

THE AMERICAN ACADEMY OF CLINICAL SEXOLOGY

SHAMING AND SUPPRESSION OF FEMALE SEXUALITY

AN IN DEPTH LOOK AT THE EVOLUTION OF HUMAN SEXUALITY, GENDER ROLES,  
FEMALE LIBERATION, AND LONG TERM EFFECTS OF SHAMING OF FEMALE  
SEXUALITY

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## VITA

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## ABSTRACT

Shaming around female sexuality occurs in a societal, cultural and religious context. Girls and women are often shamed for their appearance and simply their perceived sexual activity. This study aims to explore the evolution of human sexuality and gender roles, examine the underlying reason for and prevalence of sexual shaming of women, long-term effects and the need for therapeutic intervention. Shaming of girls and women has been found to correlate with eating disorders, depression and sexual dysfunction. This research project aims to collect data from a variety of women from different age groups, cultural and religious backgrounds to produce a qualitative view of incidence, prevalence and correlation between shaming and adult female sexual dysfunction, body image and self esteem issues.

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## INTRODUCTION

Shaming around female sexuality occurs in a societal, cultural and religious context. Girls and young women are shamed for their appearance, sexual conduct or simply for their perceived sexual activity. Shaming of women can be in the form of criticism about the way they dress, behave or how they are perceived. Media, movies, TV, pop-culture, and even toys for girls encourage girls to be pretty and sexy, but at the same time girls are discouraged from being too sexy as this could make them perceived as promiscuous and make them the target of sexual assault (Graham McMinn 2007; Valenti 2007). Shaming can also be in the more passive aggressive forms, such as victim blaming of survivors of sexual assault. Shaming a woman for her sexuality is based on the assumption that a woman who has sex or likes sex is somehow bad. A longitudinal study tracking two cohorts of youth found that “as early as sixth grade, girls who have sex lose friends, while boys who have sex, gain friends” (Kraeger 2007, 143). Shaming and objectification of girls and women has been found to correlate with eating disorders, depression and sexual dysfunction (Moradi and Huang 2008).

The purpose of this research project is to take an in depth look at the history, the development and evolution of gender roles and female sexuality. This project will review several theories on gender roles taking into account religious, cultural and societal factors. This dissertation also aims to gather data from a variety of women from different age groups, cultural, and religious backgrounds to explore prevalence and correlation between childhood and early adolescence sexual shaming and adult sexual dysfunction, depression, self-esteem, and body image issues. Ultimately this project seeks to identify a desire and need to heal the wounds of sexual shaming and hence a need for and the development of an intervention.

## CHAPTER 1

### HISTORY AND THEORIES ON THE EVOLUTION OF HUMAN SEXUALITY

*Perhaps our greatest distinction as a species is our capacity, unique among animals, to make counter-evolutionary choices.*

*Jared Diamond*

#### **Sociological Essentialism Theory**

When we look at the evolution of female sexuality over time from a historical viewpoint, we discover several perspectives that offer differing as well as opposing views on the development of human sexuality and gender roles. Two of the main theoretical perspectives have dominated the field of human sexuality in the recent decades. One of those perspectives is the evolutionary theory, which emphasizes a biological component that is the primary determining factor for sexual behavior. According to classical essentialism, certain concepts of human behavior, such as sexuality are believed to have certain attributes and properties that remain constant (DeLamater and Hyde 1998). Sociological essentialism is a theory that proposes that gender, sexuality, race, and ethnicity are traits that are static and hence, do not change. Essentialism and evolutionary theory thus suggest that certain features or characteristics of human behavior are similar across all cultural and historical settings as biological factors mainly influence such characteristics (DeLamater and Hyde 1998).

#### **Social Constructionism Theory**

The social construction theory suggests that societal constructs are instrumental in shaping and determining human sexual behaviors. Social constructionism proposes that society

has a greater influence on sexuality and gender than do biology. Sexuality and gender may or may not be viewed equally in different cultures and societies but rather the concept of sexuality would be a conceptualization unique to that particular culture or society not necessarily shared by individuals outside of that society (Wood and Eagly 2002).

### **Evolutionary Theory**

Sociobiology is a theory that suggests that human, as well as animal behavior can be best understood and explained partly based on the result of natural selection, which is one of the fundamental components of evolutionary theory. In his article “Biological Theories of Gender” Saul McLeod points out the concepts of how certain behaviors evolved based on their adaptability:

As the evolutionary approach is a biological one, it suggests that our genes have coded aspects of human behavior because they were or are adaptive. A central claim of evolutionary psychology is that the brain (and therefore the mind) evolved to solve problems encountered by our hunter-gatherer ancestors during the upper Pleistocene period over 10,000 years ago. The evolutionary approach argues that gender role division appears as an adaptation to the challenges faced by the ancestral humans in the environment of evolutionary adaptation. The mind is therefore equipped with instincts that enabled our ancestors to survive and reproduce. The two sexes developed different strategies to ensure survival and reproductive success. Hunting for food required speed, agility, and good visual perception, so men developed this skill. This natural division of activities would ultimately, improve reproductive success, avoidance of starvation, and the survival of the species. This would explain why men and women are psychologically different and they typically adhere to specific and different social roles (McLeod 2014).

Therefore the evolutionary theory, the deterministic theory, as would the essentialist theory would argue that men and women have little choice over their typical social behaviors, that is, women are naturally nurturers and men are naturally competitive and aggressive (McLeod 2014). Some anthropologists and findings suggest that females hunted alongside males during the Pleistocene period. Anthropologists Steve Kuhn and his wife Mary Stiner (2006) at

the University of Arizona are proponents of such theory. In some of the world's remaining hunter-gatherer societies such as the Agta of the Philippines women hunt game animals, fish, wild pig and deer using bows, arrows or machetes (Dahlberg 1981).

A study completed at the University College London by a team of researchers lead by anthropologist Mark Dyble, concluded, that in contemporary hunter-gatherer tribes, men and women tend to have equal influence on where their group lives and whom they live with. These findings challenge the concept that sexual equality is a recent invention, suggesting that it has been the norm for humans for most of our evolutionary history. Dyble notes another interesting observation that when only men have influence over whom they are living with, the core of any community is a dense network of closely related men with the spouses on the periphery. Dyble also argues that there is still this wider perception that hunter-gatherers are more macho or male-dominated and that it was only with the emergence of agriculture, when people could start to accumulate resources, that inequality emerged (Dyble et al. 2015). Even Charles Darwin during his voyages noted that in remote tribes, women had more power to choose, reject, change husbands, and pick lovers than he would have ever imagined (Darwin 2004).

Pre-historic artifacts testify to the importance of female fertility in the minds of hunters and gatherers societies. Statues of women that have been found and are some of the oldest artifacts depicting females and emphasizing fertility seem to have had spiritual or religious meaning for hunters and gatherers. It seems quite possible based on these findings that in the oldest human societies known to man, the gods were possibly not gods, but rather goddesses. The most magical and mysterious of human experiences was very likely the producing and giving of life and sustaining it and that was uniquely a woman's ability. The fertility goddess enshrined women's magical labor and her regular daily work (Reilly 1997).

Some anthropologists speak of an earlier time when women, not men, might have ruled society. In his work “The Origin of the Family, Private Property, and the State” Friedrich Engels attempted to analyze the issue of the role of the woman. Engels’ goal was to disprove the claim that women’s inferior status was a natural phenomenon by tracing the prehistoric roots of oppression of women. Based on the work of anthropologist Lewis Morgan, Engels suggested that there was a predominance of women in primitive times and the foundation of society at the time was the communistic household headed by women. “Descent could only be traced with certainty through the mother’s side and therefore only the female line is recognized” (Engels 2010, 51). Women were typically not tied to any one man and men's role in procreation was for a long time unknown.

This system of the household became threatened, according to Engels, when the domestication of animals developed. The breeding of herds of animals now meant that human groups no longer had to live hand to mouth. They could now gain wealth, in the form of animal livestock. Money and wealth was acquired by the males because of the sexual division of labor that was based on sex that had existed previously. It is important to keep in mind that just because division of labor was based on sex, it does not mean that oppression will naturally follow. Probably the earliest divisions of labor occurred for reasons of convenience; men and women did different jobs because of their different physical capacities (Thomson 2011).

For any species that reproduce sexually, survival is dependent on the male mating with the female and thereby passing on his genetic traits to the next generation. “Early evolutionary theories about the sexual behavior of animals suggested that males generally evolve to become aggressively competitive, often fighting among themselves for access to females or carrying out ornamental displays in order to attract them” (Potts and Short 1999, 17). Sperm is biologically

easy to produce, and after fertilization, the males of many species have little or no further parental responsibility. “Males that fertilize more females will contribute more to the genetic makeup of the next generation, and so males will generally evolve to become competitively promiscuous. The male investment in parenthood is almost zero, whereas for a woman it is substantial” (Symons 1979, 22).

The evolutionary theory initially proposed that females typically evolve to be more selective about their sex partners. Ovum are biologically labor intensive and expensive to produce and pregnancy can in some incidents be fatal and is often a tremendous strain on the female body. In addition to this, females of some species continue to nurture and care for their offspring until they become self-sufficient. “Since females profoundly invest in the reproductive process, females naturally evolve to emphasize on and choose males with genetic traits that will increase the chance of her offspring’s survival and reproduction” (Potts and Short 1999, 41).

### **Economic Theory**

The Social Exchange theory suggests that human behavior is a result of an exchange process that assumes that each person involved in this exchange relationship gives something that the other person gains. Such exchange interactions are only likely to continue if each person in the exchange relationship gains more than it loses (Baumeister and Vohs 2004).

“A heterosexual community can be analyzed as a marketplace in which men seek to acquire sex from women by offering other resources in exchange. Societies will therefore define gender roles as if women are sellers and men buyers of sex where women are endowed sexual value” (Baumeister and Vohs 2004, 339). It is in the interest of the women to keep the price of sex high as to gain access to the resources that men have, in other words, men seek sex and

women withhold sex to gain resources. This theory will only hold true in a society where women are not afforded equal rights and opportunity to work and education. Sex becomes a female resource and commodity. Sexual norms differ widely across different cultures and historical epochs. The market value, not limited to a monetary value, for sex also varies. An attractive woman can command a higher price than others (Baumeister and Vohs 2004).

Unfortunately, this proves the irrefutable fact that physical beauty and youth are considered as some of the most desirable attributes in women and ultimately leads to objectification of women. Media and advertising capitalize on the fact that clothing, makeup, dieting, and other factors can enhance beauty. However, such strategies for enhancing sex appeal in one culture might be counterproductive in another (Ford and Beach 1951). (Cultural suppression and Objectification of female sexuality will be discussed in more detail in chapter 2.)

## CHAPTER 2

### FACTORS INFLUENCING THE EXPRESSION OF FEMALE SEXUALITY

*When she stopped conforming to the conventional picture of femininity, she finally began to enjoy being a woman.*

*Betty Friedan*

#### **Cultural Suppression**

The phenomena of suppressing female sexuality may be a cultural one. Many cultures seek to control and limit the ways women are allowed and expected to behave and express themselves sexually. Women are often encouraged to refrain from having and enjoying sex. Parents, schools, peer groups and legal forces all cooperate to alienate women from their sexual desires (Baumeister and Twenge 2002). School dress codes suggest that girls' bodies must be covered up as to not be distracting to the boys. "According to the sexual double standard, boys and men are rewarded and praised for heterosexual sexual contacts, whereas girls and women are derogated and stigmatized for similar behaviors" (Kraeger and Staff 2009, 143). A longitudinal study by Derek A. Kraeger that focused on American Youth from 28 rural communities in Iowa and Pennsylvania concluded that girls' friendship networks shrink significantly after they have had sex, whereas boys' friendship networks expand significantly. Girls who violate the traditional social schemas are then penalized, excluded and shamed. This is where the sexual double standard arises when women and girls who violate traditional sexual social expectations, have multiple or sexual relationships are stigmatized in our culture and society. Men however, and boys that take part in the exact same behaviors are praised for attaining societal masculine ideals (Kraeger 2009).

In many cultures, women are considered property, and male honor and shame is related to



his control over a woman's body and sexuality. "Males can lose honor and be shamed for failing to control the women in their network. Honor killings of wives and daughters that do not abide by the prescribed cultural norm are widely accepted" (Gilbert and Miles 2002, 35-36). Some cultures go as far as to perform female genital surgery to directly control and restrain a woman from being physically able to enjoy sex which sadly enough does not only rob the female from enjoying sex but also inadvertently, her male partner of having a mutually satisfying sexual relationship (Baumeister and Twenge 2002).

### **Religious Suppression**

Every civilization, the Sumerian, the Victorian and every civilization before, after and in between have attempted to control human sexuality by creating and enforcing laws. "Some sexual acts and activities were condoned, while others were punished mercilessly" (Berkowitz 2012, 13). "The first sexual prohibitions were likely Paleolithic taboos against intercourse with women during their periods. Most likely, the rejection of women while their blood flowed was a precaution to appease the threatening divine presence men felt when confronted with the unknown" (Berkowitz 2012, 17). It was not until about 9000 BCE that the link between sexual intercourse and pregnancy was confirmed. Yet, until this day several religious practices look at female menstruation as unclean such as the Torah that decrees that women and everything they touch are unclean during their periods (Berkowitz 2012).

The moral values currently pervasive in our Western civilization can be traced to derive from mainly three origins; Greece, Rome and ancient Israel (Gochros and Gochros 1977; Foucault 1990). In all societies, questions concerning morality were answered and decided upon mainly based on religious doctrine. The earliest sex laws that we know of follow this morality

code based on religion. Human laws and its enforcement were viewed as simply following and enforcing divine guidelines and orders that were then basically merely instruments of a higher power. “Hammurabi received his laws from the Sun-God, Moses was given the Ten Commandments by Yahweh on Mount Sinai, and Mohammed had the Koran dictated to him by the archangel Gabriel” (Gochros and Gochros 1977, 6).

