

Facilitator: Does this apply to sex as well?

Nurturing Mother: Of course. Men need sex. Of course it’s like candy. You can’t give them too much or they will get spoiled. It’s a great reward for good behavior though. Marie doesn’t really care about sex, but I always remind her about her dad. I am convinced that her father had an affair because Marie’s mother did not pay enough attention to him.

When I get on her case, she gets with the program and takes care of him. Lately, this hasn't been working as well as it used to. (The Nurturing Mother became a bit bewildered here).

Facilitator: And why do you suppose that is?

Nurturing Mother: I'm not quite sure. His needs must have changed and I missed it. That's not good. That's why I brought Marie in to see you. She needs to work on this sex thing so that she becomes a better lover for him. She needs him, you know. She could never make it on her own. (Marie gets very serious here and I see the slight emergence of the Dependent Girl peeking out from behind the Mother archetype and I make note of this as a dialogue to take place later on).

Facilitator: I know you are very focused on other people's needs. I wonder, do you have any needs yourself?

Nurturing Mother: My only need is to make sure that everyone in my life is healthy, happy, nurtured and taken care of. When I accomplish that, I am totally happy.

I thanked the Nurturing Mother for coming out to speak with me and then asked Marie if I could speak with the Dutiful Wife. Marie moved over in the other direction and immediately began to look tired and subdued.

DIALOGUING WITH THE DUTIFUL WIFE

Facilitator: So you are the Dutiful Wife?

Dutiful Wife: Yes.

Facilitator: Can you tell me what it means to be a Dutiful Wife?

Marie began with the litany of requirements that a Good and Dutiful Wife must fulfill. One of them was to have sex with her husband on a fairly regular basis, in whatever way he most preferred. There was no joy in her voice. She looked tired, like the woman who had come in to meet with me the first time.

Facilitator: And so does that mean that you are not allowed to ask for anything in particular sexually? Your job is to find out what your husband's basic needs are and to fulfill them. How are you different from the Nurturing Mother in the sexual arena?

Dutiful Wife: Oh, she (the Nurturing Mother) is much more interested in creating a warm, affirming experience for him. She at least connects. I just care about getting it over with. I am usually reviewing my to do list while sex is going on. Sex is not my strong point, but I am an excellent administrator, and I take care of all sorts of details of his life. I am also a wonderful entertainer and I throw a great dinner party. I can really sort out his friends from his enemies. I helped him climb the corporate ladder and always advise him behind the scenes. He is very successful, but not that savvy about politics. That's why I'm not too worried about him going anywhere. He knows how much I help him.

The dialogue continued and I spoke for a while longer with the Dutiful Wife and thanked her for interacting with me. Then I had Marie move back into her original position and tell me how she experienced these two inner characters. I always end a session in this way, having the client reflect on what she heard herself say, with any realizations that occurred as she listened to these inner characters speaking. Marie talked about how they felt very different from each other. The Dutiful Wife was a cool headed, detached, thinking oriented person and the Nurturing Mother was a warmer, heart oriented person. The mother

was all about pleasing and feeling emotionally connected. Any loss of connection felt awful for her. Marie thought back over the past few sexual encounters she had had with her husband and noted that he seemed much more satisfied with the sexual experience when she was operating from Nurturing Mother energy rather than Dutiful Wife. This was an interesting realization for her. I noted that it still did not address where *she* was in the picture.

SEPARATING OUT- CREATING SPACE FOR SOMETHING NEW

As Marie began to separate out from these two dominant archetypes, she was able to observe how they had dominated her life. She began to experience herself as the director of her inner cast, rather than at the mercy of her “main players.” She began to negotiate with the Nurturing Mother for some personal space and identity apart from husband and family. We were able to achieve this when we pointed out to the Mother that Marie was failing to nurture her own inner children and that she too needed time for creativity and play and to care for the body that housed the entire inner cast of characters. As Marie began to separate out from the archetype of the Mother, she was able to find time for exercise and explore the realm of the Aphrodite and the senses.

SESSION FIVE –EXPLORING APHRODITE

In Greek Mythology, Aphrodite is the Goddess of love, sensuality, beauty, desire and eroticism. This energy can manifest in a variety of ways, but the sparkle, and luminous charisma of a woman imbued with Aphrodite energy is unmistakable.

Marie began to explore the realm of Aphrodite and the realm of the senses. Viewing herself as an erotic person was still way too much for her to deal with, but as a Jungian oriented sex therapist, I have found that dreams often act as powerful inductive experiences,

bringing new energies into the client's life and moving them forward in their process. One week, she brought in a dream in which she was on the African tundra watching a beautiful sleek Lioness. The dream was filled with sensual energy and became a powerful touchstone of her emergent sexuality and embodiment. By now, we had conducted several Voice Dialogue sessions and she was comfortable with the process. I invited her to "try on" the energy of the lioness and we entered into an imaginative session in which she experienced herself *as* the Lioness. As she took on this energy, she changed dramatically. Her face dropped fifteen years and she stretched herself out on the couch, relaxed and confident, sleek and sultry. Her eyes became timeless pools of mystery and she smiled a knowing smile. In dialoguing with the Lioness, we discovered that she longed to have her body stroked in long strokes, with firm hands. The Lioness wanted to playfully roll around in the bed without regard to who was up or down or whether anyone was about to fall off. She wanted long, lingering mornings in bed, with no kids around, when both were rested and there was plenty of time. We ended that session reflecting on the significant differences in the energetic feel of the Nurturing Mother, the Dutiful Wife and the Lioness. Marie was becoming an excellent director of her inner cast and we practiced dialing each of these differing energies up and down at will. She was truly amazed to experience herself as the sensual, sultry Lioness. I always marvel at what dreams can bring. Being unhurried was something Marie could not remember in years. As she integrated the feline energy of the Lioness, she found that she could relax, take a bath or just sit in the sun and take time for herself.

VOICES OF WARNING

As Marie began to integrate some of the Lioness energy, it stirred up anxiety and what I refer to as the Voices of Warning (Wakefield, 2012). The first roadblock to allowing

the Lioness was the Nurturing Mother, who was frightened by this languid, self-possessed energy, concerned that Marie would forget about the children. We had to provide assurances that allowing the Lioness entrance into her life would not cause her to forget completely the responsibilities of motherhood.

Marie also began to engage her husband in such a connected and sensual way that she bumped into another “gatekeeper,” a Guarded Amazon, who was not at all interested in getting closer to her husband. We uncovered this information in a Voice Dialogue session in which we discovered Marie’s introjected Mother, who lived in her as a Voice of Warning. Marie’s Mother did not trust men and wanted to protect Marie from being hurt as she had been when Marie’s father left her for the “Office Floozy.” Marie also discovered a Scorned Woman, other echoes of her mother, waiting in the wings, ready to play her part should Jack betray her or leave the marriage.

In a follow up session Marie and I talked about what it meant to love and how getting closer to someone made a woman vulnerable to hurt and loss. She came to realize that both the Nurturing Mother and the Dutiful Wife are actually “power archetypes” that protect the vulnerability that comes from being a Lover. All of these dialogues surfaced material that could easily have derailed the integration of Marie’s newly emergent Sensual Self embodied in the dream energy of the African Lioness.

THE LIONESSE AND THE TIGER

As Marie continued to become the director of her inner cast, she began to set boundaries, even if they displeased others. She created a ballet carpool for her daughter and recaptured more time for herself. She began to attend an exercise dance class and engaged more of her Sensual Self dancing to the Latin music. She encouraged her husband to spend

some weekends away from the kids with the express intention of leaving the Responsible Father and Nurturing Mother at home and relaxing as the sensual Lioness. As she explained the inner cast of characters to Jack, he became interested in the model and began to name his own inner characters. They began to see “who” was relating to “whom” in their respective inner casts and to break out of the stale bonding patterns they had been stuck in for years. Jack recognized that he too had been trapped in Parental Archetypes and wanted to claim a more vital sexuality. He recognized that he had also lost his zest for life in becoming an overly responsible Work Horse, not attending to his own need for play and rest. They became more playful and began referring to each other as the Lioness and the Tiger. As they kindled their sexual relationship for the first time, the temptation of the Sweet Young Thing at the office faded from Jack’s life.

CHAPTER FIVE

ARCHETYPES OF SEXUALITY

THE SEXUAL WOMAN – WHO IS SHE?

The Sexual Woman is an archetype, therefore her potential resides in the archetypal seedbed of *every* woman's psyche, she only needs to be cultivated and developed. The bloom of this flower will be unique to the woman.

In her book on the "no or low sex marriage," Weiner Davis (2003) advises the low desire woman that she has to first decide that a loving, satisfying sex life is important. Then, she needs to make a commitment to explore her untapped sexuality and to *find the Siren within*.

Andersen and Cyranoski (1994) found when women described a "sexual woman" the words did not vary substantially. Women of all ages defined her as "open, direct, experienced, straightforward, revealing, broad-minded, casual, open-minded, frank, and uninhibited." Respondents in their study stated that the "sexual woman" is "one who experiences passionate and romantic emotions and who evidences a behavioral openness to sexual experiences, romantic experiences, or both; such a woman suffers little from embarrassment or conservatism regarding sexuality." The words that women used to describe the "non-sexual woman" were "embarrassed, conservative, cautious, self-conscious, timid, cold, inexperienced, and prudent." Women who claimed the description of "sexual woman" had greater levels of satisfaction and enjoyment in their sexual lives.

The words I have heard to describe the "sexually evolved woman" include "assertive, imaginative, able to negotiate, open, responsive, authentic, soulful, rapturous, present, embodied, compassionate, playful, magnetic, intuitive, radiant, luminous, erotic,

spontaneous, curious, adventurous, courageous, creative, having a sense of humor, magnetic, generous, confident, passionate, able to mediate strong emotion, creative, warm, inviting, intimate, comfortable in her body.”

Research shows that women who consider themselves “sexual women” have sex more often and enjoy it. They have more sexual self-esteem and more sexual agency, which means that they understand themselves as erotic beings, know what they want, are able to communicate it confidently, and in a way that is more likely to evoke rewarding responses from a well-chosen partner. This is why supporting women in exploring and defining their sexual essence is the major component of this archetypal approach. Women can and should be encouraged to define and re-define themselves as evolving sexual beings across the lifespan.

AN EMBODIED SEXUALITY

A major issue for many women is actually getting into their bodies. It is really valuable to have the “voice of the body” speak. Ogden (2006, 2013) engages the voice of the body in her ISIS wheel work, where the client moves around a four quadrant wheel laid out on the floor, speaking from Heart, Mind, Spirit and Body. As the client speaks from each place, they are invited to notice the metaphors, stories, connections, disconnections and realizations that emerge in the movement around the wheel.

THE RANGE OF SEXUAL AND EROTIC IDENTITIES

While the gender of partner preference falls under the umbrella of “sexual identity,” there are significantly more nuances to erotic identity than whether ones’ desired sexual partner is someone of the opposite or same sex or anything in between. A vast spectrum of sexualities resides in the archetypal seedbed of our psyches.

Erotic identity includes the sex roles that client's assume, with accompanying scripts and core erotic themes, preferences for settings and patterns of initiation (Morin, 1995). Everyone has a unique love-map (Money, 1993) or arousal template (Bader, 2002). People like to engage in differing ways. Some women like to move deeply into their interior experience, entering a sexual trance. Others want intense partner engagement, with lots of eye contact and communication. More dramatic types love to dress up, play roles and enact scenes (Mosher, 1979). Meston and Buss (2007) have researched the many motivations for having sex. Every motivation for having sex will have a corresponding archetype. In recent writings about "sexual fluidity," Diamond (2008) describes how women's sexuality shifts and changes over the course of a lifetime in response to different situations and potential partners. We clearly have more than one sexuality within us, and many archetypal energies that we might inhabit. From this perspective, we might better consider that we have a set of Sexual *Selves* rather than a singular Sexual Self.

LOVE STYLES- ARCHETYPES OF LOVE

Lee (1977), and Hendrick and Hendrick (1986, 1998) have created and researched a typology of six "love styles:" Eros (passionate), Ludus (conquering), Storge (friendship), Pragma (practical), Mania (jealous) , and Agape (selfless). Although these were not originally conceptualized as "archetypes," they *are* readily recognizable patterns that repeat in human experience, and as such they can be thought of as *archetypal patterns of loving*. This author has added some possible archetypes that might be found in each of these Love Styles.

1) *Eros Lovers* are interested in "chemistry" and romance. Sex is an aesthetic experience and relationships are idealized, with a fantasy quality. When the romance fades,

eros lovers tend to move on to new relationships, in search of perfect love. Possible archetypes include the Hopeless Romantic, the Soul Mate, the Mistress, the Inspiratrice, Sleeping Beauty, the Muse, Desire Awakening Maiden, Adoring Girl, Damsel in Distress.

2) *Ludus Lovers* love the thrill of the chase. Conquesting a prize is the game. Once captured, they begin to lose interest and want to move on. They love intrigue and intensity. Possible archetypes include the Temptress, Seductress, Siren, Alpha Aphrodite, the Hook-Up Queen, the Hit and Run Lover, the Social Climber, the Opportunist, Home Wrecker, the Other Woman, Mistress, or Scorned Woman (a woman who is seducing for revenge).

3) *Storge Lovers* value companionship. They describe their partners as “best friends” and “soul mates.” Their trust in the relationship and the sense of being deeply understood is a source of security and comfort. They love to do things together and share many common interests. Intense passion is of less importance than companionship to these individuals and they enjoy egalitarian partnerships. Possible archetypes include: the Best Friend, Soul Mate, Companion, Sidekick, and Life Partner.

