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Sex, Lies and Therapy

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Earlier this year Caroline Beech and I facilitated a weekend workshop on the Eigenwelt programme on the topic of sexual repression. BIIP asked if I would lead a similar workshop at their conference. We only had an hour and a half but the group of us who assembled did, nonetheless, have a stimulating discussion, even though talking about one's own repressions is, by definition, a rather tall order. The amount of free-floating anxiety in the room at times certainly provided some evidence that this is a significant topic.

I had prepared a paper, which is available from Eigenwelt. Questions from this paper gave us a starting point:

- Are we actually more, rather than less, repressed than our immediate ancestors (the Victorians, say)?
- Is society currently in a phase of increasing sexual repression (masked on the one hand as narcissism and on the other as gender politics)?
- Is it the case that sexual repression in contemporary society, rather than having lessened, has actually assumed a new and more pervasive form?

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- Is therapy an agency in maintaining such repression or in liberating people from it?
- Is the current institutionalisation of therapy repressive?

We had a good deal of discussion about differing understandings of the term 'repression'. Several people expressed the view that what is happening is perhaps better described as 'desexualisation', a process we can see operating both in society and in therapy. I prefer to say that the question of sexual repression is the question of the unwitting lies we tell ourselves about the part played by love in our lives.

One of the primary symptoms of the repression of love is a preoccupation with the question of power. It is not an accident that the word repression has both a psychological and a political meaning. We seem to be living in a society in which love is less and less in evidence. We no longer discuss love, we discuss power, equality, rights, empowerment and abuse, rather than caring, empathy, cherishing and concern.

In the interests of economic efficiency, society is all the time trying to move toward an ideal of equality and interchangeability between the roles of men and women. Therapists tend to believe in this process. Nonetheless, this ideal of equality and autonomy does appear to destroy the interdependence of the sexes which has been one of the main dynamics of human society ever since we came down from the trees a few million years ago. Men and women in modern society actually need each other less than ever before.

We still have sexual drives, but these

are often inconvenient disruptions of the business of being economic producers and consumers. Freud believed that the price of civilisation was sexual repression and we are, as technology advances and populations increase, becoming more civilised (in that sense) all the time.

At the same time, we have the arrival of the AIDS epidemic. Sex becomes associated with fear. Is this cause or effect? It probably does not matter. It is another powerful force prompting us toward avoidance of our sexual nature. Repression needs fear. The carrot leading us towards repression is an ideal, while the stick is fear. All the necessary conditions are therefore now to hand. The AIDS epidemic arrived at just the right moment. If it had not done so, perhaps we would have had to invent it.

Whenever there is social change going on there will be stress and strain for individuals caught up in it. When a particular form of stress becomes common, people will evolve rituals for handling it. In this case we have evolved something called therapy. The recent histories of therapy and of sex go together. The beginnings of a theory of therapy lie with Freud who saw that many manifestations of human suffering in sophisticated society were traceable to sexual repression. Therapy became widespread and then underwent a revolution of method with the advent of humanistic therapies in the 1960s, in association with the 'permissive society'. Few of its founders adhered to what are now regarded as essential ethical norms.

Now all that has gone and we live in what might better be called the 'restrictive society'. In these new restrictive

conditions, therapy is becoming institutionalised and seems to be going from strength to strength. Why does social repression favour the growth of therapy? Is it that social repression creates distress to which therapy has the remedy? Or is it that therapy is itself an agent of the repression?

Therapy is a situation in which two people spend a lot of time together in intimate seclusion discussing private feelings and secrets in an atmosphere of caring attention. In normal society this only generally happens between lovers. The therapy world is currently highly sensitised to and intolerant of the possibility of sexual relations occurring between therapists and clients. Therapy is thus set up as a situation in which one can rehearse all the preliminaries and accompaniments of love without sex actually being permitted. This could be interpreted as a training in sexual repression. Clients who do fall in love with their therapist may be told that this is 'transference' and be expected to 'work through' it. Alternatively it may simply render the therapy impossible and they will drop out or be referred on, or they will suppress their feelings, or they may marry the therapist who will now have to find a new job. Therapy is the opposite of prostitution, but does it support the same split? Prostitutes offer sex without intimacy, therapists offer intimacy without sex. Society has always seemed to have a need for the oldest profession.

Why has it now developed a need for this newest one?

For the therapist too, should sexual attraction arise, there is a perennial tension between demands for congruence (frankness) and concern not to infringe the safe space of the client. As therapists become more frightened of the professional consequences of client complaints, they keep further and further away from the 'sexual boundary' — even when they know that doing so impedes the effectiveness of the therapy. Touch is increasingly taboo. (The dangers of touch consumed a significant portion of our discussion time.)

Clients will tell their therapist about the problems in their love lives. Therapy is generally in favour of self-sufficiency and against dependency. Many humanistic therapies in particular are likely to counsel clients to think about self interest rather than self surrender. While it is (or used to be) the role of the priest to preside over the wedding of men and women, thus legitimising their sexual loving relationship, it is the role of the therapist to preside over its breakdown and their separation. Is therapy part of a general undermining of social bonds through the process of desexualisation?

Sex, as one workshop participant finally put it, is only any good when it is 'wet'. There is a distinct danger that therapy makes it just another 'dry' subject. But sex, when it is dry, is painful and sterile.