In ancient Greece, sex was viewed as a fundamental life force and sexual drive and behavior was generally viewed as good. Greece was at this time a male oriented society and the ideal of beauty was male. Greeks typically accepted all kinds of sexual activity as inspired by the divine and therefore as good. For example, homosexual relationships were considered normal and natural in Greece during this time. Hermaphrodites often inspired respect and awe and transsexuals were allowed to follow their sexual preference (Gochros and Gochros 1977). Women however, were treated as the inferior sex. They were confined to the home and their main duty was to bear and raise children and they were not allowed sexual activity outside of the marriage. Men married wives and raised families, but romantic involvement was more often than not reserved for homosexual relationships outside of the marriage (Gochros and Gochros 1977).

For the Israelites, procreation was the fundamental reason for having intercourse. “Men and women had the duty to be fruitful and multiply,” and “there was no greater blessing than a large family” (Genesis 1: 28). Biblical passages mainly from Song of Songs make it obvious that sexual pleasure was thought highly of as a normal part of life (Gochros and Gochros 1977).

At the time of Jesus, many Jewish as well as Pagan cults started to preach sex negative doctrines even though there is no evidence that Jesus himself followed such doctrines. Paul, later in his writings condemned homosexuality, and considered any type of sexual desire as deplorable

weakness (Gochros and Gochros 1977). Other Christian scholars followed, such as Augustine, Jerome, and Tertullian, that all condemned sexual activity and pleasure. In Augustine's opinion, a spontaneous response to sexual pleasure during intercourse was evidence that humans were not in control over their bodies, which was God's plan. Every child that resulted from intercourse was considered tainted as a result of the sexual act, and must be cleansed by the cleansing power of Baptism (Gochros and Gochros 1977).

Islamic, Hindu, and ancient Oriental sexual attitudes were considerably more positive than the Christian view on sex. "In China, sex was not something to be feared, nor was it regarded as sinful, but rather, it was an act of worship and even a path toward immortality" (Bullough 1964, 102). A detailed sex manual, the Kama Sutra, was compiled in India at the same time as St. Augustine wrote his confessions. Similar sex manuals in ancient China and Japan glorified sexual pleasure and variety (Masters, Johnson and Kolodny 1985).

Medieval church policy towards sexual behavior showed little tolerance of sexual behavior or even of a vigorous normal marital sex life. Non-coital forms of sexual intercourse between husband and wife were prohibited altogether, and coitus itself was severely restricted. For the moralists of the church at this time, "physical pleasure was, at best, unimportant and at worst, corrupting" (Gochros and Gochros 1977, 14).

Indeed, vast differences between countries and even between regions of the same country existed at this time. Furthermore, in spite of its vast influence, the church did not have an iron grip on every citizen. Pre-Christian sexual customs and attitudes persisted in many areas for a very long time (Haeberle 1977).

During this time, most people lived in the countryside close to nature and humans, and their cattle shared the homes. Members of the family often slept together, in the same bed and

the same room. Irrelevant of the social class, people at this time did not have a lot of privacy, but interestingly enough there did not seem to be a taboo or embarrassment about nudity and natural bodily functions. If you stayed at a Hostel or an Inn, you often slept with other guests and strangers. People went to integrated bathhouses that were popular social gatherings for the entire family in these times and nudity in public was quite common. That there was also a great deal of vigorous sexual activity is well documented by writers such as Chaucer and Boccaccio. Their writings make it clear that vigorous sexual activity was the norm. Basically compared to current times, humans were exceptionally uninhibited (Gochros and Gochros 1977).

Common belief is that Sigmund Freud discovered infant sexuality for the first time in our century. The belief that children are asexual and the taboo against children participating in sex-play are only a few centuries old. In Europe during the medieval as well as ancient time, the fact that children had a natural sexual curiosity and interest was widely accepted. Children were often put to sleep or kept quiet by masturbating them by mothers, grandmothers and nurses alike. Children were free to play and not exceptionally supervised and were not restricted sexually until boys and girls entered puberty and were able to reproduce. "As soon as a girl had had her first menstruation she was believed ready for marriage" (Gochros and Gochros 1977, 15).

As technology advanced, labor became increasingly specialized, cities grew larger, and traditional customs also started to change. There was a gradual transition to an economic system based on capitalism, which inevitably created a new way of life. Churches created and started to keep accurate birth records as a person's age became more crucial. The keeping and following of schedules and efficient use of one's time grew more important. Childhood was recognized as a distinct phase of life that had specific needs somewhere in the sixteenth to the eighteenth century. Religious orders created and founded schools for young children and suddenly toys,

books, and fashions were created specifically for children. (Gochros and Gochros 1977).

The book *Colloquia Familiaria* was written by Erasmus of Rotterdam in 1522 for his six-year-old grandson as to teach him Latin and prepare him for the world with a good education. This book exemplifies a less stringent view on child rearing which still existed in many parts of Europe. This book is about all kinds of day-to-day events, experiences and problems including sexual knowledge. There are comprehensive and honest discussions of sexual pleasure, desire and coitus. The writings include information on conception, pregnancy, birth, marriage, and prostitution and even discussed venereal disease. The discourse is uncomplicated and at times even amusing. Sex is described as something pleasurable and natural, as part of life (Gochros and Gochros 1977).

This common sense approach to sex, unfortunately perished over the next few centuries and such literature was no longer considered appropriate for children, but for adults only. Adding to the middle class increasingly negative view of sex and the human body was the spread of the Syphilis epidemic in the sixteenth and seventeenth centuries. Intimacy and lovemaking were now viewed as uncivilized and unhealthy and were rejected. People in the upper class with wealth started wearing night garments, and privacy all of a sudden became of concern. As a result, the bed vanished from the living room to a separate bedroom. The bathhouses started closing and authorities sexually segregated swimming in lakes and rivers and eventually bathing in the nude became prohibited. The human sex organs as well as the organs of excretions became objects of disgust and were considered a shameful secret (Haeberle 1977).

With the new Protestant leaders Luther and Calvin, and the sixteenth century Protestant Reformation, the formerly unified church of Western Europe became divided into many new Christian churches, movements and sects. Luther and Calvin rejected the Popes' supremacy as

well as the Catholic dogmas. However, they maintained most of the already negative attitudes towards sex, except the idolization of clerical celibacy and sexual abstinence. Luther, who previously was a monk, married a former nun and Calvin felt compelled as well to marry and live a more conventional life (Haeberle 1977).

Calvin's new theology greatly influenced the English Puritans. In their view, Henry VIII had not advanced his reformation sufficiently, and so finally his power was seized under Oliver Cromwell. Henry VIII, while in power as the head of the English church, had overseen some of the religious authority and made numerous religious transgressions into secular crimes. As a result, acts such as bestiality and homosexual acts now became felonies, and punished as such. The English Parliament passed the Puritan Act in 1650. Suppression of adultery, as well as fornication suddenly turned into crimes with penalties comparable to those prescribed during biblical times and punishable by death. The Puritan rule did not last very long in England, but it had a second blossoming in America. In New England, the Puritan colonies were religious and totalitarian states where most laws regarding sexual activity were founded on the laws of Moses. For example, the colony of Massachusetts duplicated the Old Testament when it passed laws that ordered the punishment for adultery, homosexual acts and any sexual contact with animals be death. In most states in the United States, until this day, sex laws continue to abide by the Puritan model (Haeberle 1977).

The Victorian Era lasted from when Queen Victoria became queen in 1837 until her death in 1901. During this epoch, anything having to do with sexuality was against the societally acceptable view of purity and harshly scorned. Masturbation was condemned and deemed a mental disorder. "Physicians alleged that masturbation resulted in some forms of insanity, epilepsy, and hysteria in women" (Perkin 1995, 22).

Since society at this time, prevented women from making a living of their own, they were inevitably dependent upon men for their security. “Barred by law and custom from entering trades and professions by which they could support themselves, and restricted from the possession of property. Women had only one means of livelihood, that of marriage” (Kingsley Kent 1990, 86).

For women at this time, to be deemed as a likely wife, she had to be unspoiled and be a virgin. She had to be innocent in the sense that she had no thoughts of love or sex until after a proposal. Women were expected to maintain chastity and fidelity when married. However, men were not supposed to meet those same requirements to be a potential husband. Males were free to take part in sexual relations before and outside of marriage. In Victorian times, the belief was, that women’s sexuality controlled them and therefore they needed to be regulated (Kane 1995).

Women’s worth in society was measured simply by whether they were considered to be good mothers according to rigid moral standards. A woman by the name of Besant was judged not to be a fit and proper person to have custody of her child, not because of her mothering abilities but rather because of her opinions. The courts and the public ruled indisputably that social conformity was more important than maternal love (Kingsley Kent 1990).

During the Victorian period, the ideal woman was considered to have no sexual feelings or urges and did not have orgasms. Women were above sex so to speak. However, there were many prostitutes during the Victorian era. Most were lower-class women forced into prostitution for survival, the exception being the mistresses kept by noblemen. The Victorian expectation of respectable women was that they not have any sexual feelings. It was a woman’s duty to have intercourse with their husbands, and refusal of sex was grounds for annulment of the marriage (Perkin 1995). Having affairs was disgraceful. Prostitutes, on the other hand, were supposedly

sexually intimate with men because they enjoyed sex. Males enjoyed prostitutes because they could not enjoy their wives.

Western and Southern Europe had, in the early nineteenth century, liberalized their sex laws at the command of Napoleon I. The Napoleonic code, which practically legalized all consensual sex between adults in private, had an influence reaching well beyond the French national borders. In the early nineteenth century at least, married couples had still been able to obtain some realistic sexual information. In France, for example, the Revolution of 1789 and the Napoleonic reforms had produced a certain amount of sexual freedom (Encyclopedia Britannica). A variety of serious marriage manuals were published which took a rather reasonable attitude toward sex and also described various methods of contraception. Furthermore, around the middle of the century, new technical processes made the mass production of condoms possible. As a result, more and more people began to plan the size of their families. The Christian churches were, of course, aware of all this, but took no official stand on the matter. Even most of the Catholic bishops preferred to remain silent, and instructed their priests not to upset parishioners who acted in good faith. It was only later, when the fear of degeneracy began to spread, that the churches became more outspoken. The biblical injunction to be fruitful and multiply was reemphasized, and contraception was condemned as contrary to the will of God and the national interest. At the present time the majority of states in the United States still retained a host of laws against socially harmless, but heretical sexual behavior. For the average layman today it is, of course, the concept of sexual psychopathology more than that of wickedness, which explains nonconformist sexual behavior. Scientific explanations have replaced religious explanations and by now we are calling sexual deviants mentally ill instead of evil (Gochros and Gochros 1977, 19-20).

### **Societal Suppression**

Women's sexual liberation in the last century has won many victories for women including rights to an abortion and divorce. The modernization of relationships and attitudes to sex has far from ended oppression of women it has simply changed. Women are still expected to be a good wife and mother, but they are also supposed to be sexual or be called a prude. On the other hand, if she is perceived too sexual she might run the risk of being labeled a slut. Increasingly intense sexual imagery in media, movies, and magazines have increased the sexual expectation of women and have also created a culture of women becoming sexual objects, victims of sexual violence, including rape (Gibbs and Martin 2013).



Humans learn socially accepted behavior from our surroundings. At an early age, children are conditioned to acclimate to certain cultural and societal roles of acceptable male and female behavior. These gender roles are usually a societal conceptualization based on the biological sex assigned at birth. In Western, specifically American culture, male gender roles relate closely to strength, aggression, competitiveness, and dominance. Female roles associate more with passivity, nurturing, and subordination. In our society, we typically assign blue to male infants and pink for girls. At the beginning of the 20th century, the color pink was associated with boys, while blue was associated with girls. This tidbit illustrates how socially constructed these associations really are (Caldera, Huston and O'Brien 1998).

At an early age, children learn that there are clear expectations for them based on their assigned gender. Studies done across several cultures have shown that children are aware of gender as early as age two or three. When a child has reached the age of four or five, they have already established societally and culturally expected gender roles (Kane 1996). Children get toys that are considered gender appropriate. Girls play with dolls and dress-up clothing as to encourage socially expected female behavior, such as nurturing, role-play, and connectedness in society. Boys get trucks, toy guns, and super-hero articles to stimulate aggression, strength, and competitiveness. The study showed that children would choose gender appropriate toys when cross-gender toys are available because parents tend to reward their children for gender normative behavior, in the form of praise, physical closeness, involvement, and positive feedback (Caldera, Huston and O'Brien 1998).

We continue to adhere to masculine and feminine gender roles throughout life. Men outnumber women in professions such as law enforcement, the military, and politics; women outnumber men in care-related occupations such as childcare, healthcare, and social work. In

American typical male and female behavior is derived from our culture and traditions, not from biology or genetics. Adherence to these roles meets social expectations but not necessarily personal preference (Diamond 2002).

Gender role expectations are societal constructs and not originating in actual gender differences, but rather on stereotypes and perceptions of how males and females behave and act. Sexism is based on gender stereotypes and the discriminatory beliefs that men matter more than women. An example of sexism based on gender role stereotypes in our modern Western society includes that women are typically expected to be the caretakers of the children and household. Women are also supposed to be friendly, passive, and nurturing. When a woman behaves assertively, she may be disapproved of or perceived as aggressive as she has violated an expected gender role. In contrast, when a man acts in a similarly unfriendly or assertive way, he most likely will be perceived as strong or even gain respect in some circumstances (Little 2013).

In our society sexism can be found in situations such as employment opportunities, and education. The United States is still a male dominated society, and women are not likely to be hired or promoted in what is considered a male profession such as construction, aviation or engineering (Blau, Ferber, and Winkler 2010; Ceci and Williams 2010). In many areas of the world, young girls do not have the same access to nutrition, healthcare, and education as boys (Little 2013). The oppression that women continue to experience today in most parts of the world is a result of the emergence of societies that value private property and that divides the population into classes. Marxists and Socialists propose that this class system did not always exist but is a result of this divisiveness. As a result, societal suppression of female sexuality is an inevitable side effect (Thomas 2010).