4) *Pragma Lovers* are practical. They tend to be traditional and pick partners with common values, who will help them reach their life goals. Their relationships tend to be quite stable in spite of their lack of passion, unless one of them begins to long for a deeper bond, in which case there may be trouble. Possible archetypes include the Traditional or Proper Woman, Good/Dutiful Wife, Responsible Mother (she raises well behaved “trophy children”), Corporate Wife, and the Social Climber who married “up.”

5) *Mania Lovers* are the most dramatic of the group, insecure, needing constant reassurance. They tend to be obsessive, possessive, jealous and controlling, with intense emotional swings. They also exhibit a lower level of psychological development and more

personality disorder. Possible archetypes include the Jealous Woman, the Mate Guardian, Detective, Stalker, Drama Queen, Mad Woman, Clinging Vine, Damsel in Distress.

6) *Agape Lovers* are self-less, devoted, and have a spiritualized quality to them and tend to be a-sexual. They are unconcerned with whether their love is reciprocated, and devote their lives to others. We typically think of saints and spiritual teachers in this category, but these lovers can be found in love relationships and family life as well. Possible archetypes include: the Saint, Angel in the House, Devoted Mother, Caregiver, Help Mate, and the Woman Behind the Man. The Celibate Nun or Mystic is also in this category because they write of their ecstatic devotion to God.

EROS INHIBITING AND EROS ENHANCING ARCHETYPES

Every archetype has a particular resonance that shapes behaviors, choices and emotional tone. The archetypes operate as a lens that defines the meaning attached to experiences. There are a number of archetypes that constellate in a woman's life that contribute significantly to a number of sexual complaints including low sexual desire, lack of arousal, anorgasmia, sexual avoidance, and even sexual pain.

In the process of developing a Sexual Self-awareness, a woman will encounter what I have come to call "eros inhibiting" archetypes. They discourage embodiment, pleasure and self-care. Eros inhibiting archetypes often act as "main players" in a woman's cast, dominating her inner self system, blocking the expression of other possibilities, including her Sexual Self. When eros-inhibiting archetypes dominate the inner self system, inviting the Sexual Self to play a larger part in the client's life can create tremendous intra-psychic conflict. These conflicts will need to be resolved before her Sexual Self will be allowed to stick around. If these conflicts are not resolved, the system will push to return to its previous

state before a new identity becomes established. One of the most insidious eros-inhibiting archetypes are the Dutiful Wife and the Good (Responsible, Nurturing, Self-Sacrificing) Mother.

THE DUTIFUL WIFE

Shere Hite (1994) has devoted an entire book to examining archetypes of family life. She discusses how the archetype of wife and mother, severely inhibit a woman's sense of sexual empowerment. We underestimate the whitewashing power of the archetype of "the wife" on flesh-and-blood women.

Dalma Heyn (1997) asserts that if we ever bothered to really see female sexuality through the eyes of women, rather than through the eyes of men, we would see a far more erotically charged and richly textured landscape. In *Marriage Shock: The Transformation of Women into Wives*, Heyn outlines the gradual erosion of a woman's erotic edge as she is turned into a virtuous, self-sacrificing, proper "wife." In the late 1800's it was considered that only women of the lower classes suffered from the indignity of sexual desire. Heyn (1992, 1997) encourages women to be very conscious of the gravitational pull of the archetype of the "good wife" and to actively write a new script for marriage.

THE NURTURING MOTHER

Many books talk about how a woman's life changes as she assumes the role and responsibilities of motherhood, but they do not discuss the powerful energetic pull of the Mother archetype and how powerfully de-eroticizing it can be. This is true in both the woman's experience, as well as in the eyes of her husband or partner. Sidra Stone (1997) writes about how deadly the archetype of the Mother is to a woman's "Aphrodite self." Because the archetype of the mother is devoted to others, she will lose interest in her own

pleasure, considering this selfish (Bader, 2002; Perel, 2007, 2010). Eroticism involves a certain degree of aggression and selfishness, both of which are antithetical to the selflessness and soft orientation of the Nurturing Mother.

In paying less attention to herself, and feeling desexualized, a woman can begin to feel fat, dowdy and less desirable, frisky or playful. (Reibstein and Richards, 1993). Sexy belongs to the realm of Aphrodite, the self-serving alchemical Goddess of love and pleasure. A woman who embodies the archetypes of Wife and Mother may stop taking time for herself and feel that her sexual days are over.

Men are often mystified by the sudden shift that occurs when a woman becomes a mother. They long for the early days of the love affair and wonder, "Where did my Lover go?" While the Good Father in a man may appreciate a woman's attention to his children, the Youthful Lover or Needy Child feels dismissed, untended, and bewildered as the Responsible Mother pushes him off to the side emotionally and sexually, shifting her attachment to the little people in the house (Stone, 1997). In response to this abandonment, a man may invest himself more heavily in his career, moving more deeply into the archetype of Responsible Father and Provider. He may lose his connecting to his own Sensual Self, or he may split his sexuality, and take his eroticism away from the Wife and Mother to an erotic partner outside of the home.

As a couple begins to devote themselves to the family, they often become too tired and preoccupied to be sexual with one another. The Lovers in each get subverted under Responsible Parental archetypes such as Provider, Nurturer, Household Administrator, Chauffeur, Disciplinarian, and Soccer Dad and Mom. None of these parental archetypes

carries sexual energy. Viewing relationships from this perspective, it is easy to see why so many modern relationships drift into a sexless malaise.

Certain roles can engulf people, causing them to disown other aspects of themselves and move into a state of imbalance. Archetypal energies in direct collision with one another create enormous intra-psychic conflict. This conflict is often resolved by abandoning one set of identities in favor of another. In this clinician's observation many women, captured by the archetype of the Mother can't even remember the days when they were Young and Reckless, Fools for Love, Desire Awakening Maidens, Lustful Young Lovers. In raising daughters, they convey anti-sexual messages in an effort to protect their girls from some of the heartbreaks and "foolish choices" they experienced in their own lives. As Proper Women, they no longer carry the Aphrodite energy of their youth. Some begin to whitewash their own histories and represent themselves as Good Girls, rather than the Wild Girls they once were. Their true (and valuable) sexual stories are lost in translation.

POWER DYNAMICS IN A WOMAN'S SEXUALITY- THE DEPENDENT DAUGHTER

Hite (1993) found that power dynamics shape how much a woman defines and expresses her sexual desires. Women are often hesitant to ask for what they want sexually because penetrative intercourse dominates our cultural view of "sex." Intercourse and penetration is not necessarily the favorite sexual activity of women, but many women are afraid that if they do not supply the sex that the man in their life wants, they will lose his love. Sex is also strongly intertwined with economic provision. It may be subtle, but most women in Hite's research responded that they understood the dynamics of how to trade sex for what they needed and wanted, whether for room and board or a new sofa. Hite emphasizes that "you cannot decree women to be 'sexually free' when they are not

economically free; to do so is to put them into a more vulnerable position than ever, and make them into a form of “easily available common property.” Hite also points out that it sometimes seems that the sexual revolution has merely put pressure on women to have more of the same kind of sex rather than helping them re-define what kind of sex they want to have.

Stone (1997) describes the dependent aspect of a woman’s sexuality as being a Good Daughter to patriarchy. Whenever a woman is dependent, she remains in the daughter archetype. Some women move out of Dependent Daughter and into the opposite energy, Rebel Daughter, but this is merely a rebellion, not a true “graduation” into womanhood. To graduate, a woman must claim herself and become truly self-referencing, not looking to others for approval, rescue, protection or provision. Being in the archetypal realm of Daughter in relationship to a Provider (husband in parental role) desexualizes and disempowers a woman because it creates passive sub-servience rather than self-claiming and triggers an unconscious incest taboo (Young-Eisendrath, 1984,1993; Stone, 1997; Woodman, 1985; Pinkola Estes. 1992).

WHEN TREATMENT STALLS- THE SEXUAL GATEKEEPERS

Treatment compliance is one of the most frustrating issues for all kinds of therapists and health practitioners. The concept and label of “resistance” was first coined by Freud (Kaplan, 1974). Since that time, clients who will not move smoothly along a therapist’s treatment ideology are given the pathologizing labels of “resistant,” “non-compliant,” or “unmotivated.” Any time treatment slows down or stalls out, this author checks for two things: 1) Eros Inhibiting archetypes that are dominating the inner cast and allowing no space for a Sexual Self and 2) Sexual Gatekeepers.

A sex therapist can create the world's most brilliant intervention strategy, but unless the inner self system is aligned with the treatment goals of sex therapy, the treatment will stall out. The Sexual Self is an important inner character to dialogue with. Within the inner self system, there will be other inner characters that influence, constrain, or pressure the Sexual Self to behave in certain ways. Understanding "non-compliance" from an inner self system perspective, shifts these impasses from frustrating roadblocks into avenues of exploration. For many people, the Sexual Self has never been allowed to develop or fully express itself because of tight psychological constraints which this author refers to as Sexual Gatekeepers. A Sexual Gatekeeper is any inner self that is blocking sexual fulfillment. Gatekeepers can actively shut down the physical aspect of sexual functioning.

Sexual scripts tell us what to think, feel and believe about sex. What is important? With whom, when, where and how is sex OK? Any time we transgress one of these rules, we encounter Gatekeepers. They often operate as Voices of Warning. If you trace the voices back, you will often find the faces of influential authority figure from childhood. Gatekeepers generate distressing body sensations, only alleviated by a client returning to a previous, less sexual state of being. Once the client gets back inside the box that once constrained them, the Gatekeeper relents. This is one of the reasons that clients don't do homework. The homework stirs up anxiety.

As we begin to explore "who" is not on board with the overt goals established at treatment outset, we uncover the covert goals of the Sexual Gatekeepers. Over the years of interviewing these covert inner selves, this researcher has encountered such characters as shaming Fire and Brimstone Preachers, Good Catholic Girls, Amish Grandmothers, Armored Amazons & Militant Feminists.

According to Sidra Stone (1997), a powerful inner character she calls the Inner Patriarch lurks in the psyches of all modern women. The Inner Patriarch believes that there are only two categories for women, Madonna or Whore. Women must tow the line and carefully guard their reputations. To be a Sexual Woman is dangerous or forbidden in the view of the Inner Patriarch.

Gatekeepers usually consider themselves to be “helpful.” They are valiant protectors of a client’s reputation and vulnerability, vulnerability carried by inner children. Sometimes they are protecting the client from feelings or memories that are hard to experience or process. We need to discover what is getting stirred up as the client begins to explore and expand their sexual identity. Who are the “concerned parties” in the wings. Remember that each inner character in the cast has a different set of needs, concerns and agendas.

When Gatekeepers are personified and dialogued with, these difficult inner characters offer important information that is almost always unconscious. What do the Voices of Warning say about what might happen if the client enhances their sexuality? For example, if the client stops having sex to please her partner and begins to explore her own needs and desires, the Voices of Warning may tell her that she will lose the relationship. This material needs to be surfaced, so that it can be worked through. Clients may need to make peace with their sexual history, family, cultural or religious teachings, or perhaps some work may need to be done to heal an inner self that carries past trauma. As sexual awareness increases, so does the capacity to separate out from an archetype or voice’s oppressive power. The client begins to act as director of their inner self system.

As the client begins to discover un-lived longings, here are some things a sex therapist might do to draw out and work with Sexual Gatekeepers.

– Ask the client to look inside and notice if imagining being different or asking for something new stirs up anxiety. Listen for any internal voices that tell her it would be dangerous to express or fulfill these longings. What do these Voices of Warning say might happen if she were to do so? (Now that you have located the Voices of Warning, personify them and move into a direct dialogue with them).

– Walk the ISIS wheel of integration. Ogden (2006, 2013) notes that clients often compartmentalize their sexuality. She invites them to move through the realms of heart, mind, body and soul. Are these realms in harmony or in conflict? How might the story be changed with the use of different symbols and metaphors in their sexual story, or viewed through a different lens?

REPUTATION GUARDING AND THE “SEXUALLY EXPERIENCED WOMAN”

Research continues to show that sexual attitudes allow men greater sexual freedom and sexual self-determination. Women are socialized to restrict their sexuality in order to protect their reputation, and at the same time to be responsive in fulfilling men’s sexual needs (O’Sullivan and Byers, 1992; Schwartz and Rutter, 1998). Outright pleasure seeking is still not considered an openly acceptable motivation for having sex if you are a woman concerned with your reputation. What women entertain in their private world may not be expressed publicly, or even in an intimate relationship. The woman who is honest about a desire for pure pleasure outside the realm of relationship is still looked at with condemnation and concern. Young women who want to marry prestigious Golden Boys are well aware of the necessity of guarding their reputations (Wentland, Herold, Desmarais, Robin, 2009).

The Inner Reputation Guardian is a Gatekeeper who affects how a woman expresses her sexuality. The Madonna and the Whore, the Princess and the Prostitute, the Housewife

and the Hottie, these opposites all refer to the tension that women hold regarding just how sexual they should be before they move into the danger zone. Women are caught in an ongoing series of confusing messages and double binds, leading them to develop a “split-self” around their sexuality (Hite, 1994).

Women are sensitive to this split aspect of the male psyche which Anne Ulanov (1994) refers to as the split-anima condition, also known as the Madonna-Whore complex. Ulanov describes how men long for the tending, holding maternal in their lives, a place to find love, comfort and security. However, at some point men also need the exciting and transforming feminine, a woman with whom they can be instinctual and erotic. Finding one woman who can carry both of these archetypes and integrating the split in their own psyches is no small task for most men. Throughout recorded history, many men have resolved this conflict by enjoying the stable comforts of a marriage and seeking their inspiration and erotic fulfillment outside of the marriage.

