

Gender in psychotherapy: controversies, impacts and healing

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Issues related to gender have enormous impact on every facet of human existence and relationship. Psychotherapy could be defined as the co-enquiry into the experience of human existence and relationship, and as such is massively affected by gender difference and the allied and inseparable issue of sexuality. My personal experience has been that gender issues have been central in every aspect of psychotherapy through being a client, in training and in working as a therapist. At times, however, this was unclear and confusing. The territory often went unexplored and unspoken because of taboos and sensitivities. Issues of gender have felt unworkable because they constellate a filter through which all experience passes in a deeply held unconscious and numinous manner, almost too close to bring into focus. Gender is like a blackboard onto which our experience is scored.

For me the journey has not been easy in the sense of finding unconditional encouragement to explore freely. In early days as a client I tentatively enquired into parts of me that longed to admit a feminine expression, despite strongly conditioned attachments to masculine and heterosexual manifestations. Later came a more relaxed and gentle exploration of homoerotic process facilitated by a gentler relationship with my masculinity

and heterosexuality. In training as a therapist it often seemed that the peer group was too threatened collectively to look with gentleness and ease into splits and wounding in the territory of gender, and much was left undone. Through working with clients more recently, there has been a deepening experience of how it really feels to be incarnate in male or female form, with incredibly pervasive differences in experience around

issues of safety and fear, desire and sexuality, and sense of self.

If psychotherapy is to play a part in contributing towards healthy relationship and healthy society, gender differences and their impacts need to be understood and brought out into the light. Collectively we need to find new and healthier ways of relating to gender difference. To do this we need to have the courage to face fear, shame and contempt and the effects of these emotions in the territory of gender: isolation, guilt, anger, bitterness and resentment. The notion of the 'battle of the sexes' is tired and dysfunctional and needs to be outgrown by values of a different order.

In this article I hope to offer a useful model or framework in which to hold issues of gender, to encourage and facilitate the healing of what I have come to see as the almost inevitable splits and wounding that we carry. Inequality is concretised domestically, institutionally and socially almost universally at the expense not just of the oppressed and exploited but also of the oppressors and exploiters.

A full historical perspective of gender in the psychotherapeutic realm is far beyond the scope of this article, but a very brief overview reveals how the battle lines were drawn up very early on. Freud held complex and contradictory views about gender and its consequences. He was for his time a liberal in many ways. In his scientific writing, however, there are indications that something caused Freud to be affected, and possibly adherent to, the prevalent view of female inferiority. In particular Freud's theory of female penis envy

provoked a bitter and fiercely fought controversy in the nascent world of psychoanalytical psychotherapy. Challengers such as Helene Deutsch and Karen Horney moved away from Freud's paternal emphasis and developed ideas on a biological basis about the importance of women's capacity to bear children and mother. They realised that maternal forces were erroneously sidelined by Freud's focus on the childhood relationship with the father and the struggle to come to terms with the authority and privilege of the patriarch.

Melanie Klein, in working with infants and mothers, developed an understanding of the psychic mechanisms of splitting, projection, introjection and projective identification in the psychic development of infants and in doing so laid a foundation for understanding the different developmental trajectory of the genders, particularly in the pre-oedipal phase. Crucially she did this in a balanced way, with less sense of inbuilt or conditioned inferiority or superiority of one gender over the other.

Jung's work with syzygy or 'yoked opposites', particularly sexually based ones, offered the potential for healing splits or synthesizing opposites. These are seen in, for instance, the Taoist system of *Yin and Yang*, the Buddhist gender union of *Yab-yum*, the Hindu union of *Shiva* and *Shakti*, representations of psychic or systemic wholeness in *Mandala*, and in the alchemical principles of *Mysterium Coniunctionis*. While Jung strove to be integrative and synthetic around gender he was inconsistent. Just as in his work with character types in which he

was repeatedly unenthusiastic about typing people yet consistently referred to people in terms of 'types', in the realm of gender a flavour came into Jung's work that was pejorative, undervaluing what he saw as feminine qualities. He suggested, for example, that they cause uncontrollable emotion, inconsistency and mental fragility. Jung's work is open to the accusation of creating a classical Aristotelian problem. He thinks typologically and categorically in an area which is both more accurately and sympathetically dealt with by a spectral approach, honouring individual complexity and dynamic flexibility.

Neo-Jungians such as Nor Hall, Jean Bolen and Mary Loomis have developed a Jungian psychology of the feminine, achieving a tremendously useful sense of the female archetypes and feminine incarnation. The work of neo-Jungian Robert Moore offers a fantastic model in terms of gender healing through archetypal understanding in terms of the men's movement and helping men to mature. Moore sees all humans struggling in a pronounced and damaging way to achieve maturity in the masculine side, rather than in the feminine side.