According to Sherfey's (1966) respected statement of this view, the sex drive of the human female is naturally and innately stronger than that of the male, and it once posed a

powerfully destabilizing threat to the possibility of social order. For civilized society to develop, it was allegedly necessary, or at least helpful, for female sexuality to be stifled. Countless women have grown up and lived their lives with far less sexual pleasure than they would have enjoyed in the absence of this large-scale suppression. Socializing influences such as parents, schools, peer groups, and legal forces have cooperated to alienate women from their own sexual desires and transform their supposedly and relatively sexually voracious appetites into a subdued remnant. The double standard of sexual morality has condemned certain sexual activities by women while permitting the identical actions for men. In some cases, surgical procedures have been used to prevent women from enjoying sex. From some perspectives, these societal forces have deprived most individual women of their natural capacity to enjoy multiple orgasms and intimate gratifications. Women have felt that they are not permitted by society to express their sexual feelings or even to enjoy sex in many contexts. Men may also have suffered, at least indirectly, insofar as they have been deprived of the pleasures that come from having partners who enjoy sex (Baumeister and Twenge 2002, 166).

## CHAPTER 3

## IDEOLOGIES INFLUENCING THE EXPRESSION OF FEMALE SEXUALITY

*“The pain of being treated like a mere object. And a sense that this pain would turn into pleasure.”*

*Natsuo Kirino*

**Objectification Theory**

“To objectify is to make into and treat something that is not an object as an object, which can be used, manipulated, controlled, and known through its physical properties” (Cash 2012, 574).

The Objectification Theory postulates that girls and women are naturally conditioned to internalize an outside view and opinion as their belief system of their physical bodies. This skewed outlook can lead to constant body monitoring, which often leads to shame and anxiety in women. This gradual accumulation of anxiety producing experiences and feelings may explain the correlation with particular mental illnesses that tends to plague women to a larger degree than men, such as unipolar depression, sexual dysfunction, and eating disorders (Fredrickson & Roberts 1997).

An example of sexism based on gender role stereotypes in our modern Western society is that feminism and other sociocultural perspectives have done a great deal to illuminate the ways in which many gender differences have little to do with the biological body. Instead, feminism has more to do with the differential socialization of boys and girls in our society. Women are typically expected to be the caretakers of the children and household. Since sexual objectification is just another type of gender oppression, it also factors into, and perhaps even enables a plethora

of other types of oppressions that women encounter such as employment discrimination, sexual violence and the downplay of the work of women and their accomplishments. What is noteworthy is that all types of sexual objectification are the experience of being treated as a body part or collection of body parts valued mainly for its pleasure or consumption (Fredrickson & Roberts 1997).

Our culture is saturated with heterosexuality. A sign of this is the socially accepted right of all males to sexualize all females, regardless of their age or status (Westcott 1986). The most subtle and deniable way sexualized evaluation is enacted and arguably the most ubiquitous is through gaze, or visual inspection of the body (Kaschak 1992). Sexual objectification happens when a woman's body is reduced to body parts or sexual functions and is separated from her person and considered still able to represent her (Bartky 1990). In other words, women are treated merely as an object, as a body that exists solely for the use and pleasure of others. Undeniably, some men choose not to objectify women, and are more likely to have deeper, more meaningful relationships with women as a result (Stoltenberg 1989).

Sexually objectifying gaze occurs in visual media, such as advertisement, TV, films, music videos, women's magazines, and pornography. The focus on women's bodies in media has been studied and quantified relating to facial prominence (Archer et al. 1983). Men in printed media, tend to be depicted emphasizing their face and head with greater facial detail. On the other hand, women are typically portrayed with an emphasis on the body, or a particular body part. It is standard practice for photography in magazines to focus on women's bodies and body parts without portraying their heads and faces (Archer et al. 1983).

“Media encounters of sexual objectification occur in every form: prime-time television programs, sports programs, television commercials, cartoons and animation, the internet, music

videos, music lyrics, video games, magazines and newspapers, cell phone applications, and billboards” (Cash 2012, 574). Generally, the way media portrays women in a sexually objectifying manner, is by focusing on body parts, especially that of an object of male gazing that is not reciprocated. Not only sexual gazing, but also actual sexual and physical violence against women are often depicted and eroticized. “Images of scantily clad and partially nude women commonly appear in contorted positions, bent over or positioned on all fours, physically bound, or physically threatened and restrained by men, or groups of men” (Cash 2012, 574).

Some theorists have ventured to explain why visual evaluations of the female body, which can lead to sexual objectification, are integral to male heterosexuality. The evolutionary theory contends that women’s physical attractiveness indirectly signals reproductive value, and so, the practice of viewing and evaluating women’s physical attributes has become an integral criterion in men’s selection process (Buss 1989; Singh 1993). Others contend that the societal and cultural practice of viewing and objectifying women’s bodies, originated to create, maintain, and express patriarchy (Connell 1987; Kuhn 1985; Stoltenberg, 1989).

“Fredrickson and Roberts identified self-objectification as the first psychological consequence among girls and women as a result of living in a sexually objectifying cultural milieu” (Calogero 2012, 575). Self-objectification is the internalization of a third-person’s perspective on the self. “As a result, girls and women are conditioned to place greater value on their appearance to others rather than on how they feel or what they can do” (Calogero 2012, 575). “The majority of women will undoubtedly experience some degree of self-objectification in certain situations where there has been attention made to their bodies, such as catcalling, catching someone staring at their breasts, or where their gender becomes a noticeable feature of the immediate social context” (Calogero 2012, 575).

“Evidence from correlational, experimental, and longitudinal studies of women across North America, Australia, and the United Kingdom has provided support for several of the main tenets of objectification theory. Self-objectification is proposed to lead directly to several psychological or experiential consequences that are known to occur at a disproportionately higher rate among girls and women” (Calogero 2012, 576):

“(a) Body shame.

(b) Appearance and safety anxiety.

(c) Reduced concentration on mental and physical tasks.

(d) Diminished awareness of internal bodily states; satiety, hunger, fatigue, and emotions”

(Calogero 2012, 575).

It has been proposed that these subjective experiences can lead directly to a series of mental health risks that tend to occur at a disproportionately higher rate among girls and women; unipolar depression, sexual dysfunctions, and eating disorders. That is, by generating recurrent shame and anxiety, disrupting attention that could be directed toward pleasurable and rewarding activities, and reducing sensitivity to internal bodily cues, self-objectification indirectly contributes to greater depression, sexual dysfunction, and eating disorders in girls and women (Calogero 2012).

As with eating disorders and depression, women experience more sexual dissatisfaction and sexual dysfunction than do men. The subjective experiences associated with sexual and self-objectification, such as body shame, appearance anxiety, and inattention to internal body states, arguably interfere with achieving orgasm. Moreover, self-surveillance during sexual intercourse necessarily disrupts women’s attention and flow in the moment, which is required for orgasm. Further, more dehumanizing forms of objectification can reduce the enjoyment of sex, such as

experiences of assault, abuse, and harassment. A dearth of research exists that investigates the direct and indirect associations between self-objectification, self-surveillance, and sexual dysfunction. However, the bit of evidence that does exist supports some of the proposed relationships that shame and anxiety associated with self-objectification partially predict disrupted sexual functioning in women. In particular, self-objectification has been linked to less sexual satisfaction, lower sexual self-esteem, and lower perceived sexual competence (Calogero, 2012).

### **Sexualization of girls**

The American Psychological Association's (APA) task force report on the sexualization of girls, compiled and written by Eileen Zurbriggen and colleagues, showcased the breadth and impact of the sexualization of girls and women in Westernized cultures, particularly American culture. The APA task force report confirmed that girls exposed to sexualizing and objectifying media or sexualized interpersonal encounters are more likely to experience body dissatisfaction, depression, lower self-esteem, and negative interpersonal relationships with male and female peers. Also, there is some evidence to support the idea that viewing sexualized portrayals of girls could lead viewers to associate even nonsexualized children with sex.

When girls and women buy clothes, accessories, and makeup and style themselves emulating celebrities, or other female role models that portray themselves as physically appealing and sexy, they are, in effect, sexualizing themselves. Research has shown that attempting to live up to the sexualized ideals of women is correlated with lower self-esteem, negative mood, and depression. Research also showed that physical health was negatively affected as a result of sexualization (Frederickson and Roberts 1997; McKinley and Hyde 1996).



Girls and women who are exposed to sexualized images and engage in and consume mainstream media content on a frequent basis are affected negatively and tend to endorse sexual objectification and sexual stereotyping as well as consider physical and sexual attractiveness as integral for a woman's worth (Ward 2002; Ward and Rivadeneyra 1999; Zurbriggen and Morgan 2006).

### **Sexting**

The sexualization of teen girls also reflects rising trends in teen sexting. Recent research on teen sexting suggests that many teens feel pressured or bullied into participating in these activities and that girls are most adversely affected, as more girls may believe their bodies are merely sexual objects. Teens and parents often do not realize the consequences of sexting. Teens run the risk of unknowingly engaging with adults online in sexual image sharing. There is a higher likelihood of real-world sexual encounters at an early age. Not to mention the possibility of facing child pornography charges for acts related to sexting.

Sexting has been conventionally defined as the exchange of sexual messages or images (Livingstone et al. 2012), and the creating, sharing, and forwarding of sexually suggestive, nude, or nearly nude images through mobile phones and the Internet (Lenhart 2009). The legal interest is in underage, sexually explicit images, which are a form of child pornography (Ringrose et al. 2102).

It was found in a qualitative study of children and youth in London, that the greatest threat to young people is not the stranger danger typically promoted in the media, but rather sexual pressure from peers. Sexting is rarely a single activity but rather a range of activities motivated by sexual pleasure, but are unfortunately often coercive, linked to harassment,

bullying, and even violence (Ringrose et al. 2102). Texting is not a practice that is gender neutral, but it is formed within a peer group where boys tend to harass girls as a socially accepted way to show affection, and girls are often not supported by the school and family when victims of such bullying. The research observed and found considerable evidence supporting the double standard. Boys are rewarded and admired for being sexually aggressive. Girls are shunned and denigrated for that same behavior and labeled as sluts, which makes the girls vulnerable and unable to feel comfortable to talk about sexual activities openly. Boys, on the other hand, fear peer exclusion if they do not share their sexual escapades and experiences. It is crucial that gender sensitive support and safety is developed in schools and more research and attention to this problem is needed (Ringrose et al. 2012).

CHAPTER 4  
SEXISM, MISOGYNY AND CURRENT TRENDS

*“Of all the evils for which man has made himself responsible, none is so degrading, so shocking or so brutal as his abuse of the better half of humanity; the female sex.”*

*Mahatma Gandhi*

### **Slut-Shaming**

Slut-shaming also known as slut-bashing is a term originally coined by sociologist Ira Reiss. It is based on the concept of shaming and attacking a woman or a girl for being sexual, or often for merely her perceived sexuality. Women and girls are shamed for having one or more sexual partners, acknowledging sexual feelings, and, or acting on sexual feelings. Slut-shaming implies that if a woman has sex that traditional cultural and societal norms frown upon, she somehow should feel guilty and inferior. It is damaging not only to girls and women that are targeted but also to women in general in society as a whole. Slut-shaming can occur even if the term slut is not used, by excluding, ostracizing and bullying.

“Slut-shaming happens when a person publicly or privately insults a woman because she expressed her sexuality in a way that does not conform to patriarchal expectations for women. It is enabled by the idea that a woman who carries the stigma of being a slut is not worth knowing or caring about” (Tanenbaum 2000, 240).

The definition of a slut is simply a person, most often a woman, who has sexual relations with multiple partners. Only when we add negative connotations to the word does it become shaming. In many societies and cultures, the only place a woman can feel free to express her sexuality is within the sanctity of marriage, usually for the purpose of procreating. Engaging in sex with more than one partner is enough to justify the label of slut and the slut-shaming that

comes with it. In societies such as the United States and many countries in Europe, it is not uncommon for people to have several relationships throughout their lives, and it is no longer considered a requirement for a woman to wait until marriage before engaging in sex. However, this shift in sexual mores has changed the goal posts for proper female sexuality from marriage to the attitude of the girl, her emotional feeling for the boy she is with and her feelings about sex as an expression of love (Tanenbaum 2000). Any woman who has had sex or is perceived to be having sexual relations could be a victim of slut-shaming. A virgin can be a victim of slut-shaming. Indeed, as long as gendered slurs like slut continue to be weapons casually wielded against girls and women, any female who acts in a way that another person doesn't like is at risk for being slut-shamed (Hlavka 2014).

### **The Sexual Double Standard**

“When it comes to how and to whom sexual slurs are applied, there has been and continues to be a clear sexual double standard, that is, there is one set of sexual rules for men and boys, and another, unequal one for women and girls” (Tanenbaum 2000, xvii). “In terms of slut-shaming, the transitional double standard, applies that men are allowed to engage in coitus for any reason but women only if in love or engaged” (Tanenbaum 2000, 58). “In a study of North American English, 220 words for a sexually promiscuous woman were identified, but only 20 for a sexually promiscuous man” (McKay and Hornberger 1996, 227). Terms for women who sleep around include; fast woman, hussy, doll, innamorata, siren, gypsy, minx, vamp, wench, trollop, coquette, crumpet, floozy, scrubber, slag, groupie, nympho, and slut.

There is a new growing trend, in which men and boys may also be labeled sluts, which is often used to prove somehow that the term slut is gender-neutral, and hence not sexist. However,

when examined within the framework of cultural context and the sexual double standard, it is clear that the usage of the term, when applied to men, is very different than when it's applied to women (McKay and Hornberger 1996). The double standard becomes evident when looking at the synonyms for the term for males versus females.