Sidra Stone (1997) describes how mothers play a part in the installation of the Inner Patriarch, transmitting to their daughters the constrictive sexual messages they themselves have internalized. While boys are permitted more sexual freedom, the messages that girls get about sexuality are mostly negative and restrictive ones. Even when no-one else is present, the voice of the Inner Patriarch still speaks in a woman’s head, directing her actions and putting guard rails on her behavior. Dialoguing with a woman’s Inner Patriarch can yield amazing results in terms of surfacing this unconscious oppressive force and supporting a woman in claiming her own self-determined sexuality.

Sex therapists often encounter the internal struggle that women face after years of careful reputation guarding. Women are suddenly expected to be able to flip a switch and be

sexually responsive in the “proper relationship.” This can be incredibly difficult for some women, who have shut down their eroticism and become deeply split about the meaning and acceptability of their sexuality. If they are highly identified with being Good Girls or Proper Women, they will need to recalibrate their core identity and develop a new inner character for whom sexuality is permitted, and perhaps even sought out as pleasurable. In years past, women who could not make this shift were labeled “frigid.” This is a woman who cannot unleash her “inner siren,” even when it has been deemed socially permissible. This dynamic is often diagnosed as Hypo-active Sexual Desire Disorder (DSM- IV-TR, 2002). The sex therapist who works with archetypes can help this woman understand her internal scripts with the accompanying cast of characters, and help her open to new sexual energies, undeveloped in the seedbed of the psyche.

Naomi Wolf (1997) writes about the thin line that a woman walks between the categories of “sexual enough” and “cheap slut.” Winding up on the wrong side of this hard-to-discern line can be costly. You don’t want to be considered a Prude, but even during the sexual revolution, women still understood the cost of being labeled a Slut. We can come up with a long list of names for both of these archetypes, but the inference is the same. Ironically, the tension is increased in today’s world by the media, which puts an increasing amount of pressure on young women to appear “sexy” at a younger and younger age (Kilbourne, 2009).

Men, on the one hand, may desire a Wild Woman, Porn Star, or Concubine in the bedroom, but they also want a Proper Woman or a Devoted Wife in the public arena. And while adultery in the male world has been tolerated throughout history, the archetype of the Adulteress remains universally shameful. The Mistress, Courtesan, and the Muse all hold

sexual mystique, but they are feared and hated by Good Wives. If the Mistress actually becomes a Husband Stealer or Home-wrecker, she enters the precarious position of being loathed by the Faithful Wives of her husband's old friends, who will identify with the Betrayed Wife. Scorned Women who take their revenge are secretly applauded by many women particularly if the discarded woman is a middle aged wife dumped for some Dangerous Seductress or Sweet Young Thing.

AMAZONS AND REBEL DAUGHTERS

The Armored Amazon and the Revolutionary are two archetypes articulated by Jungian analyst Linda Leonard (1993) that are in rebellion against the patriarchal forces that would constrain them. Sidra Stone (1997) refers to this same energy as Rebel Daughter. This archetype is in rebellion against the Patriarch, both inner and outer. She defiantly steps over the Good Girl line. She may willfully inhabit the archetype of Free Spirit, Wild Woman, Cougar, Tigress, Vamp, Femme Fatale, Bad Girl, Slut, Seductress, Consort, or Wench, but cultural scripts still prevail, and enduring stories still convey that Good Girls earn provision and protection, while Bad Girls come to a bad end.

The Rebel Daughters of today can be found celebrated by the MTV generation, which has attempted to turn this archetype on its head as the Bad Girl becomes the sought after "hottie," as she confidently struts her stuff in black leather and heels once associated primarily with the Dominatrix. The newly created archetype of the college Hook-up Queen has turned the tables on the men of previous generations. She is the one who can now sleep with a guy just for sex, supposedly with no emotional attachment. Recent reality shows are based on the archetype of Girls Gone Wild.

This author has conducted quite a number of Voice Dialogue sessions with mid-life women who were Wild Girls in their youth. This often becomes hidden material in their backgrounds, disowned as they move into domesticated archetypes of Proper Wives and Responsible Mothers. Many of them have forgotten this “retired self,” and what it felt like to inhabit the archetype of a wild, uninhibited, free-spirited Aphrodite. The double standard persists.

MAIDEN AND MISTRESS

Polly Young Eisendrath (1993) is a Jungian analyst who has done some exploration of the archetypes of sexuality that women play out in relationships. She describes two major sexual archetypes that a great many men project out onto women that become internalized and carried in the psyches of women. They are the Maiden Lover and the Mistress Lover.

The Maiden Lover is young and sweet, shy or naïve. She is the Innocent or sexually Uninitiated Girl, full of potential that needs to be developed, awakened, or given the right guidance. Young-Eisendrath (1999) also writes of how women’s fantasies and love narratives are primarily centered around the longing to be *objects* of desire. Even in this modern day, much of their self-esteem is drawn from their sense of being desirable.

Pygmalion (My Fair Lady) is a classic story of the Maiden Lover. Eliza Doolittle carries the wide eyed vulnerability of the Uninitiated Girl, a Little Red Riding Hood, who cannot see through the crafty lines of a predatory Wolf. She is a Cinderella, Protected Princess, a Sleeping Beauty, waiting to be awakened for the first time by a kiss from a Prince who is bold, charming and daring enough to scale her protected walls. All of these are expressions of the archetype of the Maiden.

A great many men respond to this Maiden archetype when they encounter her energy, particularly as they get older. In her presence a man experiences being re-energized. When she admires or idealizes him, he feels powerful once again. The maiden may be a free-spirit, high spirited, or softly adoring. She may be like a Special Daughter of a powerful, Provident Father, a Protégé to a Sage Teacher, or the Sweet Young Thing that captures the heart of a powerful CEO or army general (archetype of Hero/King).

Women understand the power of the Desire Awakening Maiden. As young women, they are often overwhelmed or amazed, and sometimes frightened by the effect they are having over the men whom they “enchant.” They also know the envy of less attractive women, and Fading Beauties, who no longer possess the power to enchant. This theme underlies the fairy tale Snow White, where the Queen who was once the “fairest of the land” is moved into murderous envy at the Lovely Maiden that is replacing her.

All women carry the Maiden because she represents innocence. Even women who are less attractive or those with difficult pasts had moment of being fresh faced and carry the archetype of the Innocent. This breath of spring lives on in the psyche of all women throughout their lives whenever they move into that sense of wonder at life, the feeling of possibility and renewal.

On the opposite side of the Maiden is the Mistress Lover; seductive, alluring, inspiring, addictive and often crafty or deceitful. In all mythology she is considered compelling, but dangerous and not to be trusted. She drives men mad with desire. Women who carry this sexual energy learn its power early on and often adopt it as their primary way of holding power in the world. Personified in mythology as Pandora, Circe, and the Siren women, she generates an irresistible pull that can lure men to their deaths. She is the Fatal

Attraction, the Femme Fatale. The idealized Mistress is also the Femme Inspiratrice and the Muse. In myth and in history she inspires great art and achievement. She is Helen of Troy, the face that launched a thousand ships. She would never think of becoming something as mundane as a Good Wife or Devoted Mother (Leonard, 1993; Stone, 1997). In Young-Eisendrath's (1999) thinking, the pornography industry is driven by the Pandora archetype, loosed from her box.

TRAUMA, ABUSE AND SHAME

One of the major factors that separate women from their innate sexuality is a history of trauma and abuse. While a history of sexual abuse can cause women to over-identify with being objects of desire (high percentages of prostitutes were sexually abused as children), it can also lead to a perpetual stance of sexual avoidance. Research indicates that one in three women in this culture have experienced unwanted or traumatic sexual experiences, often at a young age, often at the hands of someone they know and should be able to trust (Bass and Davis, 1988; Maltz, 1991). This being the case, sex therapists are wise to inquire into this history, as victims of childhood sexual abuse often have arrested sexual development. If there is trauma in the history, it may require some focused attention and deep work before this woman can claim her sexual birthright of pleasure and meaning. Sexual violation impacts identity and script formation. If the sex therapist does not have adequate training in working with sexual abuse or trauma, they either need to have a collaborative referral source or get some training in a specific trauma treatment modality.

Individuals who have a history of trauma develop inner selves that remember and carry that trauma. Depending on the degree of the trauma, that inner self may be significantly walled off, surrounded by a somewhat impenetrable membrane that protects the

individual from revisiting overwhelming memories and states of emotion. That membrane gets challenged when the client enters the sexual realm, where a loss of control is required to enter deeply into the erotic realms of pleasure. Orgasm and emotional merging and physical intimacy challenge the defined ego integrity of each participant (Phillips and Frederick, 1995).

In viewing this situation from an inner self system perspective, we can understand that women with sexual trauma often have Sexual Selves that are frozen at the age the trauma occurred. Thus, their sexual self might be quite young and not able to engage in adult activities. These young inner selves can be severely split off and dissociated, which is why working with severe sexual trauma often requires specialized clinical training (Phillips and Frederick, 1995).

Abused Children can hide in the background of a woman's psyche like "kids behind the curtain" (Wakefield, 2012). They may be a major factor holding a woman back from a more embodied experience. To be in a body is just too dangerous. Often what occurs is the psyche creates a wall of "power characters" that stand out in front of this vulnerable child in order to protect her. These power characters will be what the sex therapist encounters initially. It is easy for a sex therapist to be fooled by a woman's high functioning presentation. The high functioning selves are in front of the curtain with the vulnerable kids behind the scenes. Any time they sense that the client might be moving them in the direction of being sexual, they create anxiety which causes the client to pull back. From a behavioral standpoint, backing away from situations that evoke anxiety is powerfully reinforcing, because the minute the client avoids the stimulus, the anxiety recedes. This is how sexual avoidance develops.

Voice Dialogue is an effective way of working with traumatized sexual selves. Many of them have never told their story. Breaking the silence is a big deal for them, but they long to tell their story to a safe listener. Sometimes an Abused Child needs very specific reassurances before she can allow any further sexual development to take place in the client's adult life. Sometimes what needs to happen is to anchor historical events in their proper time, so that the child inside understands that the sexuality going on in the new context is not the same as the abusive sexuality that was going on in the past.

It could be said that everyone raised in this culture has some degree of sexual trauma, because there are so many conflicting and negative messages about sex. Women have been taught how to be "sexy", but not how to be "sexual." In a culture where images and messages about sex are everywhere, people often disconnect sexuality from their hearts and souls (Ogden, 2006).

RELIGIOUS SHAMING

Most clinicians and sex therapists are familiar with how sexual messages internalized from a strict religious upbringing can inhibit adult sexuality (Masters and Johnson, 1970; Kaplan, 1974, 1979; Stone, 1997). These early messages can create another set of powerful Gatekeepers in the inner self system. Tracing back Voices of Warning will lead to these inner characters. Over the years, this clinician has dialogued with many inner characters that carry these introjected messages. Inner characters have included: Good Catholic Girls, Proper Christian Women, Prudes, Fire and Brimstone Preachers and the like.

Once a Voice of Shame has been identified, and interviewed, the client has significantly more consciousness regarding where these messages came from and how they have constrained their sexuality. At this point, they are better able to thank this Gatekeeper

for their years of protective service, and hang their pictures in the “retired selves” Hall of Fame. Sometimes a ritual of release or another symbolic act is called for in where the “contract” of constraint is burnt and the smoke offered up to the sky or floated out to sea.

OLD SCRIPTS AND NEW SCRIPTS

Most people do not realize how deeply scripted their sexual behavior is. They follow the scripts they have been handed by their upbringing and their culture, other people’s scripts. There are definite scripts given to us that define what is normal, functional, moral, and acceptable. In living other people’s scripts, clients often come to us wondering why sex is so uninteresting or unfulfilling. In our culture, we are not as interested in the subjective meaning of sex as we are in controlling the behaviors of sex. Clients often think of sex as something they *do*, rather than “sexuality” as an expression of *who they are*. There can also be a significant discrepancy between their public persona and their private worlds. When we treat sexual dysfunction from a primarily behavioral perspective, we often miss these important nuances. Because sexuality in this society is so heavily conscripted, many people harbor unexpressed longings or live in fear that what they desire may be considered unacceptable or abnormal (Bader, 2002).

For all our talk about the problem of a performance based sexuality, sex therapy itself carries definitive scripts about what good sex is and what it means to be sexually adequate or functional (Kleinplatz, 2001, 2012). While orgasms are often the goal, not all orgasms are created equal. Ultimately what is most compelling about sex is what it means (Gagnon & Simon, 1973; Kimmel, 2007; Ogden, 2013).

In working with clients from an inner self system perspective, sex therapists can trace scripts back to archetypes. Likewise, the sexual archetypes that people identify with will

shape their sexual scripts and behaviors and determine what they allow themselves to experience and express. Sometimes, merely shifting from one sexual archetype to another will allow a client to access aspects of themselves they were never able to express before, resolving the sexual problem.

OLDER WOMEN- THE COUGAR, THE FRUMP, THE OLD MAID AND THE HAG.

Research supports the fact that women of all ages are sexual creatures (Daniluk, 1998; Ogden, 1999, 2006, 2008; Goldman, 2006; Bonheim, 1997; Hite, 1976, 1989; Price, 2006). For some women getting older means becoming more confident and self-aware and thus developing more capacity for a body-centered sexuality. Meanwhile, our culture continues to maintain a negative attitude toward sexuality in the elderly. Contrary to stereotypes of loneliness, women in their later years are finding both pleasure and someone to love them. Women over sixty are beginning to openly describe the pleasures and fun of sex in the “golden years,” with the sense of agency that comes from knowing what they want, having the confidence to ask for it, with no concerns for pregnancy, and having released a lot of preoccupations with having a perfect body (Price, 2006). This author suggests that as women age, mature, and gain more confidence, they can also expand the archetypal base of their sexuality with an increased capacity for pleasure and a wider sexual expression.

