

Sexual Unfolding
Sexual Development and
Sex Therapies
in Late Adolescence

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Sexual Unfolding

*To the memory of
our fathers, Macy and Bert,
and to the future of our children,
Marc and Jennifer*

Foreword

Lorna and Philip Sarrel have, in a sense, written a book about two sexual unfoldings: the development of sexuality in the adolescent and young adult, and the transition of college youth through the sexual revolution. Thus, aside from furnishing a superb guide to how to offer sexual counseling services to a university community—for the Sarrels' efforts and influence have extended beyond the student body—the volume will, we believe, also attain importance as a record of what happened when a generation of students met the sexual revolution with few precedents to follow. The sexual revolution did not happen simply as a reflection of a change in the sexual moral code fostered by awareness of the relativism of ethical values, the breakdown of parental guidance and example, the impact of the sexual stimulation of children by television, or even the slow victory of the Freudian concept that sexual repression formed the basis of the neuroses as well as many other human woes. It required the ability provided by the pill and IUD to separate intercourse from conception with a high degree of reliability; the knowledge that one could, and even had the legal right to, obtain a safe and relatively simple vacuum-extraction abortion in case of need; and the removal of most of the lifelong effects of venereal disease by antibiotic medications. The antiestablishment rebelliousness that accompanied the Vietnam war may have hastened the day.

In any event, the sense of freedom to engage in sexual intercourse with a friend or friends to whom one is not committed in a permanent or even an extended relationship, instead of relying on petting or masturbation, has greatly altered the mores of American youth. Whether sexual encounters leading to orgasm through intercourse and heavy petting have actually increased may be debatable, but the openness and acceptability with which couples share their thoughts and feelings about sex and have sexual relations for love, recreation, and diversion have certainly changed. One hears sighs from the

older faculty, "What a boon to happiness; would that I had been young now rather than a generation or two ago!" But sexual freedom has not brought freedom from neuroses or from conflicts about sex and sexuality—at least not yet.

With sexual freedom and enlightenment, youth found itself beset by new insecurities, self-doubts, and impulses to perform sexually as well as the freedom truly to make love to one's true love. At Yale what had been largely extra-university problems—how college men would conduct themselves with girls or women from town, Smith, or Vassar; how Yale men would manage the pseudomacho reputation flaunted on the banners in some dormitory rooms, "When better women are made, Yale men will make them"—became an important intra-university matter in 1969 when women were admitted to Yale (with the unspoken expectation that henceforth when better Yale men were made it would largely be Yale alumnae who would make them). The women were admitted to all twelve Yale colleges where they would live in the same buildings and sometimes even share the same bathrooms with their male colleagues. College men and women were to assume the responsibility as adults for their sexual behavior, just as for any other behavior. However, conferring the title of Yale Woman and Yale Man did not turn the entering youths into adults, and in the area of sex most were less prepared for assuming adult responsibility than in other areas.

Nevertheless, the transition to undergraduate coeducation at Yale and also to the new sexuality went surprisingly well. And it was the Sarrels, together with an enlightened administration under Kingman Brewster and a farsighted university mental health service under Robert Arnstein, who were major factors in easing these transitions; shall we say, they were the accoucheurs of the new era in sexuality at Yale.

The book is largely a product of the Sarrels' experiences with university students over the past 10 years, an experience built upon Lorna Sarrel's excellent training in social work and Philip Sarrel's recognition early in his career as an obstetrician and gynecologist that many women sought the opportunity to discuss sexual difficulties with their gynecologists—few of whom could listen or discuss

such matters usefully. Some of what the Sarrels teach, use in therapy, and write about herein derives from their work with Masters and Johnson, but such teachings have been transformed by a couple who, able to communicate easily with each other, have been able to hear as well as listen and in hearing learn from each person who has come to learn from them. The book is a well-thought-through text on adolescent sexuality, on teaching college students about sexuality, on providing contraception, on when to use behavioral techniques, on how to counsel, and on how to engage in a therapeutic relationship—not a book on sex, but on how to provide guidance for the sexually perplexed.