Another unfortunate phenomenon is that women aren't only the targets of slut shaming, they are too often the perpetrators as well. This conduct especially when compared to male behavior regarding sexuality can be confusing and contradictory. When looking at the economic theory (discussed in Chapter 1) women shame each other as to maintain the value of sex as a commodity to gain access to the resources typically held by men, in patriarchal societies. This type of behavior, specifically among oppressed groups, is a necessary part of keeping those groups oppressed. In other words, women are encouraged, through internalized sexism, to distrust each other and fight for male approval and hence resources. Slut shaming is a way for women to attempt to compete with other women for male approval in a patriarchal society that defines women's worth by their physical attractiveness and limits their ability to distinguish themselves by other means.

It is also crucial to understand that in a patriarchal society male approval translates into a form of limited power for women. Even in societies where women have equal access and the ability to attain power of their own, girls are still encouraged and conditioned from a young age to seek out and maintain male approval as a way to secure their power in the world. Tanenbaum (2000) looks at this phenomenon as it relates to slut-shaming. Slut-bashing is a cheap and easy way to feel powerful. "If you feel insecure or ashamed about your own sexual desires, all you have to do is call a girl a slut and suddenly you are the one who is good and on top of the social pecking order" (Tanenbaum 2000, 238).

If slut-shaming other women is rewarding, why would a woman want to be slutty and call someone else slutty as a compliment? The reasons behind reveling in one's sluttiness are the same as the reasons for slut-shaming other women, specifically garnering male approval and raising oneself up in the hierarchy. In a culture that glorifies both modesty and raunch, hailing both as a way to be a proper woman, the women who live in said culture are going to internalize the contradictory messages. Maybe this is why many women both attack the slut while trying to be one (Tanenbaum 2000).

One may think that calling a woman a slut may be harmless. Maybe it could help girls to avoid sexual mistakes; being sexually assaulted, raped or excluded from their peer group. Unfortunately the very opposite was shown to be the case. A reputation of being a slut from a casual comment in adolescence damages a young woman's self-perception and self-esteem for years to come. Since now her peers considers her easy and unable to say no, nor entitled to say no, she may become the target of harassment and even rape. She may become sexually promiscuous, or "she may shut down her sexuality completely; wearing baggy clothes and being unable to allow a boyfriend to even kiss her" (Tanenbaum 2000, 229). The consequences of slut-shaming can be disastrous and lead to becoming the victim of rape, abuse, and harassment, not to mention girls that sadly end up committing suicide. How many times has rape been discounted because a woman was deemed a slut? "How many times are women called whores while their partners beat them? How often are women's sexual histories used against them in workplace harassment cases? The sexual double standard is a lot more dangerous than we'd like to think" (Valenti 2008, 16).

## **Victim Blaming**

According to US Legal Inc.:

Victim blaming is a devaluing act where the victim of a crime, an accident, or any type of abusive maltreatment is held as wholly or partially responsible for the wrongful conduct committed against them. Victim blaming can appear in the form of negative social reactions from legal, medical, and mental health professionals, as well as from the media and immediate family members and other acquaintances. Traditionally, victim blaming has emerged in racist and sexist forms. The reason for victim blaming can be attributed to the misconceptions about victims, perpetrators, and the nature of violent acts (US Legal 2017).

Some victims of crime typically receive more sympathy from a particular society than others. Often, the victim is perceived to deserve what happened to them, or that they are individuals with low self-esteem who seek out violence (The Canadian Resource Center 2009). As a result, victims have a difficult time not only with being victims of a crime but also having to cope when blamed for what happened to them. “Victims may be wrongfully portrayed as passive individuals who seek out, and submit to the violence they endure. Offenders are seen as hapless individuals who are compelled to act violently by forces they cannot control. The most popular reasons for blaming victims include belief in a just world, attribution error, and invulnerability theory” (The Canadian Resource Center 2009, 2).

## **Just World Hypothesis**

The just world hypothesis is based a person’s belief in the world being a safe, just place where people tend to get what they rightfully deserve. These individuals believe that the social system that affects them is fair, legitimate, and justifiable (Kay et. al. 2005). A person with such a rigid belief system may change their view when they become a victim of misfortune, such as a violent crime. Generally speaking, these individuals are convinced that good things happen to good people and bad things to bad people (Idisis et. al. 2007). People with this belief system

think that people are victimized as if it was their fault (Johnson, Mullnick and Mulford 2002). One who believes in the just world is convinced that there is no innocent, suffering victim, but rather a victim deserves his or her misfortune.

### **Attribution Error**

Attribution error happens when a person overemphasizes personal characteristics of a victim and disregards environmental characteristics when judging others, resulting in victim blaming. People who make this error consider the victim as partially responsible for what happened to them and overlook situational causes. However, these same people may have the tendency to attribute their failures to environmental characteristics, and their successes to personal attributes (Johnson, Mullnick and Mulford 2002).

### **Invulnerability Theory**

The literature on Invulnerability Theory asserts that those who subscribe to the theory blame victims as a way to protect their own feelings of invulnerability (Andrew, Brewin, and Rose 2003). The Invulnerability Theory proposes that people that blame the victim do so to feel safe themselves. Friends and family members of crime victims sometimes blame the victim to reassure themselves. Thinking that a woman was raped because she walked home alone late at night and by never doing that myself I will not be raped is typical. The theory states that the victims remind people of their vulnerability. People do not want to think that they could lose control over their life or body. One can create a false sense of security by thinking that the victim caused the attack and this may reassure people that if they do not emulate the behavior of the victim, they will be invulnerable (The Canadian Resource Center 2009).



## **Violence Against Women**

Often in the case of intimate partner violence where a woman is abused by a male perpetrator, the woman is often blamed for the abuse perpetrated by her male partner. Males may blame their partner or claim that they deserved the abuse due to their offensive personality. Male offenders may also attribute their behavior to occupational stress or substance abuse, without taking ownership of their actions. These characteristics all work to minimize a perpetrator's culpability for abusive actions (Henning and Holdford 2006). It is also common for women to be blamed for being masochistic, withholding, asking for it, or deserving it. Questions, such as why didn't she just leave, are common, and reinforce the notion that a woman likes to be abused and therefore stays in the relationship. These are devaluing actions that remove the responsibility from the offender (Zur 2008). Blaming the victim releases the perpetrator from the responsibility for what was done.

## **Sexual Assault**

The most obvious manifestations of victim blaming appear in sexual assault cases. Adult female victims of sexual assault are often blamed for being provocative, seductive, suggestive, teasing, or asking for it. In contrast, male perpetrators in this myth are seen as helpless, sexually frustrated beings, responding to sexually provocative women (Zur 2008). These myths are very common when a friend or an acquaintance committed the rape. Acquaintance rape victims are disproportionately blamed as compared to stranger rape victims. This statistic is indicative of the myth that sexual assault can only involve strangers (The Canadian Resource Center 2009).

## Rape Culture

Women in the feminist movement in the United States in the 1970's coined the term Rape Culture. It was intended to show how society blames the victims of sexual assault and normalizes male sexual violence. Emilie Buchwald (1995), the author of the book "Transforming a Rape Culture" states that when society normalizes sexualized violence, it accepts and creates rape culture. In her book she claims that rape culture is a belief system that encourages male sexual aggression and supports violence against women. It is a society where violence and sexuality is eroticized. In this type of culture, women are susceptible to a variety of violence that ranges from sexual comments, non-conceptual sexual touching, sexual assault, and rape. A rape culture accepts and condones physical and emotional abuse against women as normal. In a rape culture, men and women have come to accept and believe that sexual violence is a fact of life. However, much of what we believe to be an inevitable part of life are values and attitudes that we have the power to change (Buchwald 1995).

Rape culture is:

- Encouraging male sexual aggression.
- Treating straight sexuality as the norm.
- Rape being used as a weapon.
- 1 in 33 men being sexually assaulted in their lifetime.
- 1 in 6 women being sexually assaulted in their lifetime.
- Victim blaming – a judge blaming a child for her own rape.
- Judges banning the use of the word rape in the courtroom.
- Media using euphemisms for sexual assault.
- Tasking victims with the burden of prevention.

- Boys under 10 knowing how to rape.
- Ruling that says women cannot withdraw consent once sex commences.
- Rape jokes (CCACA 2011).

## **Sexism**

According to The Encyclopedia Britannica, the definition of Sexism is “prejudice or discrimination based on sex or gender, especially against women and girls”.

Sexism can be a belief that one sex is superior to or more valuable than the other. It imposes limits on what men and boys can and should do and what women and girls can and should do. The concept of sexism was originally formulated to raise consciousness about the oppression of girls and women, although by the early 21st century it had sometimes been expanded to include the oppression of any sex, including men and boys, intersexual people, and transgender people. Sexism in a society is most commonly applied against women and girls. It functions to maintain patriarchy, or male domination, through ideological and material practices of individuals, collectives, and institutions that oppress women and girls on the basis of sex or gender (Encyclopedia Britannica 2017).

## **Misogyny**

“The extreme form of sexist ideology is misogyny, the hatred of women. A society in which misogyny is prevalent has high rates of brutality against women” (Encyclopedia Britannica 2017). Examples of such can be in the forms of domestic violence, rape, and the commodification of women and their bodies. Where women are seen as property or as second-class citizens, women are often mistreated at the individual as well as the institutional level. For example, a judge or a jury might determine that a woman who is the victim of rape is culpable because of the way she was dressed, acted, or because she had been consuming alcohol.

## CHAPTER 5

## THE FEMINIST MOVEMENT AND LIBERATION

*No woman gets an orgasm from cleaning the kitchen floor.*

*Betty Friedan*

**Sexual Liberation**

During the Victorian era, female sexuality was rarely discussed, and if it was spoken about at all, it was with disgust, causing women to behave as though the erotic characteristic of women did not exist (Stone 2011). It was believed that a complete absence of any sexual or erotic thoughts in the minds of women ensured virginity and fidelity since a woman who has not accepted her own sexuality wouldn't put it at risk (Harrison 1977). Despite the modern day sexuality connected to the picture and outfits of the Victorian woman, with her corsets and crinolines, this look was to guarantee a compliant woman that would tend to the home. In the middle and upper classes, women were valued for their beauty (Stone 2011). Soft hands, porcelain complexion, and dainty feet defined the ideal female beauty. Women stayed away from the sun, and wore the visually appealing clothing that served no other purpose than to emphasize an image of sexiness for men (Harrison 1977). Women in the Victorian era were excluded from institutional, intellectual discussions regarding sexual behavior even in scientific means (Cook 2011). Near the end of the Victorian era, several acts to improve the rights of women were implemented. Since prostitution was common and there was an abundance of men seeking sexual pleasure and a general lack of scientific knowledge on venereal disease, women's interest in sex was affected. The risk of getting pregnant kept women from having sex (Stone 2011). Changes were made in the late 1800's with the implementation of the Divorce Act of 1857, the Married

Women's Property Bill of 1857, Matrimonial Causes Acts of 1870, 1882, and 1893, with women gaining the right to property, legal proceedings and contracts, and the invention and widespread use of contraceptives beginning in 1871 (Cook 2011).

Slowly as the women of the Victorian times earned improved legal rights, the sexual revolution and the topic and importance of the female orgasm also took off. The government retaliated by implementing obscenity laws and restrictions to halt this newly found sexual freedom and education and the concept of women having sex for pleasure. Museums were one of the few places where detailed models of genitalia could be seen. The London Museum had to close its doors in 1873 due to anti-obscenity laws that disapproved with the material displayed (Stone 2011). Also, during this time where women were suddenly gaining rights, a set of pamphlets entitled "Aristotle's Masterpiece," focusing on fertility and describing sexual pleasure, and the female orgasm to be detrimental for conception to take place, were widely circulated. These pamphlets sparked the Obscene Publications Act of 1857 (Clark 2011).

Between the years 1871 and 1900, the birth rate fell, as a result of the new use of contraceptives. According to Harrison (2011) for the first time in history women were able to protect themselves from getting pregnant. Women could finally enjoy sexual intimacy with their husbands and no longer fear their sexuality (Harrison 1977). However, it took some time for men to adjust to this newfound self-respect, pleasure and social independence. Women used to be the property of man to be used for a one-sided object for pleasure. Now women became more demanding in regards to their sexual pleasure, and additionally a woman could now take legal action against a man. "During the late 1800s when the sexual hierarchy was shifting, the economy was in an instable state, adding to the anxiety of the men of Victorian England. Many men did not know how to react to the sudden aggressive nature in which women sought equal, emotional sexual relations" (Harrison 1977, 118).

## **The Sexual Revolution**

The Sexual Revolution, 1960's to 1980's, was a time of sexual liberation and traditional gender roles were rejected. It was a collective movement that challenged societal sexual norms. It became accepted to participate in extra-marital, monogamous, heterosexual sex. The first issue of *Playgirl* was released, and new contraceptives became available. Notably, the availability of the birth-control pill gave women power and control in how they had sex and with who, which was a freedom they had never experienced before (Crooks 2011). In the US, in the 1960's, intrauterine devices (IUDs) were now being manufactured, which gave women more choices in regards to how to prevent pregnancy. The sexual revolution also gave way to a new feminism and a movement for gay liberation (Crooks 2011).

Maintaining virginity through abstinence until marriage had gone out of fashion for several decades before the declaration of sexual liberation. It started slowly during the 1920s, as middle-class Americans converted from Puritan Victorianism to the more modern Freudianism and learned and accepted that women had sexual desire. Physicians and psychologists counseled the women of America that a happy marriage was achieved and maintained by mutual sexual satisfaction. Experts in the field urged women to explore and investigate their natural sexual desires but to start that voyage within the sanctity of marriage. Women gladly took the prescription but disregarded the fine print (Cohen 2012).

In the 1950's, 40% of women had had sex before marriage, compared to just 10 percent in the 1920's. Birth control was still illegal in several states, and laws had to change so that women could fully enjoy this new opportunity for sexual liberation. The availability of the Pill suddenly allowed American women to postpone marriage and having children, while still being sexually active. Women took advantage of this time of increased freedom and improved their status in the labor market. According to the economists Claudia Goldin and Lawrence Katz, the

increase in women's professional education happened exactly at the time the Pill became legally available to women of college age (Cohen 2012).