DeLamater and Hyde (2004) have emphasized that we need more sexuality models that take into account life stage development and the stages of a relationship. The Desire Awakening Maiden or Shrinking Violet at age twenty-five, can become the self-assured, Sexual Earth Mother, a Gloria Mundi (Ogden, 1990) at age 40, and the Rocking Chair Soul-Mate at 70. Each phase of life and relationship situation shapes a client’s sense of self, the archetypes they identify with, and what is meaningful in the stories they tell.

In days past, the single older woman inhabited the archetype of Old Maid or Spinster. While she may very well have purposefully chosen to remain single, the assumption was that she was “unchosen,” or that she had never found someone to love. This same woman may have had a rich sexual history as a Femme Inspiratrice, Muse, or Mistress. Alternatively, she may have devoted her erotic energy into an art form, a cause, or an intellectual pursuit. She may have been a lesbian woman who quietly loved women, flying under the radar of public disapproval as an ill-fated Old Maid or Maiden Aunt. While society tends to project loneliness and vulnerability onto the Widow, she may be happily reclaiming her Bohemian Artist or Free Spirited Adventuress. She may even take a lover, now that she is freed of the heavy archetype of Caregiver or the inhibiting archetype of Proper Woman.

BODY IMAGE

One last area that has a significant impact on a woman’s sexuality is her relationship with her body, in particular her body image. Kilbourne (1999), Hite (1993) and Wolf (1991), talk about the extent to which women compare themselves with the artificially manufactured images put forward by the ad industry. Most women live with a perpetual sense of not measuring up to the ideal bodies promoted by these false images. A preoccupation with negative body image is one of the major impediments to women enjoying their sexuality or seeking a relationship (Daniluk, 1998). Many women inhibit themselves sexually, or do not want to engage in certain sexual activities because they do not feel good about their weight, their shape or their appearance in general. Women’s body images are influenced by many sources outside herself, and primarily by the media (Kilbourne, 1999; Wolf, 1991).

Savage (1999) discussed how many women manifest a rejection of their sexuality in an overall critical attitude towards their bodies. They feel resentful or disgusted by

menstruation. There is no symbolic ritual in modern society that honors the onset of menstruation as the entrance into a woman's fertile years. Savage has written a series of rituals that can support women in loving and accepting their bodies as vessels of expression for their sexuality across the lifespan.

In this researcher's experience of conducting Voice Dialogues with women in the area of sexuality, I regularly encounter Inner Judges and Critics who carry very negative attitudes towards the woman's body and great concern over how a woman is perceived by others. I have rarely met a woman who likes her body.

One of the interventions I have found to be effective with women who hate their bodies is to take them into a Guided Imagination where they imagine inhabiting a body that they consider beautiful, alluring, and desirable. We then spend some time experiencing what this would be like. How would she move? What might she do or say in this desirable body that she does not allow herself to do or say right now? Who would she have the confidence to approach, attract or seduce if she believed she was beautiful? It is amazing to note the transformative changes in the woman's appearance, energy, and level of confidence as she inhabits this inner space of imagined beauty and desirability. It confirms the notion that self-esteem is really what makes a woman attractive, rather than the body itself. When I have moved a woman through this exercise in the presence of her partner, it is always moving to watch the positive responses of her partner as she allows herself to inhabit the experience of truly being beautiful. It also validates the idea that the archetype a woman inhabits has great power over how others experience her. When the archetype of the goddess of love (Aphrodite energy) is constellated in a woman, she suddenly becomes imbued with the

vitality of love, beauty, passion and spiritual renewal, regardless of her age or appearance (Stone, 1997; Shinoda Bolen, 1984; Qualls-Corbett, 1988).

GODDESS SEXUALITY AND THE SACRED PROSTITUTE

It is important for women to understand that there was a time in history when women's sexuality was revered (Savage, 1999; Qualls-Corbett, 1988; Eisler, 1996; Gimbutas, 1999). In the midst of the mixed messages about sexuality, the modern struggle for sexual freedom, and the controversy around pornography, there is a growing awareness that there was a time in antiquity when women's sexuality was considered sacred and magical.

In Goddess cultures, women's bodies and their sexuality were considered a wondrous mystery. Rituals of sacred sexuality were practiced in many of these cultures, with women in the role of Priestesses or Sacred Prostitute. Sexual unions, or sacred marriage rituals with these women, were considered a way to become imbued with the divine power of the Goddess. In that time, women did not look to men to give them a sense of sexual identity. In contrast with the demeaned place that the archetype of the Prostitute holds in today's world, the sacred union with these Sexual Priestesses was used as a means of cleansing, blessing, and restoring soul. Isis, Innana, Astarte, Ishtar, and Aphrodite, were all Goddesses of love who were venerated. Qualls-Corbett (1988) writes of the dream content of women who are struggling with their disowned and devalued sexuality. All of these dreams emphasize how much female sexuality has been demonized, feared and repressed by male religious authorities.

Savage (1999), who writes about Goddess Sexuality, has created a developmental model of women's sexuality across the lifespan that celebrates the changes in a woman's body and experience as she travels through the developmental phases of Maiden, Mother and

Crone. Savage emphasizes how the gathering of wisdom gained over a lifetime can increase the pleasures of sexuality in an older woman and how important it is to transmit sexual wisdom to the younger women in their lives.

GUARDIANS AND KEEPERS OF THE INNER FLAME

Savage (1999) writes about a woman's Inner Guardian, who serves as a wise boundary keeper, helping a woman discern and make choices about who she will allow close to her and who she should keep at a distance. This Inner Guardian acts as a support for a woman in asserting what she wants and needs sexually. Ogden (2006) echoes a reverence for female sexuality and during her ISIS weekends, she encourages women to rekindle their connection with a guided visualization in which they meet their inner "Keeper of the Flame."

RECLAIMING LOST SEXUALITY

A remedy for the woman who has moved too deeply into the Mother archetype is to invoke or "try on" the energetic feel of some sexual archetypes such as: French Courtesan, Flirt, Vamp, Free Spirit, Nymph, Beloved, Blond Bombshell, Sultry Seductress, Medieval Tavern Wench, Harem Girl, Gypsy, or Bohemian Artist. A woman who has been married for years, can benefit greatly by activating the youthful Maiden Lover within her. She might find the Courtesan or Pampered Mistress fun to play for a night, evoking an Ardent Lover from the boring man she has come to take for granted. These archetypes are about energy, and not dependent on age. If the woman enjoys dressing the part and her partner responds to this kind of play it can create a refreshing erotic experience for both. Going on vacation in a tropical paradise is a way of activating sensuous energies. Erotica works for some people because it stirs the erotic imagination and opens the reader up to these energies. Watching any movie in which a character carries an appealing energy is a way of exploring this realm.

EXPLORING AND EXPANDING YOUR SEXUAL ESSENCE

Every woman carries a particular sexual essence, her own unique way of being female. Sex therapists can support women in exploring and defining who they want to be and what qualities of the erotic feminine she is drawn to. Is she saucy, sanguine, smoldering, seductive, sultry or sweet in her sensuality? What has she been in the past? What would she like to develop? If she embodied more of that in the bedroom, how would she be different with this partner, or a new one? How would she walk, talk, think? What kind of things would she be doing that she isn't doing now? What would she stop doing? The sex therapist can facilitate explorations of these energies in the client through an experiential modality such as Guided Imagination, or Voice Dialogue, encouraging her to "try on" new ways of being. Changes in a woman's archetypal identification will evoke changes in a partner. Cybernetic shifts make space for creativity in a relationship, dislodging stale, stuck interactions that seem fixed and immutable. Learning how to carry new archetypal energies is a capacity that can be expanded into every area of life. Learning to shift states and move from one inner character to another is a skill that can be developed (Stone, 1989; Emmerson, 2008).

SHIFTS IN IDENTITY- BRAIN CHANGES

Any time we integrate new archetypal energies, we are talking about shifts in *identity*. This is a recalibration of “who I am and what I do.” The sex therapist can support this change process as the client integrates this shift in identity. As people integrate changes in their identity, it will inevitably lead to a sense of disorientation and result in anxiety. In addition, the client may have difficulty trusting themselves, or not value themselves enough in their own right to believe that they deserve pleasure and fulfillment. Voice Dialogue can be utilized to surface the inner selves that carry these feelings of concern, self-doubt, and to support them in calming down and allowing the changes process to continue.

Dan Siegel (1999) emphasizes that we are both formed and changed by experiences that carry sufficient emotional “charge.” Emotional experiences create or redirect neural pathways in the brain. Recent research shows that human neural pathways, along with our interpretation and reactions to events, can literally be rewired by new experiences where sufficient emotional charge is generated. This is also how people heal from trauma and learn new ways of operating in life, enhancing their sense of identity.

AN ARCHETYPAL “MAKEOVER”

Facilitating a woman through the Voice Dialogue technique or other experiential methods is an excellent way to help her to experience dwelling in an unfamiliar archetypal energy, and know herself in a new way. Many women, who have never defined their own sexual essence, respond to the imaginative world of sexual archetypes. For example, if a woman wants to move from Frump to Flirty Feline, she will need to change her archetypal identity and write a new story line. She will need to recast the inner characters that play out her sexuality. She will need to have made space in her life and in her psyche for the

expansion of her Sexual Self. As a woman begins to consider a list of archetypal possibilities, she can grasp that there are many ways to be sexual. Similar to the idea of a personal style makeover, in which a woman changes her clothing, hair and makeup, a woman can also have an archetypal makeover, integrating new sexual energies.

She can explore operating from a different, more attractive, more exotic, bolder, softer or more sensual archetypal orientation. Archetypes can be explored through music, art, dance, costume and clothing, décor, food. In shifting her archetypal orientation, a woman may decide to decorate her bedroom differently, drive a different car, change her career, travel to places she never went before, change her associations, pick a different lover, or evoke something new from the lover she already has.

Choosing an actress from a film or a character from a book or history can be a way of focusing on a particular archetypal quality that a woman would like to carry more of. An archetype can be explored through a wide variety of experiential approaches: guided visualizations, rehearsal and role play, Gestalt dialogue, Voice Dialogue, ISIS wheel work, elucidation of fantasies, and Jungian dream work. Here are some questions to open an exploration in this area:

- What do you want to experience or express sexually that you have not been able to do thus far?
- Who can you think of that might be a role model in this area, an actress, a story character, someone out of history, a friend, or acquaintance?
- What words would you use to describe this energy? (Pay particular attention to see if any other inner characters object to these words)

- If you carried this energy, what would you be doing that you are not currently doing? How would you dress, think, move and relate?
- Are there any Gatekeepers, Inner Critics, Script Monitors, Reputation Guardians, or Voices of Warning that might stop you from moving forward with this?

Any time the process of sex therapy or sexual exploration begins to stir up anxiety or comes to a halt, we want to check for Gatekeepers. What do the Voices of Warning say? What assurances do they need to move forward? Are there fears of re-traumatization, rejection, or shame? Does the trauma need to be worked through and resolved before goals can be moved forward? Does the pace need to be slowed down? Dialogue with these inner forces to explore their fears and objections, negotiating limits, compromises, and protections, until some resolution has been achieved. Sometimes a way of doing this is to propose the possibility of trying out just a drop of this new energy to see what happens.

The sex therapist should also check for Voices of Pressure, pushing for performance, or the need to be perfect, pleasing, strong, invulnerable or more adventurous. These need to be identified and depressurized. Help the client develop self-awareness and an inner director so that they can balance this dance of energies inside.

THE ARRAY OF ARCHETYPES PRESENTED IN FILMS

If we look at the range of sexual women in the movies, we can see the many archetypes of sexuality. We can see the soft appeal of the Sex Kitten in Marilyn Monroe and Brigitte Bardot, the saucy Vamp in Mae West, the Seductress or Femme Fatale in parts played by Ava Gardner, Joan Crawford, Glen Close, Kathleen Turner, Sharon Stone and

Angelina Jolie. We also adore the fresh face of the Girl Next Door in Doris Day, Julie Andrews and Meg Ryan.

A woman can carry the archetype of the Sex Goddess, Earth Mother, Exotic Beauty, Cinderella, Damsel in Distress, Southern Belle, Wench, Pixie, Mystery Woman, Amazon, Playful Tease, Flirt, Private Dancer, Adventuress, High Flyer, Sorceress, Lioness, Waif, Darling Doll, Bombshell, Dreamer or Hopeless Romantic.

Contrary to the stereotype that love belongs to the young and thin, well loved, sexually appealing women may be Buxom Babes, Zaftig Tempresses and Red Hot Mamas. We see these in Mae West, Queen Latiffa, and Oprah Winfrey. We see the breaking of stereotypes regarding older woman in movies like the Graduate, with Anne Bancroft playing the experienced (though somewhat jaded) Seductress, or in the high spirited portrayal of Maude in the movie Harold and Maude. The movie *Dangerous Beauty* portrays the successful 19th century Courtesans, who held power in that time by navigating life as influential and sought after sexual companions. We are fascinated by the Muses and Femme Inspiratrices of history, who inspired great works of art and literature. The Mistresses of famous politicians and philosophers are infamous, while their Faithful Wife fade into oblivion. We are captured by stories of the dark Seductress, the Siren and the Temptress, irresistible, but dangerous. We are drawn to the saucy earthiness of the medieval Tavern Wenches.

A woman can “try on” any of these energies and experiment with what it feels like to carry them. She can do this through experiential methods like Voice Dialogue, Guided Imagery, Psycho-drama, etc. and take the experiment home into her wardrobe and bedroom.

PROCESSING THE EXPERIENCE

Each time you work with a women experientially, facilitating them as they “try on” new archetypal energies, they will have expanded the range of sexual energies they can evoke in themselves and carry. The sex therapist can discuss what this experience was like for her asking questions like:

- What was your experience being in different energy?
- What did the world look like from that perspective?
- How might you engage a partner differently from this place?
- What kind of partner would you like to engage from that place?