But it is more. The book is a very human document which lifts it far beyond the ordinary or the expected. It forms a model for the practice of patient-oriented medical care. The reader will note how the Sarrels regularly and naturally develop a relationship with each student or patient who comes to them—taking time to learn about the woman who comes for contraception, for example, but also about her partner and his needs and feelings about the technique the woman will use—a relationship that enables both partners to return for help if needed and that saves both time and suffering in the long run. The book has more to impart than facts and experiences, it conveys the dedication, warmth, and thoughtful interest in the patient and client without which a sexual counseling service cannot truly succeed, but also the constant renewal through learning that has made these authors such fine teachers. The book offers the reader the opportunity to learn from them.

Ruth W. Lidz, M.D.

Theodore Lidz, M.D.

New Haven, Connecticut

Preface

This book is an outgrowth of our work at Yale University as sex educators, counselors, therapists, and researchers. For the past 10 years we have had the privilege of learning about and learning from the thousands of Yale students who have shared their thoughts, feelings, problems, and creative energies with us.

Several different influences have determined our approach to our work. We brought with us backgrounds in social work, obstetrics and gynecology, and, in particular, experience with adolescents. From the beginning, we both paid attention to body issues and psychological issues simultaneously. We feel that our insistence upon *not* splitting the mind and the body is probably the most significant aspect of our work and hope this book substantiates our conviction.

We came to a department of psychiatry, which was created more than 50 years ago, to respond to the mental health needs of the Yale student population. For 10 years we have been learning about psychodynamics and psychotherapy from the therapists within this department and have integrated their findings into our daily work.

Our specialized skills in sex therapy began when, in 1971, we had the opportunity to work and study with William H. Masters and Virginia E. Johnson. That one month of intensive training gave us a basic understanding of male and female sexuality and the ways in which a therapist can help a couple develop understanding, sensitivity, and trust in a relationship. The perspective on sexuality that we gained from Masters and Johnson has proved invaluable in our work with students. A great deal of the material in this book is derived directly and indirectly from their teachings.

We have relied heavily upon our understanding of the students we have talked to in our office and in the classroom, and have made extensive use of their individual stories and case histories. We have been scrupulously careful to protect the confidentiality of individual students by altering names, dates, places, and minor details

without, we hope, destroying the unique reality and complexity of each person's or couple's life experience. Where we have used extensive material about a given student or couple we have asked for and received permission to do so. We are very grateful for these permissions.

We wish to express our gratitude first to our students. They trusted us and we them. They taught us and in return, we believe, we have made some contribution to enhancing the quality of their lives. Without them there would have been no book.

We thank those administrators at Yale who were helpful in the creation of The Sex Counseling Service and who have continued to support it.

A special word of gratitude is reserved for Dr. Robert Arnstein, Director of Yale's Division of Mental Hygiene within the University Health Service. His division stands as an example of excellence in the field of student mental health. His initiative and support enabled us to start the Sex Counseling Service in 1969—a rather daring venture at that time—and he has continued to offer support and guidance over the years. Dr. Arnstein was also generous in reading and making valuable comments on the manuscript.

We want to acknowledge our special indebtedness to Drs. Ruth and Ted Lidz who have been role models and mentors for many years. We greatly appreciate their reading of the manuscript, their intelligent criticisms, and their writing of the foreword.

We want to thank Dr. Sidney Berman who has taught us a great deal about the psychological makeup of many of the people we have seen. Through him we have learned about body image and the significance and relevance of the Draw-A-Person Test in sex therapy.

Our thanks also to Professor Haskell Coplin of Amherst College, a friend, colleague, and source of inspiration, for reading and commenting on the manuscript.

Last, but by no means least, we want to thank Ms. Jackie Smaga, our secretary and administrative assistant, for typing the several different versions of the manuscript. Ms. Smaga also helped considerably with organizing the reference material. No matter how great

the stress we created, Jackie has always been cheerful, efficient, and able to get us through the crisis.

Financial support received from the Josiah Macy, Jr. Foundation enabled Philip Sarrel to spend a sabbatical year at the university at Oxford. During that year a significant part of our time was spent gathering material for this book and initiating the writing process. We wish to thank the Josiah Macy, Jr. Foundation Faculty Scholar selection committee for making the award and also wish to thank Dr. John Bancroft and Prof. Michael Gelder for providing for us while at Oxford.

L.J.S.
P.M.S

Sexual Unfolding

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Introduction

This book is meant to be a distillation of our experiences in the fields of sex therapy, counseling, and education from the late 1960s to the present. Since our experience has been largely, though not entirely, with college and university students, this is the group we focus on. We have tried to write primarily for professionals working with students, other late adolescents, and young adults. We feel confident about our clinical material and have little or no hesitation in writing about the day-in-day-out work we do. Where we have ventured into abstraction and generalization, we are less confident. We offer our ideas tentatively, in the hope that they may be useful as a conceptual framework for the clinical material.