Before the start of the women's right movement, it was common and perfectly legal to discriminate against women in the workplace and employment. In many states, women were not allowed to get credit in their name. Many states habitually treated men and women differently in family matters and sexual violence against women was regularly tolerated. In the state of Florida, women were exempt from jury duty, leaving female defendants to be tried by an all-male jury of their peers. Ohio forced pregnant teachers to go on unpaid leave. In North Carolina, only virgins were allowed to file rape charges, and Maryland had no legal clause that would permit a wife to sue her husband who had beaten her to a pulp (Cohen 2012.)

In 1973, the Supreme Court's decision in *Roe v. Wade* gave women increased control of their fertility, something that had not been possible for women while abortion remained illegal. "There have been few pieces of legislation that have had a greater effect on the daily lives of Americans than that one clause of the Civil Rights Act of 1964. Title VII made it illegal for employers to discriminate against any individual on the basis of race, color, religion, sex, or national origin" (Cohen 2012, 17).

## CHAPTER 6

### THEORIES AND RESEARCH

*The great question that has never been answered and which I have not yet been able to answer, despite my 30 years of research into the feminine soul, is: What does a woman want?*

*Sigmund Freud*

#### **Sigmund Freud**

Certainly, Freud made numerous significant contributions to psychology yet there are many criticisms of his theories. One of the major criticisms is his view on women or more precisely the apparent lack of ideas and opinions about women. Sigmund Freud's views on women were controversial while he was still alive and his work continues to arouse strong debate even today. "Women oppose change, receive passively, and add nothing of their own", Freud wrote in a 1925 paper entitled "Some Psychological Consequences of the Anatomic Distinction Between the Sexes".

"Freud was a man of his times. He was opposed to the women's emancipation movement and believed that women's lives were dominated by their sexual reproductive functions. His male perspective of sexuality is understandable, but nonetheless problematic, as it marginalizes female sexuality" (Lehman 2003, 9-10). According to early Freudian theory, female sexuality is the same as male sexuality up until the phallic stage of psychosexual development. Since women don't have a penis, they experience penis envy. Penis envy is the female counterpart to Freud's concept of castration anxiety (Cohler and Galatzer-Levy 2008). In Freud's theory of psychosexual development, he suggests that young girls distance themselves from their mothers during the phallic stage and devote their affections to their fathers instead. According to Freud, this is a result of the girl realizing that she has no penis. Freud claimed that girls resent their



mothers for their lack of a penis and cannot forgive their mothers for her putting them at a disadvantage. Women's penis envy is a problem that would never be resolved according to Freud, therefore women would be condemned to underdeveloped superegos, indirectly suggesting that women will always be inferior to men, who in contrast are capable of having developed, functioning superegos (Schultz and Shultz 2009).

Freud insisted that the clitoral orgasm was adolescent and immature and that upon entering puberty when women begin having intercourse with men women should transfer the center of orgasm to the vagina. The vagina, it was assumed, was able to produce a similar, but more mature orgasm than the clitoris. Much work was done to elaborate on this theory, but little was done to challenge the underlying assumptions (Koedt 1970).

Freud developed his revolutionary talk therapy mainly as a result of his work with Bertha Pappenheim, who is known as Anna O, who was suffering from what was referred to as hysteria in women at the time. Anna O experienced a variety of symptoms that included hallucinations, amnesia, and partial paralysis. Despite Freud already having a rigid belief system regarding human sexuality, he discovered an enormous problem of women being frigid. Freud recommended psychiatric care as the cure for women suffering from frigidity (Cherry 2012).

Pappenheim described her feelings in sessions with Joseph Bruer, one of Freud's colleagues. This process of talking about her problems seemed to alleviate her symptoms, which led her to call this method the talking cure. Pappenheim continued to become a social worker, and her contributions were crucial to the women's movement in Germany. Freud initially believed that the causes of hysteria were rooted in childhood sexual abuse. He later abandoned this theory and instead emphasized the role of sexual fantasies in the development of a variety of neuroses and illnesses (Cherry 2012).

Freud's was infamous for his inadequate understanding of women, but he did make

significant contributions to what was understood at the time about women when he first came on the scene. In Freud's time, it was highly unusual to acknowledge that women had a sex drive and sexual desire. Much less to say that the repression of their sexual desire could make them hysterical, explained historian Peter Gay (Cherry 2017).

### **Masters & Johnson**

Researchers William Masters (1915-2001) and Virginia Johnson (1925-2013) combined the biological and the feminist theories for their research of the human sexual response, which they conducted from 1957 until the early 1990s. Before their research, there had been little research done in the field of female sexuality. When their two books “Human Sexual Response, and Human Sexual Inadequacy” were published, female sexuality was brought into public awareness. In their books, they proposed that female sexuality should be celebrated and they frequently mentioned the female response before the male response. They introduced the notion that women should be able to take an authoritative role in addressing their or their partner’s sexual disorders, and they opposed the concept that women’s sexuality was a reflection of men’s sexuality (Robinson, 1976).

Masters and Johnson developed a four-stage model of arousal that was composed of excitement, plateau, orgasm, and resolution. Using a biological approach, they were able to research and study the stages of female arousal, and the physiological changes that occur during each stage of arousal (Hockenbury 2011). They discovered that many changes occur in women during the arousal. During the first, excitement phase, there is an increase in pulse rate, blood pressure, breathing, swelling of the clitoris, a widening of the vaginal lips, lubrication of the vagina, and increased sensitivity of the nipples. During the plateau phase, women continue to have an increase in pulse rate, breathing, and a tightening of the vaginal opening occurs. The

shortest phase is the orgasm, during which women experience rhythmic contractions of the muscles of the vagina and uterus. During the last, resolution phase, the physiological changes return to normal levels (Hockenbury 2011).

Masters and Johnson also observed and studied a problem some women experienced; the failure to achieve an orgasm. Masters and Johnson found that 50 to 60% of the women were unable to reach an orgasm during coitus (Klein 1992). They accredited this inability to anxiety, lack of or poor communication between partners, lack of trust, and low-self esteem. Masters and Johnson coined the term primary orgasmic disorder, and it was defined as a sexual disorder. Primary orgasmic disorder is characterized by a complete lifelong lack of orgasms. This lack of orgasms is present during all sexual activities, including masturbation (Klein 1992). Before Master and Johnson's defined this disorder, women were believed to be able to achieve an orgasm during masturbation as they would not be experiencing anxiety, which may be the case when with a partner. It became evident that women may require treatment or therapy to have fulfilling sexual experiences.

Masters and Johnson were quite controversial as their studies involved direct observation. However, it allowed a higher degree of accuracy and attention to their findings. Their research on how exactly and in what ways women become aroused, and the difficulties women may be experiencing in the arousal process were closely measured and studied. Their research was extremely beneficial in educating the public and creating awareness on the topic of female sexuality as well as the importance of helping women overcome their sexual difficulties (Klein 1992).

### **Alfred Kinsey**

Alfred Kinsey wrote the Kinsey Report, the largest documentation of sexuality in the

United States at the time of its publication. According to Kinsey's statistics, more than 90% of females had indulged in sexual petting, 66% had dreamt about sex, 62% had engaged in masturbation, 50% had had premarital sex, and 26% had had extramarital sexual encounters. Kinsey used these numbers to strongly argue that women were no less sexual than men, and had as much right to seek out and expect sexual satisfaction. He further asserted that a satisfying, libidinous sex life was essential to marital bliss, and that women who had had sex before marriage were more likely to have happy, sexually satisfying marriages than those who had not (The Kinsey Institute 2017).

“Sexual Behavior in the Human Female” came out in September of 1953 to a second massive media blitz, coordinated by Kinsey himself, who was featured on the cover of Time magazine. He received many letters about the book, some critical and others anguished pleas for help, but many simply from women who wanted to thank him for his work. But if Kinsey expected his book to convince the nation that women were just as sexual as men, he was wrong. Many news outlets did not even report the book's publication. Most of those that sought to defend the purity and sanctity of American females from what they saw as Kinsey's assault, describing his work in such terms as an indictment of American womanhood. Furthermore, critics that bothered to read the tables typically pointed out that even Kinsey's data showed that females were not as sexually active as males (The Kinsey Institute 2017).

### **The Myth of the Vaginal Orgasm**

In 1970, Anne Koedt (1970), a founder of New York Radical Feminists, published *The Myth of the Vaginal Orgasm*. She claimed that men had sold women a bill of goods about their desires and biology. She declared women's right to sexual pleasure and argued that men had been doing it wrong and claimed that women didn't need men for sex at all (Cohen 2012). Koedt stated that whenever female orgasm and frigidity are discussed, a false distinction is made

between the vaginal and the clitoral orgasm. Men had defined frigidity as the failure of women to have vaginal orgasms. Koedt argued that although there are many areas for sexual arousal, there is only one area for sexual climax, which is the clitoris. The vagina, on the other hand, is not a very sensitive area and is not constructed to achieve orgasm. It is the clitoris that is the center of sexual sensitivity, and which is the female equivalent of the penis. She proposed that the current understanding of female frigidity is based false assumptions about female anatomy. As a result, the experts declared frigidity a psychological problem of women. Koedt stated that all orgasms are extensions of sensation from the clitoris, and the clitoris is not stimulated sufficiently in the conventional missionary sexual position, and hence women are left frigid (Cohen 2012).

The most common cause to reach an orgasm for most people is physical stimulation. One can also be stimulated through primarily mental processes. Some women, for example, may achieve an orgasm through sexual fantasies, or fetishes. Koedt maintained that even though the stimulation may be psychological, the orgasm manifests itself physically and the orgasm takes place in the sexual organ equipped for sexual climax, the clitoris (Koedt 1970). The orgasm sensation may also differ in intensity, some may be more localized, and some more diffuse and sensitive. But they are all clitoral orgasms, which challenges the conventional view of sex. Men experience orgasms by friction in the vagina, not the clitoris. Women have thus been defined sexually regarding what pleases males, but women's biology has not been properly analyzed. Instead, Koedt claims that we have been fed the myth of the liberated woman and her vaginal orgasm - an orgasm that in fact does not exist (Koedt 1970).

As women, we must redefine our sexuality. We must discard the conventional concepts of normal sex and create new guidelines. We need to include and take mutual and sexual enjoyment into consideration. We must demand that if certain sexual positions are traditionally defined as standard but are not mutually conducive to orgasm, they should be re-defined. New

techniques must be used or devised which transform this particular aspect of women's current sexual exploitation. Horrible damage was done to the mental health of many women, who suffered silently with shame and self-blame as a result of the inability to achieve an orgasm (Koedt 1970).

## CHAPTER 7

### THE HYPOTHESIS

*There are two possible outcomes: if the result confirms the hypothesis then you've made a discovery. If the result is contrary to the hypothesis, then you've made a discovery.*

*Enrico Fermi*

#### **Development of the Hypothesis**

Having been shamed myself as a young girl and as an adult woman around my sexuality, perceived sexuality, for my appearance, my body, my expression, or lack thereof, of my femininity and sexuality, I set out to find out more about how society continues to shame girls and women in our society today. I wanted to know how common it is and who typically perpetrates the shaming? How does such shaming affect women throughout their lives, as adult women in their day-to-day lives, and in their intimate relationships? How does shaming affect a woman's ability to enjoy sex and her ability to feel free to express her femininity, sensuality and sexuality? How might it affect a woman's sense of self such as her body image and self-esteem?

I developed a survey for women only, to gather data from a variety of women from different age groups, cultural, and religious backgrounds to determine prevalence and correlation between sexual shaming and sexual dysfunction, intimacy issues, depression, self-esteem or body image issues in women. I created my survey and launched it using Survey Monkey, an online survey service. I sent a link to the survey to 239 women that are friends, acquaintances and connections using social media and email. I asked these women to feel free to forward the link to their female friends and acquaintances. In total, 232 women completed the survey.

## Introduction to Survey

Thank you for participating in this quick survey designed to be taken by women only. It will take no more than 2 minutes to complete. Please know that all responses will be handled confidentially and anonymously. See Survey Monkey Policy [here](http://help.surveymonkey.com/articles/en_US/kb/Are-my-survey-responses-anonymous-and-secure).

[http://help.surveymonkey.com/articles/en\\_US/kb/Are-my-survey-responses-anonymous-and-secure](http://help.surveymonkey.com/articles/en_US/kb/Are-my-survey-responses-anonymous-and-secure). (Survey is no longer active).

My name is Ingrid D. Thrall and I am a Ph.D. candidate in the Doctorate Program in Clinical Sexology at the American Academy of Clinical Sexology. I am in the process of writing my dissertation on “Shaming and Suppression of Female Sexuality” and I am collecting data for that purpose.

Shaming around female sexuality occurs in a societal, cultural and religious context. Girls and women are often shamed for their appearance and perceived sexual activity. Shaming can be in the form of criticism about one's body, or what one is wearing; too revealing or too plain, or how one behaves; too outgoing and gregarious or too quiet etc. Girls and women are encouraged to be pretty and sexy but are also discouraged from being too sexy as this could make her perceived as promiscuous and make her the target for sexual assault. Past research has shown that shaming of girls and women correlate with eating disorders, depression and sexual dysfunction.

This research project aims to gather data from a variety of women from different age groups, cultural and religious backgrounds to determine prevalence and correlation between sexual shaming and sexual dysfunction, intimacy issues, depression, self-esteem, or body image issues in women. I am interested in exploring if males or females more often perpetrate shaming of women. I am also interested in exploring if women, who have been victims of body or sexual



shaming feel that this has affected them as adult women, and if they have a desire to receive counseling to heal this part of themselves.

Through advocacy, education and bringing awareness to this issue and by teaching our children that body or sex shaming is never OK, I hope we can change the current social norms. I believe it is crucial that as women, we stand up for and support each other to feel empowered, and comfortable around our femininity and sexuality.