This experience may have been exciting or expansive, but it might also have stirred up anxiety or shame. If this was the case, the sex therapist can dialogue with these inner voices and characters exploring how this might be resolved. One assurance that I have found helpful in working with anxious inner selves is to assure them that the client is ultimately at choice about whether she wants to activate this new energy or not.

If the client likes the experience of carrying this new energy, she can continue to integrate it by learning to recognize the feel of it, “dialing it up and down” in various situations, and intentionally cultivating it. She can also pay attention to how others carry it, watching what they do and how they operate. She might take some time out in the morning or evening in the privacy of her own home move, entering into it, and explore it. She might buy some new clothes that represent this energy, and look through the lenses of this perspective throughout the day.

SEXUAL COMMUNICATION- “WHO” IS TALKING? “WHO” IS LISTENING?

Sexual communication between partners has been emphasized as a crucial element of successful sexual relationship since the days of Masters and Johnson (1970). While this is well established, many sex therapists wonder, “how do you actually get clients to communicate?” If we look at this from an inner self system perspective, we can ask a different question. We must consider “who” in the client is actually doing the communicating. We can also wonder who is hearing it in the partner’s inner self system. Do we have a Poor Little Match Girl, Ugly Duckling, or Old Maid, who does not feel entitled enough to ask for what she wants? Or is this an Armored Amazon, so defended that nothing can get through? It’s not just *what* a person is saying when they are attempting to communicate with a partner, it is *the place from which they are saying it*, the archetypal orientation. When the Puppy Dog in the partner says, “I want you,” a woman may experience him as cute and cuddly. He may evoke her Nurturing Mother archetype, but she won’t necessarily respond erotically. When a Swashbuckling Adventurer or Courtly Lover says “I want you,” it comes from a different energetic place and will evoke a different response in a woman who may then move into her own Sultry Seductress, Wench or Adventuress.

WHO AND WHAT TURNS YOU ON?

Often, when a sex therapist asks a woman who is suffering from low sexual desire if she has desire for anyone, she will reply “yes.” We discover that she is simply not attracted to her partner. The foundation of a woman’s return of desire is for her to define what she is actually desiring, for herself, rather than the typical female sexual script, where she is

concerned with being pleasing to her partner. The sex therapist can explore the following areas of how she would like to be engaged.

- Describe how you like to be invited into sex?
- What archetypal energies really engage you and turn you on?
- Which turn you off?
- Name some scenes from books and movies that really appealed to you.
- Which actors and actresses do you consider most sexy?
- What qualities do they embody that appeal to you?
- What archetypal energies do you find intimidating or frightening?

Ogden (2008) asks an alternative set of questions in this area. She asks, “What do you do to turn yourself on?” and “What do you do to turn yourself off?” Looking at Ogden’s questions from an archetypal perspective, one might ask, “How can you shift your state into an energy (archetype) that wants to engage sexually?” or “What archetypes do you inhabit that guarantee that you will not feel sexual?”

INTIMACY AND EROTICISM

In recent years, a growing number of sex therapists are beginning to assert that *too much* closeness is the underlying problem in many couples experiencing low sexual desire (Perel, 2007, 2012). Schnarch (1991, 2009) states that when partners are poorly differentiated, they become overly dependent on one another for safety and validation. This often leads to a sexual gridlock because taking risks with as sensitive an area as sexuality become too dangerous. “You don’t fuck with your support system.”

Hal and Sidra Stone (2000) express this dynamic in a different way. They explain that couples become desexualized when they enter into the inertia that result from well-

intended attempts to maintain “positive bonding patterns” in the relationship. When this happens each attempts to protect the harmony they have established. Ironically, getting along becomes the source of the problem. Both partners begin living in a state of suspended animation in order to ensure that they maintain the equilibrium they have worked out as “good relating.” Unfortunately, this causes them to avoid anything that might stir up conflict or anxiety and disown important aspects of themselves. Eventually their lives become devitalized and their relationship and sexuality become stale and predictable.

Both Kleinplatz (2012) and Schnarch (2000) suggest that a lack of desire might be an indication of “good judgment.” Perhaps the sex that is being had is not worth wanting. Ogden (2008) echoes this in suggesting that we need to ask clients “desire for what?” Sometimes, in this production oriented society, sex therapy begins to sound almost mechanistic, as if it were about the production of orgasms. “The erotic landscape is vastly larger, richer, and more intricate than the physiology of sex or any repertoire of sexual techniques (Perel, 2010).” When we reduce sexuality to overt behaviors, we eliminate the wellspring of eroticism, subjective meaning and the symbolic richness that sexuality can hold. Couples who have an erotic spark understand that the central agent of eroticism is imagination. (Morin, 1995; Bader, 2002).

If we look at this dynamic from an archetypal perspective, shifting the archetype from which we are engaging in sex will change the entire experience and bring new life and meaning into the encounter. There is an outer limit to the possible behaviors of sexuality, but this realm opens up significantly when we consider that there is a wide spectrum of sexual archetypal energies that the client can inhabit. Feminist thinking about eroticism also encourages us to consider that the erotic does not necessarily involve intercourse or orgasm

(Teifer, 2004; Odgen, 2206, 2008; Bader, 2002, Kleinplatz, 2001, 2012). Exploring new territory in the psyche and bringing that fresh energy into the relationship means that they are now sleeping with someone “unfamiliar.” New relationship energy gets activated in this situation along with all the excitement of exploring an unknown person.

SECRET LIVES

Many people have aspects of their sexuality that they hold in secret. These may be things they have always longed to experience, but never had the courage to ask a partner to join them in this experience. This area of a client’s sexuality warrants a gentle exploration, taking into account that this can be a very sensitive area of their identity. Does this client have any arousal patterns apart from the sexual scripts they consider “unacceptable?” How is this energy being repressed, channeled, or expressed? Are there inner characters with hidden arousal patterns, longings, split off compartments, or secret lives? What are they doing that they don’t want to be doing or *not* doing that they want to be doing? Does this client have shadow sexualities at play?

PICKING PARTNERS

It is important to note that the sexual archetypes that a woman identifies with will influence her choice of partner. This can be a welcomed realization or a distressing one, if the partner she is with does not carry the archetypal energies she most desires as an erotic woman. Working with this dilemma is beyond the scope of this dissertation, but addressing it involves a mutual process of archetypal exploration, looking at the interplay of partner’s archetypal energies, exploring new matches, and possibly cultivating some new energies in the mix.

There are a variety of masculine energies that attract women. For a sex therapist working from this perspective an important exploration becomes what kind of energetic qualities or archetypal “flavors” is the client drawn to?

- Intense, Instinctual, adventurous, expressive, hot, edgy
- Ceremonial, dramatic, spiritual
- Natural, easy, spontaneous
- Deep, thoughtful
- Tall Dark and Handsome
- Ambitious, Powerful, Commanding
- Adventurous, Courageous
- Intelligent, Dynamic, Well Read, Conversant
- Sophisticated, Cultured, Savvy
- Bad Boy, Non-conformist, Rebel, Free Thinker
- Earthy and Grounded
- Warm and Loving, Affirming, Relaxed, Sweet, Safe
- Quiet, Soulful, Self-Reflective
- Romantic, Warm, Generous
- Sensuous, Slow, Engaging
- Creative, Playful, Spontaneous, Free-spirited
- Ironic, Witty, Intelligent
- Emotionally Open and Interactive

SHIFTING STATES

A significant amount of writing has been done on a woman’s need to “transition” to the bedroom. Ellison (2001,2012) writes about the importance of transitional activities for women who need to move from their “not-doing-sex selves” into their “doing-sex-selves” and how they must shift their orientation from an experience of separateness into a sense of

togetherness and connection. Suggestions are made to “simmer” anticipation, prepare the space, enlist the partner in household tasks, take a hot bath, etc. In this way a woman can “prepare herself for love.” From the perspective of this dissertation, what Ellison is talking about is shifting states, from one archetypal identity to another. The woman is moving out of her identification with Devoted Mother, Career Woman or Household Administrator. In taking a bath with music and candles it not only relaxes her body, but allows her to unwind and connect with her Aphrodite self. She is leaving the realm where she is responsible for others. Aphrodite energy is *self* focused rather than *other* focused, all about pleasure and the senses. This is *her* time.

HEALTHY COMPARTMENTALIZATION AND SHIFTING STATES

Teaching people to “shift states” is a skill that the archetypal sex therapist can incorporate as a focal point of therapy. Once people learn to dis-identify with eros-inhibiting archetypes that have dominated their lives, they can become the director and choose the sexual archetypes they wish to inhabit. Women can learn to shift out of a Doing Self into a Being Self, out of a Mind Self into a Sensuously Embodied Self, Planning-for-Tomorrow Self into an In-the-Moment Self.

The powerful archetypes of Good Mother, Dutiful Daughter, Dutiful Wife, Business Woman, Household Administrator, etc. can easily crowd out, even bully, the fragile new identities forming and taking hold around a woman’s time-less sensuality, pleasure orientation and eroticism. Clients can learn healthy compartmentalization in protecting their Sexual Selves.

THE ARCHETYPE OF THE SPECTATOR

Since Masters and Johnson (1966, 1970) began their sex therapy interventions, sex therapists have been encouraging clients to move away from “spectatoring,” the practice of watching oneself having sex rather than actually being engaged in sensual awareness. The Spectator can be thought of as an archetype, an eros-inhibiting inner character, and worked with as such. This anxiety promoting character tends to be a mix of Inner Critic, Pleaser, Score Keeper, Evaluator, Perfectionist, Gatekeeper, and Voice of Pressure. He or she won’t allow the client to relax or fully engage with the sensual aspects of sexuality.

In working from an inner self system perspective, a sex therapist can conduct a Voice Dialogue with the Spectator, get to know them and “negotiating” a truce (Wakefield, 2012) or perhaps assigning them a new role such as “observing” how the client undermines their own pleasure with negative expectations or shifting into eros-inhibiting archetypes. With particularly difficult cases, teach the client to practice “healthy compartmentalization” of this insidious saboteur of pleasure and engagement.

THE ARCHETYPE OF THE INITIATOR

One of the most important archetypes that a woman can develop is the archetype of the Initiator. This archetype is absent, or in hiding for most of the women this author has worked with over the years. If the archetype exists in her psyche, it is often held in check by a Gatekeeper.

In 1994, McCormick found that sex is still considered by many to be something that men do to women rather than something that belongs to women, with orgasm as something that men “give” to women. The inference is that women are instruments, played by men. In

a more recent study, Dworkin & Sullivan (2007) found that one of the prime ways that a man experiences himself as attractive is when a woman initiates sex with them.

Many contemporary men express that they are tired of always being the Initiator. It is nice to be on the receiving end of desire. This shift of perspective opens room for women to explore and activate more initiatory and aggressive archetypes of sexuality.

Cultivating an Initiator can be very important for many lesbian couples, as they can face the problem that *both* women may be unconsciously waiting for “someone else” to take the lead and initiate sexual contact (Loulan, 1987).

Feminist sexologists like Hite (1976, 1993), Daniluk (1998), Ellison (2000, 2001), Ogden (1989, 2006, 2007, 2008, 2013), Teifer (2004), McCormick (1994), and Dodson (1996) assure us that women can and must define their own sexuality and take charge of their own pleasure.

FOUNDATIONS OF A REWARDING SEX LIFE- THE CALM CORE

Sexual self-awareness, self- acceptance, and the development of a sense of agency and self-esteem are all shown to be correlated with greater sexual satisfaction in women (Wentland, et al, 2009). All of these contribute to the capacity to communicate in a way that invites positive responses in a partner.

Schnarch (2009) outlines four crucial steps for creating sexual intimacy and desire that are related to mindfulness and self-regulation. Clients must 1) establish a solid sense of Self, 2) be able to calm themselves down, soothe their own hurts, and regulate anxiety, 3) develop the ability to stay calm and not overreact when a partner gets anxious or upset, 4) have the capacity to tolerate the discomfort and anxiety associated with growth. All of these

factors are related to the work of differentiation. Differentiation is required for Individuation.

Mindfulness practices (sitting meditation cultivating a focus on the present moment) have been shown to be a way to reduce stress and cultivate a capacity to remain present with a partner. Mindfulness practices have also been used to reduce sexual pain and the anxiety and sexual avoidance associated with the anticipation of pain (Rosenbaum, 2013).

Iasenza (2010) suggests that sensate focus can be reframed as a mindfulness practice. She asks clients to engage their Observer in order to become aware of their thoughts, feelings, body sensation, and breathing while they are touching. Meditation has been shown to decrease internal “noise,” self-judgment, mediate clinical symptoms such as depression, and increase body awareness and responsiveness (Silverstein et al, 2011).

As a woman learns to operate from her “calm core” (Wakefield, 2012), she can reflect more deeply on her life and develop self-awareness. As she develops self-acceptance, it reduces anxiety and shame, and she becomes more able to communicate her desires to a partner. As she learns to communicate from a place in the archetypal spectrum that is most likely to evoke a positive response, her confidence and sense of agency will increase. All of this will lead to increased sexual self-esteem and self-confidence with the increased likelihood that she will begin to enjoy and desire sexual experiences. She will be less likely to back down and disclaim her desires if she encounters anxiety in her partner or herself. All of this will protect her from the emotional contamination that occurs in sexual situations where the anxiety of one person feeds into the anxiety of the other and the entire situation becomes increasingly difficult to resolve.

Without the development of a calm core, clients may have too much self-doubt or anxiety to open up topics or propose something new, fearing rejection, disapproval, or shaming. Operating from a calm core opens up all sorts of positive possibilities between partners. Most women do not think about how important emotional regulation is to their sex live. Being “at choice” regarding one’s sexuality, requires the inner strength and self-claiming confidence to risk displeasing or even being rejected or shamed by others. Once this calm core has been anchored, clients can direct their inner cast, call on inner support, and invite new archetypal energies into the mix. The capacity to negotiate and resolve inner conflicts, and to self-regulate when one is experiencing the strong emotions that arise in sexuality are crucial.