Because this book draws so heavily upon our particular professional experiences, we feel that the reader should know something about who we are and the nature of our work. These days we both call ourselves "sexologists," but we arrived at this professional identity almost without meaning to. Lorna Sarrel received a masters degree in social work, beginning a professional career in medical settings and continuing this work for six years. At present, Lorna Sarrel has the title of Co-Director of the Human Sexuality Program and Assistant Clinical Professor of Social Work in Psychiatry at Yale. Philip Sarrel is a medical doctor, trained as an obstetrician-gynecologist, and is an Associate Professor of Obstetrics and Gynecology and Psychiatry at Yale. While still a resident in Obstetrics-Gynecology (1964) he started a special clinic for teenage unwed mothers. It was his work with these girls and their boyfriends that prompted his first venture into sex education. Soon afterward he organized the first course in human sexuality for Yale

medical students. During two years in the Air Force he continued to expand his interest in sex education, starting noncredit sex education courses for Mt. Holyoke, Smith, and Amherst students [1].

Together, we led small group discussions that were an integral part of these courses. It didn't take long for students to start telephoning us at home, asking for advice about abortion, contraception, and sex. This was our first experience of the largely unmet need for sex counseling on a campus.

Our timing was fortuitous. It was the fall of 1969. We were returning to New Haven at the same moment that Yale college was going co-ed. The student health services wanted to provide gynecologic care for the incoming undergraduate females. We suggested that we provide that care but in a unique way—a service called sex-counseling, located within “Mental Hygiene” (Yale’s slightly quaint term for psychological services). We have run the Sex Counseling Service (SCS) since then (seeing more than 2,500 students between fall of 1969 and spring of 1977), and taught courses in human sexuality for Yale students and at many other colleges and universities. After two years of working as a student sex counseling team and teaching sexuality at Yale, we had the privilege of being trained to do sex therapy by Masters and Johnson at the Reproductive Biology Research Foundation (1971). Since that time, we have done Masters/Johnson sex therapy with over 200 student and nonstudent couples. What we learned from Masters and Johnson has been the core for all of our clinical work. Even when we are not doing sex therapy in their format, we use their basic concepts and the understanding of human sexuality that they imparted.

Although the primary focus of our work has been with a university subgroup, nevertheless, an important dimension of our professional experience is its multicultural nature. As a result of working within the Yale community, we have listened to people from a wide variety of the world’s cultures and subcultures, since Yale faculty and graduate students come from every continent. Because the undergraduate population during these years has increasingly included students from different American subcultures

and minority groups, we also have the beginnings of an understanding of sexual development among these young adults. Five years' experience working with ninth grade teachers in an inner city high school, developing and delivering a sex education program for more than five thousand 14- to 18-year-olds, has yielded some understanding of sexual issues in this population also.

In 1975-1976 we lived in Oxford, England and had the chance to teach our methods of treating sex problems, to learn about their somewhat more behaviorally oriented therapy and to see English couples [1]. We also taught sex therapy to a group of Danish and Swedish psychotherapists (in Copenhagen) and learned something about sexual problems in those countries.

However, the majority of our clinical work has been with a select and small subgroup and we want to emphasize the real limitations this puts on our observations. We are describing and deriving generalizations from a group of late adolescents and young adults, predominantly white, middle-class, intelligent, achievement-oriented, and verbal—at a particular moment in time (the early and mid 1970s). We honestly cannot say how relevant our experiences and concepts will be in other settings and other years, but we wouldn't have bothered writing at all if we didn't believe that there is a great deal in common among American students today. Our experiences at many different schools across the country have persuaded us that, although there are important regional differences in attitudes and behavior, the underlying themes and conflicts in growing up as a sexual person today are much the same for students in Vermont, North Carolina, Nebraska, and California. Our more limited experiences abroad, in England and Denmark particularly, suggest that, again, in spite of cultural differences, the basic processes are similar.

In 1973 there were seven million young people attending colleges and universities in the United States—nearly half of all the youth in that age group. This contrasts with 1963 when there were four million students and 1953 when there were only two million. This means that college students today represent a mainstream and not a minor tributary. In concerning ourselves with the personality