### **The Survey**

---

1. By clicking YES you attest that you are a female over 18 years of age.

YES

---

2. What is your age?

18 to 24

25 to 34

35 to 44

45 to 54

55 to 64

65 to 74

74 or older

---

3. What is your cultural/ethnic background?

- Non Hispanic White or Euro American
  - African American
  - Caribbean
  - Latina or Hispanic American
  - East Asian or Asian American
  - South Asian or Indian American
  - Middle Eastern or Arab American
  - Native American/Alaskan or Pacific Islander
  - Other (please specify)
- 

4. Did you grow up in a home where religion was very important? (If your answer is NO go to Question 6.)

- YES
  - NO
- 

5. If you answered YES for question 4, what was your religious affiliation?

- Protestant Christian
- Catholic
- Greek/Assyrian Orthodox
- Judaism
- Muslim
- Hindu
- Buddhist

Other (please specify)

---

6. Were you ever shamed about your body, sexuality or perceived sexuality as a child, adolescent or young adult? (If your answer is NO you have completed the questionnaire. Scroll to bottom and click DONE.)

YES

NO

---

7. Who did the shaming? (Chose multiple answers if applicable.)

Mother

Father

Sister

Brother

Other female family member

Other male family member

Female friend/peer

Male friend/Peer

Female teacher/mentor

Male teacher/mentor

Other (please specify)

---

8. Was the shaming culturally based?

YES

NO

---

9. Was the shaming religiously based?

YES

NO

---

10. Was the shaming based on societal norms on how women should behave and look like?

YES

NO

Other (please specify)

---

11. Do you feel that this shaming has affected you as an adult woman? (If your answer is NO you have completed the questionnaire. Scroll to bottom and click DONE.)

YES

NO

---

12. If so, in what way? (Chose multiple answers if applicable.)

Body image

Self esteem

Sexual/Intimate relationships

Other (please specify)

---

13. Do you have a desire to work on and heal this part of yourself by seeking counseling? (You have now completed the survey scroll down and click DONE.)

YES

NO

---

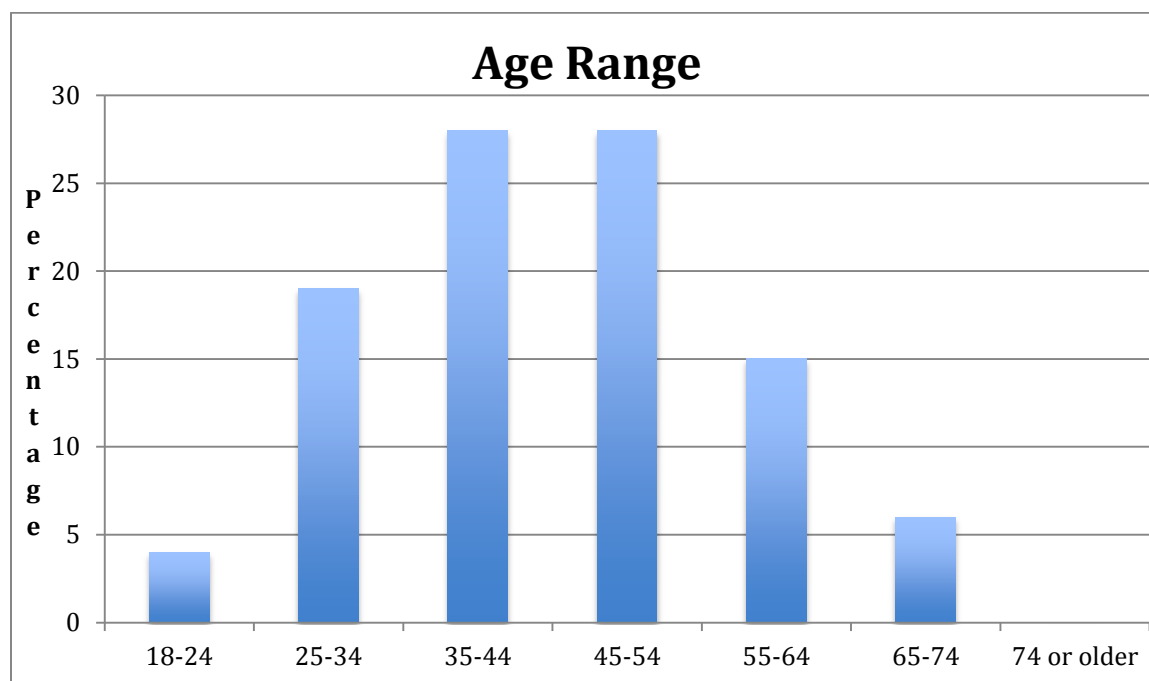
## CHAPTER 8

## DATA ANALYSIS AND FINDINGS

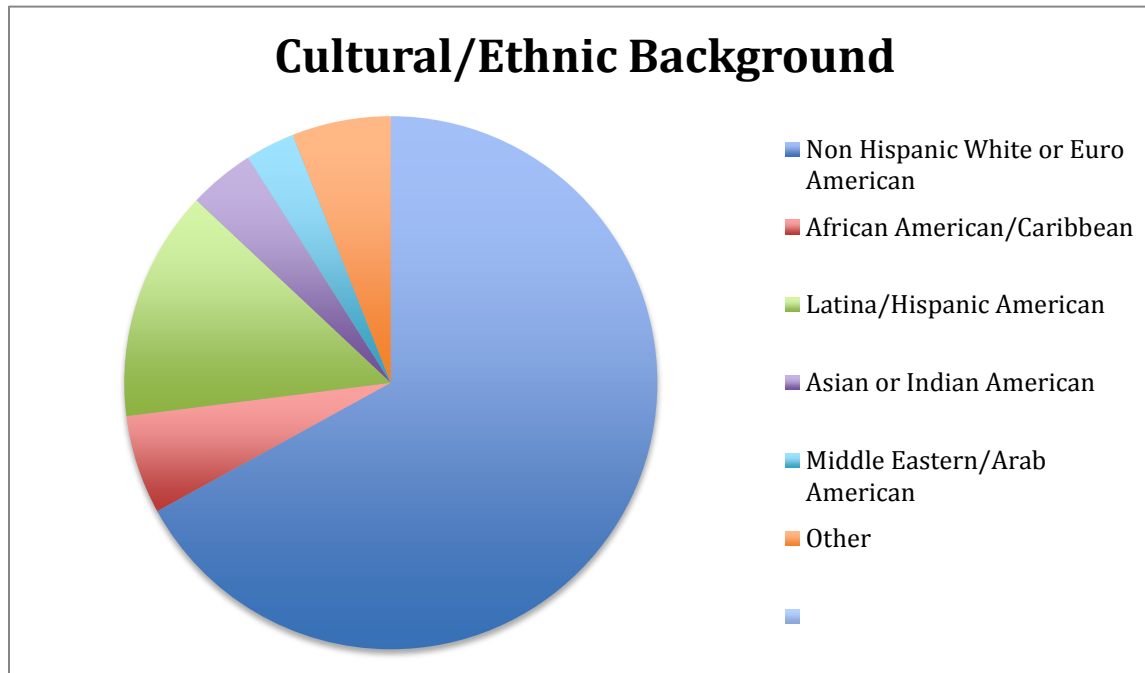
**The results of the survey**

Question 1: 100% of participants confirmed that they were female.

Question 2: The following bar graph represents the age ranges of the women that participated in the survey:

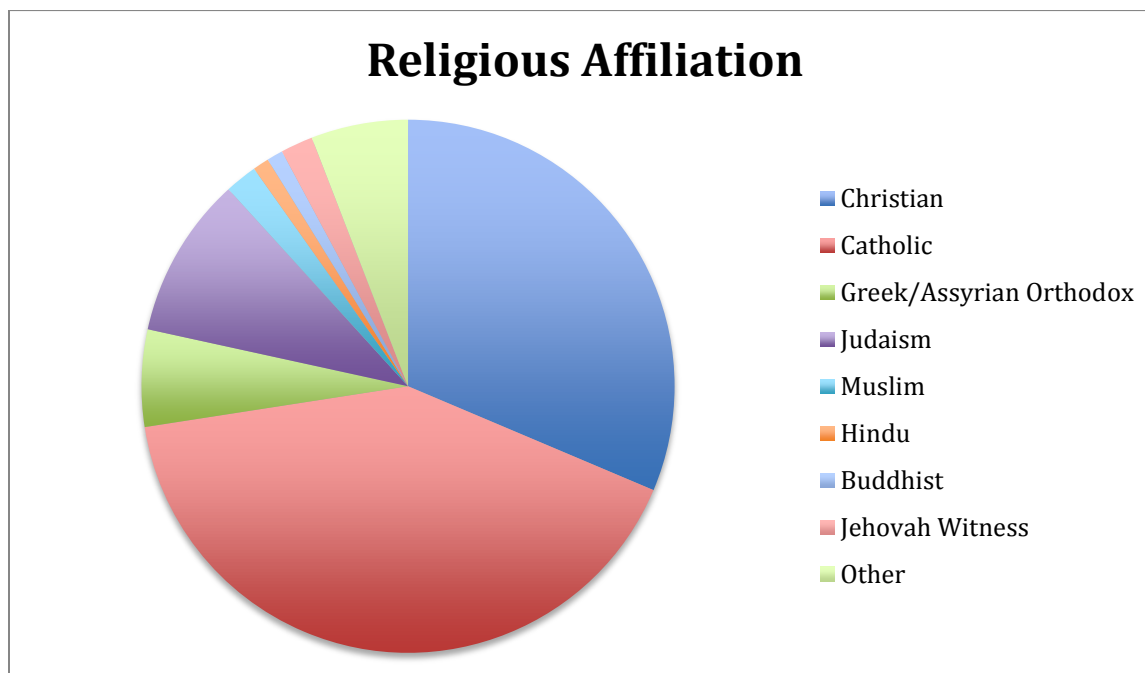


Question 3: This Pie Chart represents they Cultural/Ethnic background of the participants.



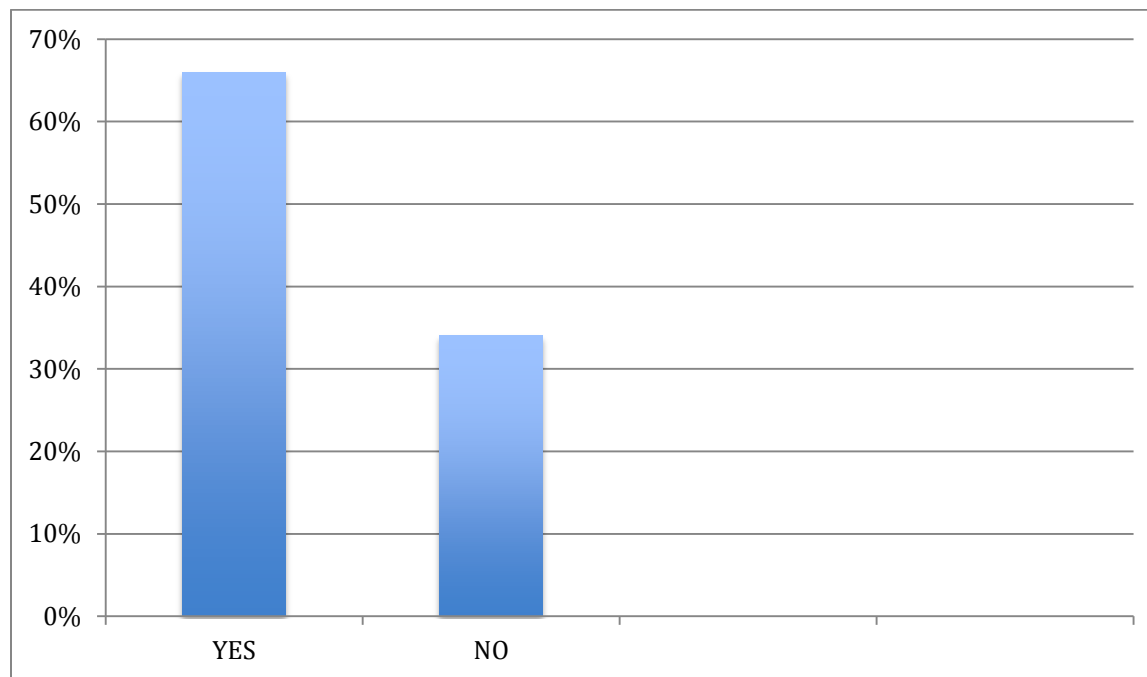
Question 4: Did you grow up in a home where religion was important? 49% answered YES. 51% answered NO.

Question 5: If religion was important growing up what was the religious affiliation?