When a woman can tolerate vulnerability and continue to move towards what she desires, she can venture out from a stable base into new territory, taking risks and being OK enough with the outcome, whatever it is. Entering into the realm of archetypal energies open a person to a seedbed of creativity, it also means encountering oneself in a deeper way than ever before. This requires the capacity to experience strong emotions.

Extraordinary sexuality opens up realms into the transcendent (Ogden, 2006, 2013). A woman must also be able to mediate the strong emotions and powerful sexual experiences that may open to her.

CHAPTER SIX

CONCLUSION

A HUMANISTIC UNDERPINNING

Jungian psychotherapy is considered both a depth psychology and a humanistic psychology. Jung was very interested in the development of human potential. When we view sexuality from a humanistic perspective, we can view it as an important aspect of human potential and self-actualization. Jung referred to this process as individuation (Singer, 1972).

In the Jungian view, the psyche is seen as a fertile ground in which the seeds (archetypes) of human potential rest, awaiting a life stage or situational requirement for development. In each individual, only a portion of the full spectrum of archetypal potential comes into fruition. The rest remains in the seedbed of the unconscious, as undeveloped potential. This includes our undeveloped sexual potential. The Self is considered the self-actualizing center of the personality, a growth generating principle that continues to draw aspects of the undeveloped archetypal realm into the personality for integration. In this way, human beings are designed to continue to grow and change across the lifespan. Persons who are cooperating with this process are said to be on the journey of individuation. Approaching sexuality as part of this journey, a person could be said to be on the journey of “Sexual Individuation.”

We will never integrate all of the material that resides in our archetypal seedbeds, but in exploring and integrating new energies from these realms, we shift our identities and expand our ways of being. In this way, we re-energize ourselves and continue to define who

we are. If we are continuing to explore the inner realm of the psyche, we have the potential to be in a state of continual becoming.

The psyche is vast and can be considered an undiscovered country. Exploring the sexual psyche with a partner can eroticize any relationship. Long term couples can revitalize their passion or establish an erotic connection for the first time in exploring the realms of the psyche. The erotic thrives on novelty and the unknown. In this way two individuals in a relationship can continue to be “new” people to each other. The sense of discovery need not end. The relationship need not turn stale. When two people are continuing to grow and change, explore their individual psyches and sharing what they find with a chosen partner, this interaction brings an ongoing freshness to the relationship. In a sense, you are never sleeping with the same person twice.

An archetypal approach does not require that a person be deeply versed in Jungian psychology. It would however, require that they can work with some form of experiential therapy, preferably one that acknowledges the multiplicity of the psyche, the inner self system. This might include modalities such as Voice Dialogue (Stone, 1989), Internal Family Systems (Schwartz, 1995), Jungian Psychology (Johnson, 1986; Singer, 1972), Parts Psychology (Noricks, 2011), ISIS Wheel Training (Ogden, 2013), Ego-State Therapy (Emmerson, 2003), Narrative Therapy (White, 2007), Pessio-Boyden System Psychomotor (1991), Hypnosis (Phillips & Fredrick, 1995), Gestalt (Resnick, 2012), or Somatic Experiencing (Levine, 1997). Working with experiential therapeutic models has been increasingly validated by the field of neuroscience.

NEUROSCIENCE

The field of neuroscience is transforming our understanding of how identity or “the self” is formed and maintained. Our personalities are far more plastic than we once thought. The human brain is a complex network of millions of neurons. Neurons do not mate for life; they are highly polyamorous. Neurological synapses can be strengthened, retrained, and redirected more easily than we once thought. We can add and redirect neural connections shifting our fundamental way of being (Jackson and Kalin, 2000, as cited in DeLamater and Hyde; Seung, 2012; Siegel, 1999). This new science proves that we are not stuck in self-limiting patterns of being. It also shows that we can heal from trauma. We can learn and expand our identities so that our lives are more fulfilling. We can improve our Erotic Intelligence and enhance our Sexual Self (Kathakis, 2010; Bennett & Holczer, 2010).

EXPANDING THE SEXUAL LANDSCAPE- SEXUAL ENRICHMENT

“The erotic landscape is vastly larger, richer, and more intricate than the physiology of sex or any repertoire of sexual techniques (Perel, 2010).” The topic of sexual enrichment is an emerging focus of sex therapists. There is a new group of clients who have begun to seek sex therapy. Their sexual “functioning” is fine, but they are aware that something is missing. They are bored and struggling with a lack of meaning and enjoyment in their sexual relationships. Kleinplatz (2001) recounts an example of working with a couple where the woman complained that her partner had excellent sexual technique, and “played her body like a violin,” but her desire had disappeared because the person within her lay untouched. Kleinplatz emphasizes that technique alone does not generate sexual excitement, while *erotic connection* can generate intense sexual excitement even in the absence of physical contact.

While improving one's technique and expanding one's sexual repertoire is often suggested as a way to re-enliven a stale sex life, experimenting with new sexual archetypes is an approach that few sex therapists have considered. Identifying the sexual archetypes that a person has inhabited and expanding their archetypal possibilities is both creative and empowering and incorporates the best of script theory, role playing, symbolic interaction and approaches sexuality from a humanistic perspective, inviting individuation and self-actualization.

While we tend to think of personality as "set," the new brain research is teaching us that personality is really more habituated than fixed. The new brain science reinforces the idea that experience changes the brain. Whenever we have a deeply upsetting or intensely satisfying new experience, we create new neural linkages, new associations to stimulus, new paths through the brain. (Siegel, 1999). Emotionally corrective experiences as well as experiential methods of therapy all create new neural pathways through the brain. The more we reinforce these new pathways, the more established they become and the more central to a client's sense of identity.

ARCHETYPAL FLUENCY

People can learn new ways of being, thus, they can integrate new archetypes. While an established arousal template might be thought of as a "birth language" of the sexual psyche, people can learn new languages, becoming multi-lingual. Likewise, we may have one dance step which is our favorite, but we can also learn to dance the favorite dance-step of a partner. We can also inhabit a variety of sexual archetypes and learn to move between them. In *Negotiating the Inner Peace Treaty*, this author refers to this capacity as

“archetypal fluency” (Wakefield, 2012), the capacity to inhabit a variety of archetypes and move through them with awareness and ease.

Our sense of identity, which we experience as the Sexual Self can be healed and enhanced through the introduction of new experiences that generate new neural pathways. If we think about an ego state or archetypal energies as the activation of a specific neurological pattern that generates thoughts, emotions and sensations, we can see how the exploration of new scripts which activate new archetypes and will change our sexual reality and ultimately our identity and our sexual experiences.

When we incorporate an archetypal perspective as sex therapist, we can invite clients to move beyond labels of dysfunction into a multidimensional realm, opening up new Self understandings, supporting them in rewriting their scripts and recasting their inner characters, so that more meaningful expressions of sexuality to be played out. Working from this place we can open doors for clients to exploring new realms of the sexual psyche and develop greater sexual agency and esteem. We can empower clients to define their sexuality on their own terms, and encourage them to engage each other in more meaningful ways as they walk the path of Sexual Individuation.

APPENDIX

VOICE DIALOGUE

Further information about conducting Voice Dialogue interviews can be gleaned by reading *Embracing Our Selves* by Hal and Sidra Stone and from Miriam Dyak's *Voice Dialogue Facilitator's Handbook*. Voice Dialogue International provides additional resources and information about training at www.delos-inc.com.

FEMALE ARCHETYPES OF SEXUALITY

Here is a list of potential archetypes that women have named and that I have encountered in Voice Dialogue sessions. This list is in no way "complete." It contains archetypes that can be perceived as positive or negative, eros-inhibiting and eros-enhancing, depending on the woman who carries it, the meaning she brings to it, and how her partner responds to the energy.

Soul Mate, Pleaser, Romantic, Sensualist, Seductress, Courtesan, Flirt, Tease, Southern Belle, Damsel in Distress, Wench, Gypsy, Adventuress, Femme Fatale, Wild Woman, Initiator, Butch, Femme, Exhibitionist, Performer, Dynamo, Darling Doll, Dominatrix, Submissive, Big Cat, Tigress, Cougar, Lioness, Red Hot Mama, Earth Mother, Succulent Goddess, Loving Wife, Inner Explorer, Mystery Woman, Selfless Saint, Angel, Muse, Artist, Adoring Girl, Princess, Playful Kitten, Sex Kitten, Enchantress, Girl Next Door, Babe, Uninitiated Girl, Mistress, Natural Woman, Athlete, Mystery Woman, Elf, Good Girl, Virgin, Free Spirit, Erotic Virtuoso, Sleeping Beauty, Rebel, Bad Girl, Friend with Benefits, High Flyer, Pixie, Playmate, Forbidden Fruit, Naughty Girl, Aphrodite, Bountiful Babe, Object of Desire, Anima Woman, Geisha, Vamp, Fool for Love, Honkey Tonk Angel, Huntress, Juicy Goddess, Ravished Woman, Survivor, Hook-up Queen, Stripper, Siren, Beloved, Adoring Maiden, Initiator, Private Dancer, Spiritual Seeker, Sexual Healer, Tantrika, Mystic, Sacred Prostitutes, and Sexual Priestess or Initiator into the Sexual Mysteries.

The following archetypes tend to have more pejorative connotations, but not necessarily for everyone. We must remember that sexual templates and lovemaps vary significantly from person to person. Some of these archetypes might be highly arousing with some partners in certain situations:

Adulteress, Scarlet Woman, Cheater, Sorceress, Bitch, Slut, Addict, Whore, Porn Star, Bimbo, Prostitute, Sex Trafficked Girl, Castrating Bitch, Controller, Waif, Social Climber, Gold Digger, Armored Amazon, Entitled Princess, Ice Princess, Sleeping Beauty, Cinderella, Dark Queen, Ruling Queen, Rebel, Feminist (Don't objectify me!), Predator, Jealous Woman, Scorned Woman, Self-less Saint, Disembodied Saint, Critical Mother, Frump, Slave, Suffering Servant, Doormat, Dependent Girl, Smothering Mother, Plain Jane, Passed Over One, Ms. Stand-By-Your Man, Lonely Woman, Dead fish, Madwoman, Nag, Prick Tease, Proper Woman, Wounded Woman.

EROS-INHIBITING ARCHETYPES

Certain archetypes may not appear to be overtly sexual, but they many interact and influence other selves in the inner self system related to sexuality. While none of the following list of archetypes are inherently "bad," when these inner characters dominate the stage of a woman's inner life, they tend to crowd out, constrain, obstruct, intimidate, invalidate or shame a woman's Sensuous, Erotic, and Pleasure Oriented Selves:

The Good Girl, Proper Woman, Dutiful Wife, Devoted/Self-Sacrificing Mother, Critic, Reputation Guardian, Inner Patriarch, Responsible One, Heroine, Martyr, Intellectual, Traditional Woman, Victim, Placator, Pleaser, Perfectionist, Rule Keeper, Time Keeper, Rescuer, Persecutor, Good Mother, Critical Mother, Compassionate One, Militant Feminist, Judge, Ice Princess, Entitled Princess, Ruling Queen, Tough Girl, Disembodied Saint, Clinging Vine, Shrinking Violet, Armored Amazon, Social Climber, Dependent Child, Jealous-Territorial Wife, Hard Working Employee, Task Master, Household Administrator; and exhausted Super Woman.

Women can also be emotionally dependent, frightened, wounded, shamed, and shut down, with the following list of archetypes at the core of their sexual identity. When these archetypes prevail in a woman's psyche, it will be very difficult for her to freely explore or express herself as a Sexual Woman. These archetypes include:

Victim, Armored Survivor, Damaged Goods, Clinging Vine, Lost Child, Waif, Shrinking Violet, Clam, Fragile Girl of Glass, Prude, Dead Fish, Walking Wounded, Poor Little Match Girl, Obsessive, Possessive, Jealous Shrew, Pouter, Inner Patriarch, Wallflower,

Old Maid, Widow, Hopeless Child, Abandoned Child, Clam, Frigid Woman, Ugly Duckling, Tragic Heroine and Fool for Love.

The New View Manifesto

<http://www.newviewcampaign.org/manifesto4.asp>

A New View of Women's Sexual Problems

by the Working Group: On A New View of Women's Sexual Problems:

Alperstein, L., Fishman, J., Hall, M., Handwerker, L., Hartley, H., Kaschak, E., Kleinplatz, P., Loe, M., Mamo, L., Tavris, C., Tiefer, L. (2000)

Women's Sexual Problems: A New Classification

Sexual problems, which the working group on *A New View of Women's Sexual Problems* defines as discontent or dissatisfaction with any emotional, physical, or relational aspect of sexual experience, may arise in one or more of the following interrelated aspects of women's sexual lives.

I. SEXUAL PROBLEMS DUE TO SOCIO-CULTURAL, POLITICAL, OR ECONOMIC FACTORS

A. Ignorance and anxiety due to inadequate sex education, lack of access to health services, or other social constraints:

1. Lack of vocabulary to describe subjective or physical experience.
2. Lack of information about human sexual biology and life-stage changes.
3. Lack of information about how gender roles influence men's and women's sexual expectations, beliefs, and behaviors.
4. Inadequate access to information and services for contraception and abortion, STD prevention and treatment, sexual trauma, and domestic violence.

B. Sexual avoidance or distress due to perceived inability to meet cultural norms regarding correct or ideal sexuality, including:

1. Anxiety or shame about one's body, sexual attractiveness, or sexual responses.
2. Confusion or shame about one's sexual orientation or identity, or about sexual fantasies and desires.