Alfred Adler's work in the territory of gender was relatively low profile and out of the main debate while controversies raged in the early psychoanalytical world. An early feminist, Adler recognized the destructive influence of our culture's archaic view of women and men. He saw that devaluing the former and over-valuing the latter leads to both genders experiencing exaggerated feelings of

inferiority. Adler felt that the healthiest arrangement was a recognized equality of value between men and women, which would then result in a higher level of cooperation between them.

Erich Fromm was another early advocate of gender equality. He wanted to achieve, on a personal level as well as socially, a synthesis between matriarchal and patriarchal principles. In discussing relations between men and women Fromm encouraged values of tenderness implying love, respect and wisdom.

Adler's and Fromm's approach to the individual of equality and respect is echoed in the person-centred and humanistic psychotherapy movements. In these movements there is an implicit philosophical stance of equality, but I am struck by the relative absence in the literature of approaches to the gender issue. While the originators of these psychotherapies, people like Carl Rogers, Abraham Maslow, Fritz and Laura Perls and others, seemed capable of some sort of gesture of balance of male and female elements, and their contribution has been important in moving the profession towards the possibility of a healing synthesis, clearly not all practitioners have achieved this. Where not explicitly elucidated and carefully explored, enshadowed issues of gender and sexual wounding have manifested abusively in times of increased sexual liberation, creating massive damage to the psychotherapeutic community as well as to the clients concerned. This presents a considerable burden, particularly to the male psychotherapist who must practice in a public climate of

suspicion and distrust regarding inequities of power in the therapeutic relationship, and the potential for sexual conquest, abuse and even rape.

Of crucial importance was the opening up by the person-centred and humanistic psychotherapies of the territory of stressing and valuing qualities of being, and particularly being in relationship, and this served as an antidote to more agentic and patriarchal approaches to therapy.

At the same time on this side of the Atlantic, workers like Winnicott, Bowlby, Riviere, Segal and others took on Melanie Klein's ideas emphasizing the pre-oedipal layers of personality development, and steadily developed the field of object relations which is characterized by an attempt to understand and theorize around observed patterns based on the understanding of key psychic mechanisms. This endeavour promised to be objective, impartial in the sense of gender, relational and clinically applicable. We start to see explanations for gender differences, misogyny and other manifestations of gender splitting based on stereotypical trajectories through early development of the infant in relation to the primary carer.

Joan Riviere was probably the first to look at issues of psychic womanhood and the woman who wished to pursue a career without forsaking femininity or motherliness. While the rise of feminism led to the challenge of patriarchally derived assumptions about female development and existence, understandings furnished by the field of object

relations began to shatter some myths which had presented powerful obstructions to adequate enquiry into manifestations of female wounding. This has been very important: in order to achieve lasting healing in gender territories we need to look not only at the male end of perpetrating patriarchy but also at the female end. In a world where the majority of prime carers are still female, we must examine the factors which maintain patriarchy if we hold to views around the importance of early conditioning. Estella Welldon challenges the psychosocial truism that 'Men are perverse; women neurotic' in her book *Mother, Madonna, Whore: The Idealization and Denigration of Motherhood*. She lucidly examines the taboo areas of female perversion and the perversion of motherhood, affording remarkable insights into differences in embodiments between males and females and potential aetiologies for inequality and patriarchy. Adam Jukes, in *Why Men Hate Women*, looks at the aetiology of gender splitting based on a fundamental experience of ambivalence in relation to mothers felt more powerfully, but not exclusively, by males.

There has been a shift in the psychotherapeutic realm from early predominantly cognitive and theoretical approaches towards approaches encompassing experience and feeling. Nancy Chodorow is a modern feminist worker who expresses with great clarity the problems and solutions associated with theorising when it comes to gender. She talks of any particular woman's or man's

gender as a 'continuously invoked project' in which self, identity, body imagery, sexual fantasy, fantasies about parents, cultural stories, and conflicts about intimacy, dependency, and nurturance are constructed. Chodorow warns of our tendencies in the areas of gender and sexuality to over-generalise, universalise, and essentialise, and to allow pre-consciously held cultural assumptions to infuse theory. She advocates continual attention to clinical individuality.