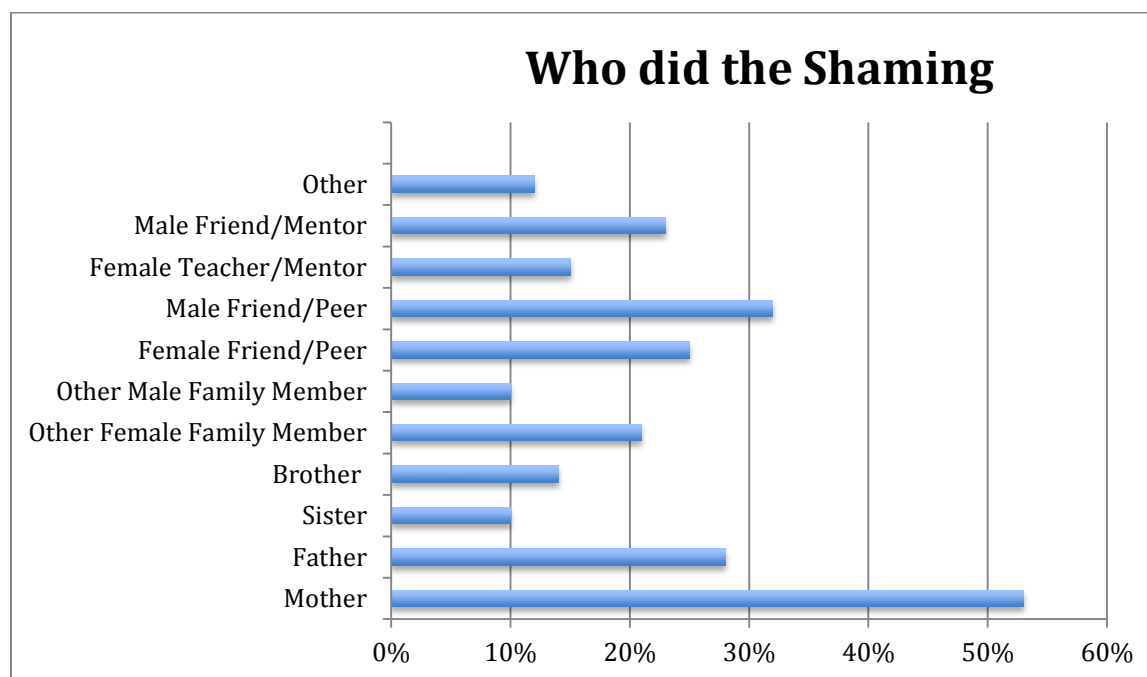


Question 6: Were you ever shamed about your body, sexuality or perceived sexuality as a child?

66% answered YES. 34% answered NO.



Question 7: Who did the shaming?



Question 8: Was the shaming culturally based?

42% responded YES, 58% responded NO.

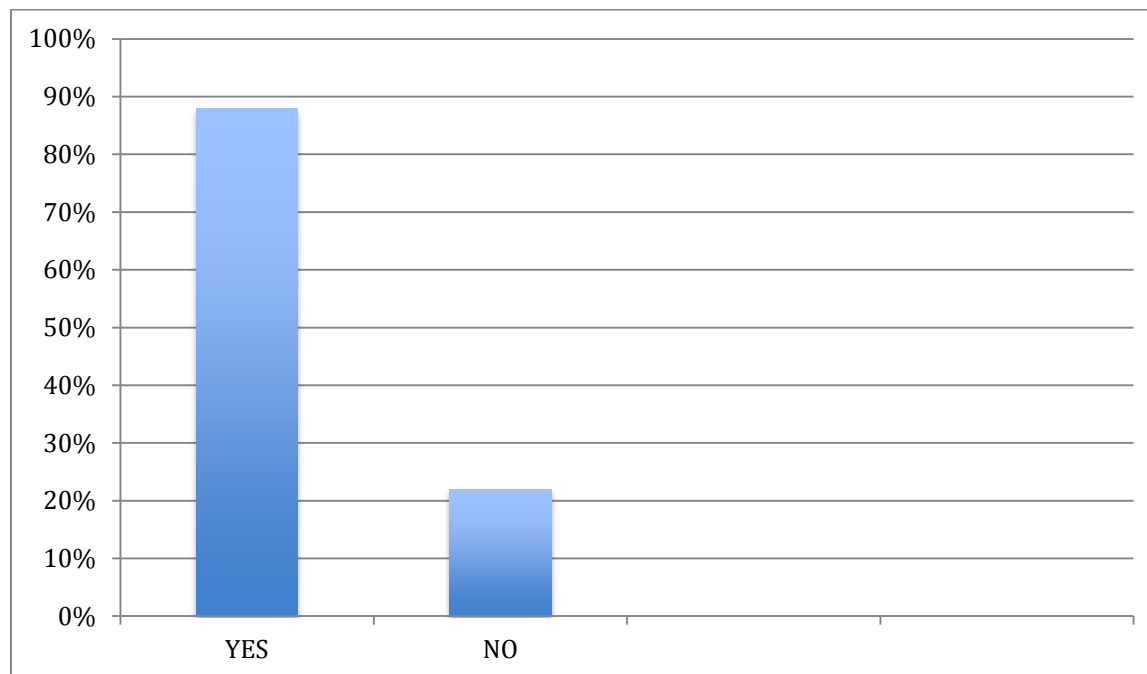
Question 9: Was the shaming religiously based?

21% responded YES, 79% responded NO.

Question 10: Was the shaming based on societal norms on how women should behave and look like?

88% responded YES, 12% responded NO.

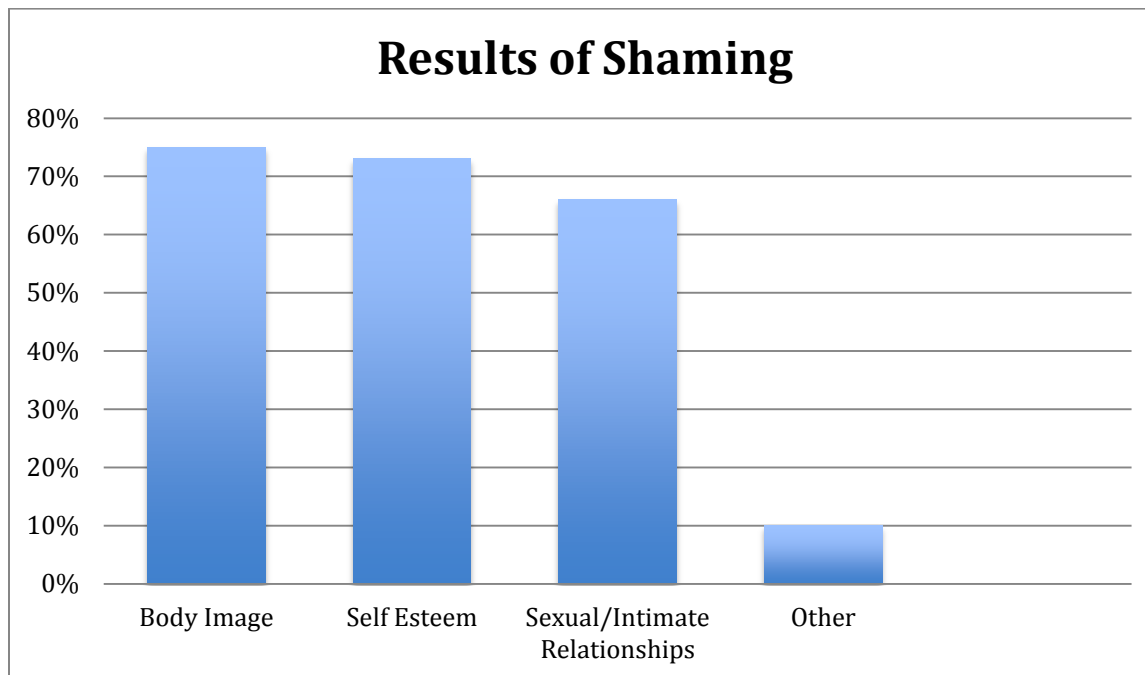
Question 11: Do you feel that this shaming has affected you as an adult woman?



84% responded YES, 16% responded NO.

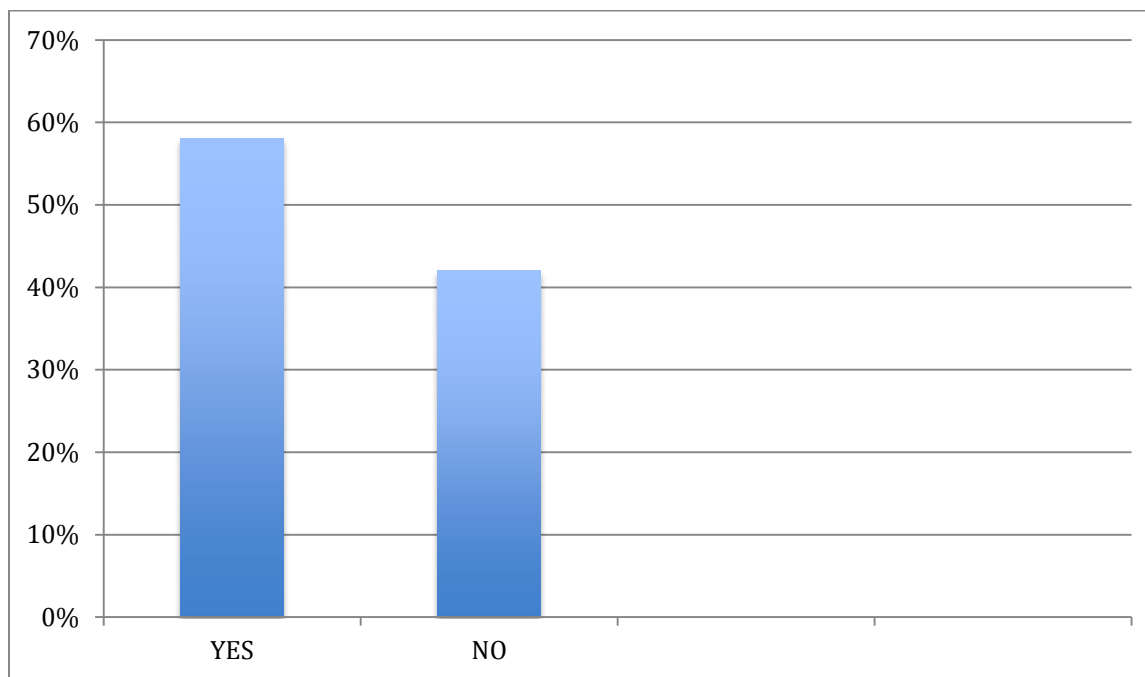


Question 12: If shamed, in what way?



Question 13: Do you have a desire to work on and heal this part of yourself?

58% responded YES. 42% responded NO.



## CHAPTER 9

## SHAME, HEALING AND CONCLUSION,

*“Women who love themselves are threatening; but men who love real women, more so.”*

— Naomi Wolf, *The Beauty Myth*

As evident by the findings from the results of the survey, my hypothesis that sexual shaming of women is more prevalent than we as a society would like to admit and it is causing long term negative effects for women, was indeed the case. These days women are striving for gender equality and equal rights for women, not only when it comes to their bodies, reproductive rights, but also in relationships, and in the work place. It was an eye-opening realization that as many as 66% of the women that participated in the survey claimed that they felt that they had been victims of shaming around their bodies and sexuality. More alarmingly, 84% of those women admitted to the fact that the shaming has affected them adversely as adult women around their self-esteem, body image, and also in their intimate, sexual relationships. Another upsetting statistic evident by the results of this survey is that 53% of the shaming is typically perpetrated by the mother. This statistic might suggest that many women repeat the cycle of shaming and dysfunction based on their own shaming and issues around their own sexuality and pass it on to their children. This particular finding suggests that education and awareness around these issues and how we raise our sons and daughters is desperately needed.

**Sexual Shame**

Human beings are naturally and innately sexual beings. Unfortunately, in our society many of us have been taught from a young age to see it as wrong, bad or evil, and to hide it or

suppress this part of our nature. The adverse effects of this conditioning can be far reaching and can last a lifetime. Chronic shame typically originates during childhood. Identifying the memories and processing the experiences of the shaming can help relieve it. Taking part in new experiences of self-compassion that create a sense of self-worth can also be helpful to heal the pain. Often, childhood shame is of a sexual nature that was, in the child's perception or understanding, not accepted by or acceptable to adults (Bromberg 2013). "Shame is the uncomfortable or painful feeling that we experience when we realize that part of us is defective, bad, incomplete, rotten, phony, inadequate or a failure" (Whitfield 1987, 44).

Shame is the culprit for a plethora of problems such as self-criticism, self-blame, and self-neglect. Shaming often creates the belief that one is not good enough and does not deserve good things in life. Individuals that carry shame often partake in self-destructive behaviors such as cutting, alcohol and drug abuse, self-sabotaging behavior such as starting fights with loved ones, sabotaging jobs, perfectionism and most importantly, continuing to repeat the cycle of abuse (Engel, 2013).

Brené Brown, a social worker and researcher, defines shame as a fear of disconnection, as "the intensely painful feeling or experience of believing that we are flawed and therefore unworthy of love and belonging – something we've experienced, done, or failed to do makes us unworthy of connection. A feeling, or a sense of shame instinctively tells us we are not worthy, not good enough or important enough" (Brown 2012, 69).

Children are innocent sexual adventurers that instinctively touch their genitals with no sense of shame, guilt or embarrassment. For children, it is a journey of discovery, curiosity, wonder, and a feeling of pleasure. Somewhere along the way, we were made to feel embarrassed or guilty about our body and natural sexual curiosity. "Our shame seems to come from what we do with the negative messages, affirmations, beliefs and rules we hear as we grow up. We hear these

from our parents, parent figures and other people in authority, such as teachers and clergy” (Whitfield 1987, 46).

Childhood sexual abuse is incredibly shaming but is not the only form of childhood abuse that shames a child. We often learn the emotion of sexual shame from unintended parents whose attitudes towards sex most likely came from their own parents who inherited Victorian taboos and religious misinformation. “This is a typical example of how childhood trauma is transmitted in the form of emotional abuse from one generation to the next” (Whitfield 1987, 46). Parents often use shaming and humiliation to discipline their children. “Over and over, we hear messages like ‘Shame on you! You’re so bad! You’re not good enough!’ We hear them so often, and from people whom we are so dependent, and to whom we are so vulnerable, that we believe them. And so we incorporate and internalize them into our very being” (Whitfield 1987, 46). When we internalize a statement, or a conceptualization, and think it often enough and long enough, it becomes our truth, albeit an erroneous one. “As if that were not enough, the wound is compounded by negative rules that stifle and prohibit the otherwise healthy, healing and expression of our pains. Rules like ‘don’t feel, don’t cry’ and that we are bad, and that we are not to talk openly about any of it” (Whitfield 1987, 46).

Addiction treatment specialists are usually aware of the high correlation between shame and addiction. Sexual shame is one of the most powerful and devastatingly painful types of shame. Not so evident, however, is the powerful role that sexual shame and adult romantic, sexual behavior often play when it comes to addiction. Patrick Carnes (2011) has stated, that sexual secrets are often the cause of our greatest emotional shame, yet they are the secrets we are least likely to reveal (Carnes 2001).