C. Inhibitions due to conflict between the sexual norms of one's subculture or culture of origin and those of the dominant culture.

D. Lack of interest, fatigue, or lack of time due to family and work obligations.

II. SEXUAL PROBLEMS RELATING TO PARTNER AND RELATIONSHIP

- A. Inhibition, avoidance, or distress arising from betrayal, dislike, or fear of partner, partner's abuse or couple's unequal power, or arising from partner's negative patterns of communication.
- B. Discrepancies in desire for sexual activity or in preferences for various sexual activities.
- C. Ignorance or inhibition about communicating preferences or initiating, pacing, or shaping sexual activities.
- D. Loss of sexual interest and reciprocity as a result of conflicts over commonplace issues such as money, schedules, or relatives, or resulting from traumatic experiences, e.g., infertility or the death of a child.
- E. Inhibitions in arousal or spontaneity due to partner's health status or sexual problems.

III. SEXUAL PROBLEMS DUE TO PSYCHOLOGICAL FACTORS

- A. Sexual aversion, mistrust, or inhibition of sexual pleasure due to:
 - 1. Past experiences of physical, sexual, or emotional abuse.
 - 2. General personality problems with attachment, rejection, co-operation, or entitlement.
 - 3. Depression or anxiety.
- B. Sexual inhibition due to fear of sexual acts or of their possible consequences, e.g., pain during intercourse, pregnancy, sexually transmitted disease, loss of partner, loss of reputation.

IV. SEXUAL PROBLEMS DUE TO MEDICAL FACTORS

Pain or lack of physical response during sexual activity despite a supportive and safe interpersonal situation, adequate sexual knowledge, and positive sexual attitudes. Such problems can arise from:

- A. Numerous local or systemic medical conditions affecting neurological, neurovascular, circulatory, endocrine or other systems of the body;
- B. Pregnancy, sexually transmitted diseases, or other sex-related conditions.
- C. Side effects of many drugs, medications, or medical treatments.
- D. Iatrogenic conditions.

BIBLIOGRAPHY

- American Psychiatric Association (2002) *Diagnostic and Statistical Manual of Mental Disorders IV-TR*. Washington, DC: American Psychiatric Association.
- Andersen, B. & Cyranowski, J. (1994) Women's Sexual Self-Schema. *Journal of Personality and Social Psychology*, Vol. 67, No. 6, 1079-1100.
- Assagioli, R. (2000) *Psychosynthesis: A Collection of Basic Writings*. Amherst, MA: The Synthesis Center.
- Bader, M. (2002) *Arousal: The Secret Logic of Sexual Fantasies*. New York: Thomas Dunne Books.
- Bass, E. & Davis, L. (1988, 1992) *The Courage to Heal: A Guide for Women Survivors of Child Sexual Abuse*. New York: Harper Perennial.
- Basson, R., Leiblum, S., Brotto, L., Derogatis, L., Fourcroy, J., Fugl-Meyer, K., Schover, L., Van Lankveld, J., Weijmar Schultz, W. (2003) Definitions of Women's Sexual Dysfunction Reconsidered: Advocating Expansion and Revision. *Journal of Psychosomatic Obstetrics and Gynecology*, 24, 221-229.
- Basson, R. (2010) Complaints of Low Sexual Desire: How Therapeutic Assessment Guides Further Interventions. In Leiblum (Ed.) *Treating Sexual Desire Disorders: A Clinical Casebook*, New York: Guilford Press.
- Bennett, L., Holczer, G. (2010) *Finding and Revealing your Sexual Self: A Guide to Communicating about Sex*. Lanham: MD : Rowman & Littlefield Pub.
- Berne, E. (1961) *Transactional Analysis in Psychotherapy*. New York: Grove Press.
- Bonheim, J. (1997) *Aphrodite's Daughters: Women's Sexual Stories and the Journey of the Soul*. New York: A Fireside Book/Simon and Shuster.
- Campbell, J. (Ed.) (1971) *The Portable Jung*. New York: Penguin Books
- Cervenka, K. (2003) *In the Mood Again: A Couple's Guide to Reawakening Sexual Desire*. Oakland, CA.: New Harbinger Publications, Inc.
- Cozolino, Louis. 2006. *The Neuroscience of Human Relationships: Attachment and the Developing Social Brain* New York: Norton & Co.
- Daniluk, J. (1998) *Women's Sexuality across the Life Span: Challenging Myths, Creating Meanings*, New York: Guilford.
- Delamater, J. & Shibley Hyde, J. (2004) Conceptual and Theoretical Issues in Studying Sexuality in Close Relationships. In Harvey, J., Wenzel, A., Sprecher, S. (Eds.) *Handbook of Sexuality in Close Relationships*. Mahwah, NJ: Lawrence Erlbaum Associates, Inc.

- Diamond, L. (2008, 2009) *Sexual Fluidity: Understanding Women's Love and Desire*. Boston: First Harvard University Press.
- Dodson, B. (1996) *Sex for One: The Joy of Selfloving*. New York: Three Rivers Press.
- Dworkin, S. & Sullivan, L. (2007) "It's Less Work for Us and It Shows Us She Has Good Taste: Masculinity, Sexual Initiation, and Contemporary Sexual Scripts." In Kimmel, M, (Ed.) *The Sexual Self*. Nashville: Vanderbilt University.
- Dyak, Miriam (1999) *The Voice Dialogue Facilitator's Handbook, Part 1*. Seattle: L.I.F.E. Energy Press.
- Eisler, R. (1996) *Sacred Pleasure: Sex, Myth, and the Politics of the Body-New Paths to Power and Love*. HarperSanFrancisco.
- Ellison, C. (2001) "Intimacy-Based Sex Therapy: Sexual Choreography" in Kleinplatz (Ed.) *New Directions in Sex Therapy: Innovations and Alternatives*. New York: Routledge.
- Ellison, C. (2012) Sexual Choreography: "Am I Enjoying This Right Now?" Not "How Am I Doing?" in Kleinplatz (Ed.) *New Directions in Sex Therapy: Innovations and Alternatives*. 2nd Edition. New York: Routledge.
- Ellison, C. (2000) *Women's Sexualities: Generations of Women Share Intimate Secrets of Sexual Self-Acceptance*. (First published by New Harbinger) Read File Publishing Company www.womenssexualities.com.
- Emmerson, G. (2003) *Ego State Therapy*. Carmarthen, Wales: Crown House Pub.
- Freedman, J., & Combs, G. (1996) *Narrative Therapy: The Social Construction of Preferred Realities*. New York: Norton & Co.
- Fisher, R., Davis, C., Yarber, W., Davis, S. (2011) *Handbook of Sexuality-Related Measures* New York: Routledge
- Freedman, J. and Combs, G. 1996 *Narrative Therapy: The Social Construction of Preferred Realities*. New York: Norton.
- Gagnon, J & Simon, W. (1973) *Sexual Conduct: The Social Sources of Human Sexuality*. Chicago: Aldine.
- Gilbert, R. (1992) *Extraordinary Relationships: A New Way of Thinking about Human Interactions*. New York: Wiley & Sons, Inc.
- Gilbert, R. (2004) *The Eight Concepts of Bowen Theory: A New Way of Thinking About the Individual and the Group*. Front Royal, VA: Leading Systems Press
- Gimbutas, M. & Dexter, M. (1999) *The Living Goddesses*. Berkeley and Los Angeles: University of California Press.

- Goldman, C. (2006) *Late Life Love: Romance and New Relationships in Later Years*. Minneapolis: Fairview Press.
- Goodwach, R. (2005) Sex Therapy: Historical Evolution, Current Practice. Part 1. *Australian and New Zealand Journal of Family Therapy*. Vol. 26, No.3, 155-164.
- Goodwach, R. (2005) Sex Therapy: Historical Evolution, Current Practice. Part 2. *Australian and New Zealand Journal of Family Therapy*. Vol. 26, No.3, 178-183.
- Gould, J. (2006) *Spinning Straw Into Gold: What Fairy Tales Reveal About the Transformations in a Woman's Life*. New York: Random House.
- Grant, T. (1988) *Being a Woman: Fulfilling Your Femininity and Finding Love*. New York: Random House.
- Green, S., Flemons, D.(Ed.) (2004) *Quickies: The Handbook of Brief Sex Therapy*. New York: Norton & Co.
- Hall, K. (2004) *Reclaiming Your Sexual Self: How You Can Bring Desire Back into Your Life* Hoboken, NJ: Wiley & Sons, Inc.
- Hendrick, C., & Hendrick, S. (1986). A theory and method of love. *Journal of Personality and Social Psychology* 50(2): 392-402.
- Hendrick, C., Hendrick, S., & Dicke, A. (1998). The Love Attitudes Scale: Short form. *Journal of Personality and Social Psychology* 15 (2): 147-59.
- Hendrick, S. Hendrick, C. (2011) Sexual Attitudes Scale and Brief Sexual Attitudes Scale. *In Handbook of Sexuality-Related Measures*. 3rd Edition. Fisher, T., Davis, C., Yarber, W., and Davis, S. (Editors). New York: Routledge.
- Hendrix, H. (1988) *Getting the Love You Want: A Guide for Couples*. New York: Harper Perennial.
- Heyn, D. (1992) *The Erotic Silence of the American Wife* Hew York: Random House.
- Heyn, D. (1997) *Marriage Shock: The Transformation of Women into Wives*. New York: Villard.
- Hill, C. (1988) *Affective and Motivational Orientation Related to Erotic Arousal Questionnaire*. In *Sexuality-Related Measures*, 3rd Edition. Fisher, Davis, Yarber & Davis (Ed.). New York: Routledge.
- Hite, S. (1976) *The Hite Report: A Nationwide Study of Female Sexuality*. New York: Seven Stories Press.

- Hite, S. (1993) *Women as Revolutionary Agents of Change: The Hite Reports and Beyond*. Madison, Wisconsin: University of Wisconsin Press.
- Hite, S. (1994) *The Hite Report on the Family: Growing Up Under Patriarchy*. New York: Grove Press.
- Hollis, J. (1998) *The Eden Project: In Search of the Magical Other*. Toronto: Inner City Books.
- Hopcke, R. (1989, 1999) *A Guided Tour of the Collected Works of C.G. Jung*. Boston: Shambala.
- Iasenza, S. (2001) Sex Therapy with A New View. In Kaschak, E., & Teifer, L. (Eds.) *A New View of Women's Sexual Problems*. Birmingham, NY: Haworth Press
- Iasenza, S. (2011) What is Queer About Sex?: Expanding Sexual Frames in Theory and Practice. *Family Process*, Vol. 49, No.3, 2010.
- Jacobi, J. (1959) *Complex, Archetype, Symbol in the Psychology of C.G. Jung*. Princeton: Bollingen Series.
- James, M. & Jongeward, D. (1973) *Born to Win: Transactional Analysis with Gestalt Experiments*. Philippines: Addison-Wesley Publishing Co.
- Johnson, R. (1983) *We: Understanding the Psychology of Romantic Love*. San Francisco: Harper San Francisco.
- Johnson, R. (1986) *Inner Work: Using Dreams and Active imagination for Personal Growth*. San Francisco: Harper San Francisco.
- Jung, C. G. (1959). R.F.C. Hull (Translator) *Archetypes and the Collective Unconscious*. (Bollinger Series: The Collected Works, Volume 9. Part 1) Princeton University Press.
- Kaplan, H. S. (1974) *The New Sex Therapy: Active Treatment of Sexual Dysfunctions*. New York; Brunner Mazel Pub.
- Kaplan, H. S. (1979) *Disorders of Sexual Desire*. New York: Brunner/Mazel.
- Katehakis, A.(2010) *Erotic Intelligence: Igniting Hot, Healthy Sex While in Recovery from Sex Addiction*. Deerfield, Beach, FLA: Health Communications, Inc.
- Kimmel, M.(Ed.) (2007) *The Sexual Self: The Construction of Sexual Scripts* Nashville: Vanderbilt University Press.
- Kilbourne, J. (1999) *Can't Buy My Love: How Advertising Changes the Way We Think and Feel*. New York: Touchstone.

- Kilbourne, J. & Levin, D. (2009) *So Sexy So Soon: The New Sexualized Childhood and What Parents Can Do to Protect Their Kids*. New York: Ballantine Books.
- Kipnis, A. (1991) *Knights Without Armor: A Practical Guide for men in Quest of Masculine Soul*. New York: Tarcher/Perigee.
- Kleinplatz, P. (2001) A Critique of the Goals of Sex Therapy, or the Hazards of Safer Sex. In *New Directions in Sex Therapy: Innovations and Alternatives*. Kleinplatz, P. (Ed.) Philadelphia, PA: Brunner- Routledge.
- Kleinplatz, P. (Ed.) (2012) *New Directions in Sex Therapy: Innovations and Alternatives*. Second Edition. Kleinplatz (Ed.) New York: Routledge.
- Landau, A. (2011) *Tragic Beauty: The Dark Side of Venus Aphrodite and the Loss and Regeneration of Soul*. New Orleans: Spring Journal Books.
- Lee, J. (1973). *Colours of love: an exploration of the ways of loving*. Toronto: New Press.
- Lee, J.A. (1977) A typology of styles of loving. *Personality and Social Psychology Bulletin*, 3, 173-182.
- Lee, J. (1988). Love styles. In Barnes, M & Sternberg, R. (Ed.) *The Psychology of love*. New Haven, Conn: Yale University Press. pp. 38–67.
- Leiblum, S. & Rosen, R. (Ed.) (2000) *Principles and Practice of Sex Therapy*. New York: Guilford Press.
- Leiblum, S. (Ed.) (2010) *Treating Sexual Desire Disorders: A Clinical Casebook*. New York: Guilford Press.
- Leonard, L. S. (1982) *The Wounded Woman: Healing the Father-Daughter Relationship*. Boston: Shambala.
- Leonard, L. S. (1993) *Meeting the Madwoman: Empowering the Feminine Spirit*. New York: Bantam.
- Levine, P. (1997) *Walking the Tiger: Healing Trauma*. Berkeley: North Atlantic Books.
- Longes, J. (1995) *Human Behavior in the Social Environment*. Itasca, Illinois: John Peacock Publisher.
- Loulan, J. (1987) *Lesbian Passion: Loving Ourselves and Each Other*. San Francisco: Spinsters Ink.
- Maltz, W. & Boss, S. (1997) *In the Garden of Desire: The Intimate World of Women's Sexual Fantasies*. New York: Broadway Books.