This sense of the continuously invoked and highly personal project is in keeping with a Buddhist psychological perspective. This offers an understanding of continuously co-arising factors in personality formation, giving a sense of wholeness and permanence to selfhood which is illusory and which, when believed in or attached to, is the ground of personal suffering. The Buddha taught: 'There is suffering, and it must be understood'. Relating this first noble truth to issues of gender the enquiry arises: can we identify and relate with understanding to the co-arising factors which shape our personal sense of gender? The most cursory of reflections will reveal what a massive undertaking this is if we are to achieve any sense of liberation or non-attachment (and therefore absence of suffering) in this rich, pervasive and complex area. We need to find a model that allows us to identify the many different levels on which gender manifests in any human life, not with any sense of a hierarchy, but to provide understanding and insight so that we may know how we, or our clients, create our sense of who we are in terms of gender,

sexuality and other interconnected issues.

One of the major areas of controversy in the gender debate is the essentialist question: are there essential differences between men and women? Nancy Chodorow points out our tendency to essentialise. A problem arises, for instance, when we label certain values or qualities as 'masculine' or 'feminine' and therefore discourage their expression in the opposite sex, or use the labelling in a pejorative sense against one or other gender. This is an important issue with far-ranging effects in terms of reducing our freedom of expression as individuals, culturally and socially. For this reason there has been a strong anti-essentialist movement in the name of promoting equality and even-handedness. However, the anti-essentialists are easily countered by a simple jaunt through areas of physicality, reproductive capacity and also, I think, mental function. There is enormous interest at present in brain structure, and differences are widely recognised between male and female brains. Anyone who has observed male and female infants and babies will testify to certain stereotypical differences not explicable by conditioning and probably partially eradicable by socialisation and conditioning. There is ample evidence, I believe, of essential differences between the genders and the key for me is the lens through which we examine the issue. I employ the *chakra* system to help to explain:

In Core Process Psychotherapy there is a focus on allowing 'felt sense' to inform us of emotional tonality and arising process in the relational field. The system of *chakras*, circumscribed energy centres along the body's central axis described in Buddhist and Hindu medical and yogic systems, can provide a sense of a map to help us understand the qualities of energy arising in the body as felt sense. Starting at the first *chakra*, situated at the base of the spine at the perineum, energy stirs around basic issues of survival, fear and the fundamental issue of taking physical form. The second *chakra*, in front of the sacrum, relates to desires and wants, lusts, sexuality and so on while the third *chakra*, behind the solar plexus, holds issues of personality and ego, sense of selfhood and personal power.

These first three *chakras*, below the diaphragm, have in common the sense of dualistic energy, involving a sense of self and other. With this can go a sense of objectification or competition, perhaps struggle. If there has been wounding or trauma in an individual's history, difficult emotions may arise in these territories. In relation to gender and sexuality there may be contempt, shame or deep fear.

As we feel into the *chakras* above the diaphragm there is no sudden transition away from dualistic experiencing to the non-dual but rather a tendency to move towards less objectifying and dualistic territory. The fourth *chakra* at the heart resonates with love and care but is vulnerable and, as most of us know, can feel raw when we open

up. The fifth *chakra* at the throat is associated with communication and sharing, the sixth at the forehead or third eye with wisdom and insight and the seventh, above the crown, with bliss, union, spirit, universality and other non-dual aspects poorly described by words.

The sense above the diaphragm is of movement towards the non-dual. This view is provided not to encourage any sense of a hierarchy of *chakra* or to promote the supra-diaphragmatic over the infra-diaphragmatic. Clearly the *chakras* work in harmony as a total energetic system and there is no discrete compartmentalised division of issues or any sense of being able to 'isolate' one or other *chakra*.

I believe it serves a useful purpose in an embodied way to understand and to be able to separate out areas of dualistic and objectifying process where we tend to get into trouble in terms of gender. The 'battle of the sexes' is waged in dualistic essentialist territories, characterised by fear, sexual objectification and power struggle. In terms of gender wounding and splits, it might help us to identify and relate in an embodied way to those territories which are non-dualistic and promote peace and healing. This operates in our internal environments as individuals with our masculine and feminine aspects, interpersonally in relationship, and more broadly in society. In Buddhism and Core Process Psychotherapy the values of loving kindness, compassion, sympathetic joy and equanimity are central and are clearly less

dualistic, promoting of relationship and gender healing.

I believe it is important that as psychotherapists we understand and experience as fully as possible the implications of the difference between a dualistic and non-dualistic approach to

gender relations. We need to look at our tendencies in all these territories, and find ways to relate to all of the levels with the intentions of care, respect and gentleness. With this awareness and these values as our fundamental intentions, we can then truly relax into who we are.

Further reading

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This article is an edited version of his dissertation.