Sexual shame originates in childhood, most often as the result of early sexual trauma, which can be in the form of overt, covert, or even societal, coupled with emotional abuse and

neglect. Children that have been shamed sexually, start to self-medicate to numb the inconvenient and painful feelings fairly early in life, usually during adolescence and sometimes even before. Body image issues, shame about being looked at and touched inappropriately, and feeling uncomfortable about too much affection and trust often begin very early in childhood (Weiss 2014). For the unlucky kids from adverse family-attachment constellations, the self-medicating usually involves alcohol, prescription or illicit drugs. Children with sexual trauma or sexual shaming experiences also realize that they can self-soothe with sexual behaviors including sexual fantasy and masturbation. Some children exhibit behaviors such as eroticizing and reenacting their sexual shame which tends to exacerbate their already existing sexual shame, creating an even deeper sense of emotional discomfort and a more powerful need and desire to escape and dissociate (Weiss 2014). Often children, who have been traumatized as young kids, will in adolescence or adulthood reenact the trauma in the form of compulsive sexuality. These wounds lay the groundwork for the human psyche to continue to replay unconsciously, the scenario over and over again as an adult. It is as if the brain becomes psychologically stuck or locked in something that feels familiar and then it creates compulsivity. The trauma experienced as a child is often acted out in adulthood. Psychologists believe that these compulsive behaviors are opportunities to get the help needed as an adult that the child was unable to get as a child (Juergensen 2013).

When it comes to women, despite the progress in the area of women's liberation and the huge leaps made in our society toward gender equality, the majority of women still feel trapped in traditional gender norms constructed by society. Shaming women for their appearance, sexuality, perceived sexuality, dress, and behavior, deepens the existing culture that blames women when they become victims of sexual assault and rape, and it removes the blame from the perpetrators. It also conceals the deeper underlying issue, or deeply dysfunctional society when it

comes to sex.

Slut shaming induces shame around sexual expression, which is detrimental to girls and women as well as for boys and men. Men deserve sexual partners that feel comfortable expressing their sexual wants and needs which is crucial for a healthy and happy intimate relationship. Shame is an extremely powerful emotion. When we think back to the shaming experiences of our childhood, we are often brought right back to that painful moment, almost as if we are experiencing it right here and now. Shame is that profound feeling within us, that we are somehow bad and unworthy (Engel, 2013). Many women engage in this endless shame spiral because they don't feel like it's OK to be themselves sexually, says Carol Queen, Ph.D., staff sexologist for Good Vibrations. The act of getting busy leaves women feeling guilty, ashamed, even confused, and there is nothing worse than your sex life being extinguished by lingering guilt. The remedy for shame is compassion. As a society, we need to heal the shame around our sexuality and our bodies. To heal it, we need to openly talk about it.

## **REBT**

According to the Albert Ellis institute:

Rational Emotive Behavioral Therapy (REBT) is the pioneering form of cognitive behavior therapy developed by Dr. Albert Ellis in 1955. REBT is an action-oriented approach to managing cognitive, emotional, and behavioral disturbances. According to REBT, it is largely our thinking that is often erroneous belief systems about events that leads to emotional and behavioral upset. With an emphasis on the present, individuals are taught how to examine and challenge their unhelpful thinking, which creates unhealthy emotions and self-defeating and self-sabotaging behaviors.

REBT is a practical approach to assist individuals in coping with and overcoming adversity as well as achieving goals. REBT places a good deal of its focus on the present. REBT addresses attitudes, unhealthy emotions, such as unhealthy anger, depression, anxiety, guilt, etc. as well as maladaptive behaviors such as procrastination, addictive behaviors, aggression, unhealthy eating, sleep disturbance, etc. that can negatively impact life satisfaction. REBT practitioners work closely with individuals, seeking to help identify their individual set of beliefs, attitudes, expectations and personal rules that frequently lead to emotional distress.

REBT then provides a variety of methods to help people reformulate their dysfunctional

beliefs into more sensible, realistic and helpful ones by employing the powerful REBT technique called disputing. Ultimately, REBT helps individuals to develop a philosophy and approach to living that can increase their effectiveness and satisfaction at work, in living successfully with others, in parenting and educational settings, in making our community and environment healthier, and in enhancing their own emotional health and personal welfare. REBT focuses on a specific type of cognition, namely rational and irrational beliefs. Rational beliefs are logically, empirically, and/or pragmatically supported, and generate functional consequences, e.g., functional feelings, adaptive behaviors, healthy psychophysiological reactions. Irrational beliefs are illogical, non-empirical, and/or non-pragmatic, and generate dysfunctional consequences, e.g., dysfunctional feelings, maladaptive behaviors, and unhealthy psychophysiological reactions (Albert Ellis Institute 2014).

### **Self-Compassion Theory**

According to Beverly Engel, there is a cure for shame. The answer is compassion (Engel 2013). Recently, people have started taking an interest in the concept of compassion. This is very likely the result of several recent studies that have revealed surprising positive results concerning compassion. Studies have found that from birth until death, the kindness, support, encouragement, and compassion shown to us by others has a significant impact on how our brains, bodies, and sense of wellbeing develop. Especially in early life, love, compassion, and kindness, affect how some of our genes are expressed (Engel 2013).

Research conducted recently on the connection between shame and compassion has shown that neurobiology correlates to feeling unlovable and shame somehow gets stuck in our neural circuitry. Moreover, we now know about the neural plasticity, the ability of the brain to grow new neurons and new synaptic connections so that we can proactively repair the shame memory by adding new experiences of self-empathy and self-compassion (Engel 2013).

Recently there has been breakthrough research done on self-compassion by researcher and social psychologist Kristin Neff from the University of Texas at Austin. Among other things, Neff discovered that self-compassion might act as an antidote to self-criticism, a primary

characteristic of those who experience intense shame. In her research, it was found that "self-compassion is a powerful trigger for the release of oxytocin, the hormone that increases feelings of trust, calm, safety, generosity, and connectedness" (Neff 2007, 48). Participants were asked to softly stroke themselves on the forearm. An increase in oxytocin was measured in the participant's blood levels immediately after the self-stroking (Neff 2007). Self-criticism, on the other hand, has a very different effect on our body. The amygdala is in charge of the response to, and the memory of, emotions, especially fear. It quickly detects threats in the environment. The fight-or-flight response is activated when we experience a threatening situation. The amygdala makes sure that blood pressure increases and adrenaline is released, as well as the hormone cortisol, which mobilizes the physical strength and energy needed to confront or avoid the threat (Engel 2013). The Amygdala, even though designed by evolution to react to physical threats and attacks also responds to emotional attacks from others and ourselves. Over time, increased cortisol levels lead to depression by depleting the various neurotransmitters involved in the ability to experience pleasure.

Self-compassion is originally a concept derived from Buddhist psychology (Salzberg 1997). Recently there has been increased research and attention to the subject due to the strong association with mental health. Dr. Kristin Neff has proposed that self-compassion entails being "moved by one's own suffering and treating oneself in a caring and empathetic way just as one would treat a good friend. Self-compassion is relevant to all experiences of suffering, including those caused by perceived flaws, personal inadequacies, failures, or emotionally distressing life events" (Neff 2007, 34).

Research suggests that self-compassionate individuals are psychologically healthier than those who lack self-compassion. For instance, a recent meta-analysis by MacBeth and Gumley (2012) documented a large effect size for the relationship between self-compassion and common



expressions of psychopathology such as depression, anxiety, and stress. Self-compassion is also correlated to positive psychological strengths such as happiness, emotional intelligence, optimism, wisdom, curiosity, and personal initiative (Neff et al. 2007).

According to Engel (2013) when we offer genuine compassion to another, we join that person in his or her suffering. Self-compassion starts by connecting with one's own suffering. Unfortunately, most of us do not feel comfortable doing this. Most of us don't want to feel the pain of our past and prefer to put it behind us. By suppressing the pain, however, we are not able to heal the emotions that go hand-in-hand with the suffering, such as the pain, fear, anger, and especially, the shame. The same thing happens when we experience painful and shaming experiences in the present. Instead of slowing it down to acknowledge our suffering in the moment, we try to move on as quickly as possible. Self-compassion challenges us to start treating ourselves and speak to ourselves with the same kindness and compassion we would treat a good friend or a beloved child. It may help to think of ourselves as the small child, who did not get the love and compassion he or she deserved and needed. Also, self-compassion helps us feel less isolated from others. Self-compassion helps us to recognize our common humanity (Engel 2103).

### **Feminist Theory**

The focus of the Feminist Theory is on empowering women to discover and break the stereotypes and traditional, societal norms that women adopt that may be stunting their development and growth. This theory developed as a result of the women's liberation movement of the late 1960's. Feminist therapy focuses on strengthening women to be more assertive, to improve communication and relationships, and increase self-esteem. One of the main components of the feminist theory is to assist women in developing equal and mutual

relationships built on care and support. Feminist therapists maintain that the patient is the expert on his or her issues and the therapist will assist the patient in developing the tools needed to reach his or her fullest potential as a unique and valuable individual (Mahaney 2007). Contrary to common belief, feminist therapy is not just for women, but men can benefit as well. Men also have to deal with social and gender role constraints such as the demands of strength, autonomy, and competition. More so, men are limited by the societal expectation that they should not express vulnerability, sensitivity, and empathy. In that sense men and women alike are exploited by a patriarchal society and gender stereotypes. Men can benefit from therapy with a feminist approach to challenge their conditioned traditional male behavior and adapt new skills to help them understand and explore issues involved with emotions, intimacy, and self-disclosure (Mahaney 2007).

Feminist psychology developed as a grassroots movement from the influences of the women's liberation movement of the 1960's. No single theorist can be named as the founder of feminist therapy. Feminists strived to keep certain elements of some psychological theories that worked well, but tried to expel sexist aspects. The Feminist Theory proposes that many of the common difficulties that women endure in society, and the roles they have been conditioned to play may be blocking their growth and development (Mahaney 2007).

One of the cornerstones of Feminist Therapy is change, rather than adjustment. The aim of therapy is to empower women by helping them identify the impact of gender issues in their lives. A core concept is equality, and so the relationship between the patient and the therapist is an equal one. The therapist provides guidance, support, and new information. The patient is seen as having the ability and power to create his or her own desired outcome. Gaining personal strength and power is a fundamental concept. The task of the therapist is to help individuals explore and understand what is causing dysfunction and unhappiness and then to help develop

strategies to overcome these difficulties (Corey 2001).

### **Healing the Shame**

Sexual shame and guilt are learned emotions and they can be unlearned. The process of identifying a self-defeating and erroneous belief system and unlearning a long-term habit is hard. It is, however, required to free oneself from the shackles of sexual shame and guilt that holds us back from feeling comfortable with our sexuality. Being able to express ourselves and living to our fullest potential in relation to our own bodies and in relationship is the reward. Whenever sexual shame is the issue, it is best dealt with, in the presence of an empathetic and supportive therapist either in an individual setting or within a trauma support group.

## CONCLUSION

First and foremost, having worked in an adult community mental health, outpatient setting, and having encountered countless female survivors of sexual shaming, trauma, domestic violence, assault, and rape, indisputably the most important component for progress and success is the therapeutic relationship between the patient and the therapist (Wright and Davis 1994). An absolute necessity to create congruency and trust, and for progress to occur, is a therapeutic relationship deeply rooted in, and based on unconditional positive regard.

My approach is based on several techniques and theories and what I learned while earning my degree in Mental Health Counseling, and Clinical Sexology, as well as the work I did while at the Barbara Brennan School of Healing. However, I have learned the most from working with my patients, where I get to experience the work in action. One crucial component is the importance of initially allowing the patients to tell their stories of pain and trauma, and to let them feel deeply heard and understood. I then challenge and assist the patients to recognize and identify their erroneous beliefs and images that were formed as a result of the internalized shame and trauma. This is done using a cognitive behavioral approach based on Albert Ellis' Rational Emotive Behavioral Therapy. I help the patients reframe the erroneous negative belief systems and encourage them in identifying their positive qualities and strengths and assist them in incorporating these into their daily routine, in the form of daily affirmations.

Building on this, the individual must develop a sense of self-compassion, through mindfulness and inner child healing work. When we speak of listening with compassion, we usually think of listening to someone else. It is usually more challenging to show and feel compassion for ourselves. "We must learn to listen to and tenderly embrace the inner wounded child within us" (Thich Nhat Hahn 2010, 70).

Helping the patient understand that the shaming is often a result of instilled socially

constructed expectations of gender, and using a Feminist Approach can help them grow and feel empowered by breaking such molds. In more detail, I suggest we heal the trauma of sexual shaming in several steps:

- The first step is the telling of one's story in an individual or group setting.
- The second step is discovering, identifying, addressing and talking about the sexual shame, followed by repairing and reframing the erroneous internalized belief systems that have now become our irrefutable truths.
- The third step is the process of grieving the pain of our trauma and shame, and by doing this, we remove a sense of culpability; that it wasn't our fault.
- The fourth step is the need to identify our physical, emotional and spiritual needs and develop a sense of self-compassion and love for our bodies and recognize our strengths, resilience and beauty.
- The fifth step is to learn how to track the emotional triggers and instinctive actions and reactions that are no longer adaptive, and learning to make better more productive choices.
- In the sixth and last step, women are encouraged to organize, amalgamate, advocate, and empower each other.

My dream and hopes are to bring increased awareness to this issue, strive to break the societal norms and create healing by counseling, teaching and empowering women, one woman at a time.

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## DISSERTATION APPROVAL

This dissertation submitted by Ingrid D. Thrall has been read and approved by three committee members of the American Academy of Clinical Sexology.

The Dissertation Committee has examined the final copies and the signatures that appear here verify the fact that any necessary changes have been incorporated and that the dissertation is now given in 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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