- Maltz, W. (1991) *The Sexual Healing Journey: A Guide for Survivors of Sexual Abuse*. New York: HarperCollins.
- Masters, W. & Johnson, V. 1966. *Human Sexual Response*. New York: Bantam Books.
- Masters, W, & Johnson, V. 1970. *Human Sexual Inadequacy*. Boston: Little, Brown & Co.
- McCarthy, B. & McCarthy, E. (2003) *Rekindling Desire: A Step-by-Step Program to Help Low-Sex and No-Sex Marriages*. New York: Brunner-Routledge.
- McCarthy, B., McCarthy, E. (2009) *Discovering Your Couple Sexual Style*. New York: Routledge.
- McCarthy, B., Breetz, A (2010) *Confronting Male Hypoactive Sexual Desire Disorder: Secrets, Variant Arousal, and Good-Enough Sex*. in Leiblum, S. (Ed.) *Treating Sexual Desire Disorders*. New York: Guilford Press.
- McCormick, N. (1994) *Sexual Salvation: Affirming Women's Sexual Rights and Pleasures*. Westport, Connecticut: Praeger.
- McDougal, J. (1995) *The Many Faces of Eros: A Psychoanalytic Exploration of Human Sexuality*. New York: Norton & Co.
- Mead, G.H. (1934) *Mind, Self and Society*. Chicago: University of Chicago
- Meston, C. & Buss, D. (2007) *Why People Have Sex*. Archives of Sexual Behavior 36:477-507.
- Mintz, L. (2009). *A Tired Woman's Guide to Passionate Sex: Reclaim your Desire and Reignite Your Relationship*. Avon: MA: Adams Media.
- Molton, M. & Sikes, L. (2011) *Four Eternal Woman: Toni Wolff Revisited- A Study in Opposites*. Carmel, CA: Fisher King Press.
- Money, J. (1993) *Love Maps: Clinical Concepts of Sexual/Erotic Health and Pathology, Paraphilia, and Gender Transposition in Childhood, Adolescence, and Maturity*. Buffalo, NY: Prometheus Books.
- Moore, R. & Gillette, D. (1990) *King, Warrior, Magician, Lover: Rediscovering the Archetypes of the Mature Masculine*. Harper San Francisco.
- Morin, J. (1995) *The Erotic Mind: Unlocking the Inner Sources of Sexual Passion and Fulfillment*. New York: Harper Perennial.
- Mosher, D.L. (1980). Three dimensions of depth of involvement in human sexual response. *The Journal of Sex Research*, 16, 142.
- Murdock, M. (1994) *Father's Daughters: Breaking the Ties That Bind*. New Orleans: Spring Journal Books.

- Myss, C. (2004). *Sacred Contracts: Awakening Your Divine Potential*. Carlsbad, CA: Hay House.
- Nelson, T. (2008) *Getting the Sex You Want: Shed Your Inhibitions and Reach New Heights of Passion*. Beverly, MA: Quiver.
- Noricks, J. (2011) *Parts Psychology: A Trauma-Based Self-State Therapy for Emotional Healing*. Los Angeles: New University Press.
- Offit, A. (1995) *The Sexual Self: How Character Shapes Sexual Experience*. Northvale, NJ: Jason Aronson Inc.
- Ogden, G. (1990) *Sexual Style & Creating Intimacy*. Deerfield, Florida: Health Communications.
- Ogden, G. (2006) *The Heart and Soul of Sex: Making the ISIS Connection*. Boston: Trumpeter.
- Ogden, G. (1999, 2007) *Women Who Love Sex: Ordinary Women Describe Their Paths to Pleasure, Intimacy, and Ecstasy*. Boston: Trumpeter.
- Ogden, G. (2008) *Return of Desire: A Guide to Rediscovering Your Sexual Passion*. Boston: Trumpeter.
- Ogden, G. (2013) *Expanding the Practice of Sex Therapy: An Integrative Model for Exploring Desire and Intimacy*. New York: Routledge.
- O'Sullivan L.F. & Byers, E. S. (1992) College students' incorporation of initiator and restrictor roles in sexual dating interactions. *The Journal of Sex Research*, 29, no.4: 435-46.
- Paris, G. (1986) *Pagan Meditations: Aphrodite, Hestia, Artemis*. Woodstock, Connecticut: Spring Publications.
- Pearson, C. (1991) *Awakening the Heroes Within: Twelve Archetypes to Help Us Find Ourselves and Transform our World*. HarperSan Francisco.
- Perel, E. (2007) *Mating in Captivity*. New York: Harper.
- Perel, E. (2010) The Double Flame: Reconciling Intimacy and Sexuality, Reviving Desire. In Leiblum, S. (Ed.) *Treating Sexual Desire Disorders*. New York: Guilford Press
- Perls, F. (1969, 1992) *Gestalt Therapy Verbatim*. Gouldsboro, ME: Gestalt Journal Press
- Person, E. (1988) *Dreams of Love and Fateful Encounters: The Power of Romantic Passion*. New York: Norton & Co.
- Pesso, A., Crandell, J. (1991) *Moving Psychotherapy: Theory and Application of Pesso System/ Psychomotor Therapy*. Brookline Books.

- Phillips, M., Frederick, C. (1995) *Healing the Divided Self: Clinical and Ericksonian Hypnotherapy for Post-Traumatic and Dissociative Conditions*. Norton & Co.
- Pinkola Estes, C. (1992) *Women Who Run With the Wolves: Myths and Stories of the Wild Woman Archetype*. New York: Ballentine.
- Pinkola Estes, C. (1993) *How to Love a Woman: On Intimacy and the Erotic Life of Women*. CD Series. Boulder, CO: Sound True.
- Price, J. (2006) *Better Than I Ever Expected: Straight Talk About Sex After Sixty*. Berkeley: Seal Press.
- Pridal, C., LoPiccolo, J. (2000) Multi-element Treatment of Desire Disorders: Integration of Cognitive, Behavioral, and Systemic Therapy. In Leiblum, S. & Rosen, R. (Ed.) *Principles and Practice of Sex Therapy* (3rd Ed.) New York: The Guilford Press.
- Qualls-Corbett, N. (1988) *The Sacred Prostitute: Eternal Aspect of the Feminine*. Toronto: Inner City Books.
- Reibstein, J., Richards, M. (1993) *Sexual Arrangements: Marriage and the Temptation of Infidelity*. New York: Charles Scribner's Sons.
- Resnick, S. (2012) *The Heart of Desire: Keys to the Pleasures of Love*. Hoboken, NJ: Wiley and Sons.
- Rosenbaum, T. (2013) An integrated mindfulness-based approach to the treatment of women with sexual pain and anxiety: promoting autonomy and mind/body connection. *Sexual and Relationship Therapy*, DOI: 10.1080/14681994.2013.76981.
- Sanders, G. (1986) *The Interview as Intervention in Sexual Therapy*. Journal of Strategic and Systemic Therapy. <http://www.familytherapy.org/documents/InterviewIntervention.PDF>
- Savage, L. (1999) *Reclaiming Goddess Sexuality: The Power of the Feminine Way*. Carlsbad: Hay House.
- Schnarch, D. (1991) *Constructing the Sexual Crucible: An Integration of Sexual and Marital Therapy*. New York: Norton & Co.
- Schnarch, D. (2000) Desire Problems: A Systemic Perspective. In *Principles and Practice of Sex Therapy*. Leiblum & Rosen (Ed.) New York: Guilford Press
- Schnarch, D. (2009) *Intimacy & Desire: Awaken the Passion in Your Relationship*. New York: Beaufort Books.
- Schwartz, P. & Rutter, V. (1998). *The Gender of Sexuality*. Thousand Oaks, CA: Pine Forge Press.
- Schwartz, R. (1995) *Internal Family Systems Therapy*. New York: Guilford.

- Seung, S. (2012) *Connectome: How the Brain's Wiring Makes Us Who We Are*. New York: Houghton Mifflin Harcourt Pub.
- Shinoda Bolen, J. (1984) *Goddesses in Every Woman: A New Psychology of Women*. New York: Harper Perennial.
- Shively, M, DeCecco, J. (1977) Components of Sexual Identity. *Journal of Homosexuality*. Fall; 3(1): 41-48.
- Siegel, D. (1999) *The Developing Mind: How Relationships and the Brain Interact to Shape Who We Are*. New York: Guilford Press.
- Silverstein, R.G., Brown, A.C., Roth, H.D., Britton, W.B. (2011). Effects of Mindfulness Training on Body Awareness to Sexual Stimuli: Implications for Female Sexual Dysfunction. *Psychosomatic Medicine*, 2011 Nov.-Dec.: 73 (9): 817-25.Epub 2011.
- Singer, J. (1972, 1994) *Boundaries of the Soul: The Practice of Jung's Psychology*. New York: Random House.
- Snell, W., Fischer, T., & Walters, A. (1993) The Multidimensional Sexuality Questionnaire: An Objective Self-Report Measure of Psychological Tendencies Associated with Human Sexuality. *Annals of Sex Research*, 6, 27-55.
- Snell, W. E., Jr. (Ed.). (2001). *New directions in the psychology of human sexuality: Research and theory*. Cape Girardeau, MO: Snell Publications.
WEB: <http://cstl-cla.semo.edu/snell/books/sexuality/sexuality.htm>.
- Snell,W. (2001) in Fisher et al's (Ed.) *Handbook of Sexuality Related Measures*. New York: Routledge.
- Stevens, A. (1982) *Archetypes: A Natural History of the Self*. New York: William Morrow & Co.
- Stewart, I., Joines, V. (1987) *TA Today: A New Introduction to Transactional Analysis*. Nottingham and Chapel Hill: Lifespace Pub.
- Stone, Hal & Sidra. (1989) *Embracing Our Selves: The Voice Dialogue Manual*. Novato, CA: Nataraj Publishing.
- Stone, H. & Stone, S. (2000) *Partnering: A New Kind of Relationship: How to Love Each Other Without Losing Yourselves*. Novato,CA: Nataraj Publishing.
- Stone, S. (1997, 2000) *The Shadow King: The Invisible Force That Holds Women Back*. Authors Guild BackInPrint.com Edition
- Stoller, R. (1979) *Sexual Excitement: Dynamics of Erotic Life*. New York: Pantheon Books.
- Stoller, R. (1985) *Observing the Erotic Imagination*. New Haven: Yale University Press.

- Tiefer, L. (2004) *Sex Is Not A Natural Act & Other Essays, 2nd Edition*. Boulder, CO. Westview Press.
- Tiefer, L. (2012) The “New View” Campaign: A Feminist Critique of Sex Therapy and an Alternative Vision. In Kleinplatz (Ed.) *New Directions in Sex Therapy: Innovations and Alternatives*. New York: Routledge.
- Ulanov, Ann and Barry (1994) *Transforming Sexuality: The Archetypal World of Anima and Animus*. Boston: Shambhala.
- Wakefield, C. (2012) *Negotiating the Inner Peace Treaty: Becoming the Person You Were Born to Be*. Bloomington, IN: Balboa Press.
- Watkins, J. & Watkins, H. (1997) *Ego States: Theory and Therapy*. New York: Norton.
- Watson, Laurie (2013) *Wanting Sex Again: How to Rediscover Desire and Heal a Sexless Marriage*. New York: Berkeley Books
- Weeks, G. & Hof, L. (ed.), 1987. *Integrating Sex and Marital Therapy: A Clinical Guide*. New York: Brunner/Mazel.
- Weiner Davis, M. (2003) *The Sex Starved Marriage: A Couple’s Guide to Boosting Their Marriage Libido*. New York: Simon and Shuster.
- Weiner Davis, M. (2008) *The Sex Starved Wife: What to Do When He’s Lost Desire*. New York: Simon and Schuster.
- Wentland, J., Herold, E., Desmarais, S., & Milhausen, R. (2009) Differentiating highly sexual women from less sexual women. *The Canadian Journal of Human Sexuality* Dec 22, 2009.
- White, M. (2007) *Maps of Narrative Practice*. New York: Norton & Co.
- Wolf, N. (1991) *The Beauty Myth: How Images of Beauty Are Used Against Women*. New York: William Morrow & Co.
- Wolf, N. (1997) *Promiscuities: The Secret Struggle for Womanhood*. New York: Random House.
- Woodman, M. (1985) *The Pregnant Virgin: A Process of Psychological Transformation*. Toronto: Inner City Books.
- Young-Eisendrath, P. (1984) *Hags and Heroes: A Feminist Approach to Jungian Psychotherapy with Couples*. Toronto: Inner City Books.
- Young-Eisendrath, P. (1993) *You’re Not What I Expected: Learning to Love the Opposite Sex*. New York: Morrow & Co, Inc.

Young-Eisendrath, P. (1997) *Gender and Desire: Uncursing Pandora*. College Station, TX: Texas A & M Press.

Young-Eisendrath, P. (1999) *Women and Desire: Beyond Wanting to Be Wanted*. New York: Three Rivers Press.

Zilbergeld, B. (1992, 1999) *The New Male Sexuality: The Truth about Men, Sex and Pleasure*. New York: Bantam Books.