**Exploring therapists’ and psychology students’ constructions of sexual refusal in heterosexual relationships: A qualitative story completion study**

**Iduna Shah-Beckley and Victoria Clarke**

Department of Health and Social Sciences, University of the West of England, Bristol, UK

Iduna Shah-Beckley is a Counselling Psychologist with the Avon and Wiltshire Mental Health Partnership NHS Trust. She completed a Professional Doctorate in Counselling Psychology at the University of the West of England, Bristol. Her doctoral research was supervised by Victoria Clarke.

Victoria Clarke is an Associate Professor in Qualitative and Critical Psychology in the Department of Health and Social Sciences at the University of the West of England, Bristol.

*Counselling and Psychotherapy Research*

**Abstract**

Anxieties about sex and sexual problems are widespread and are often brought to counselling and psychotherapy. Research has found that even practitioners without specialist training often work with sexual difficulties because of the prevalence of such problems. Some of the most common concerns brought to therapy centre on desire discrepancies between male and female partners and a lack of sexual desire. In this paper we ask the question what understandings of ‘heterosex’ might await women and men bringing concerns about desire discrepancies and a lack of desire to the therapy room? We report the findings of a qualitative study exploring the discourses underpinning therapists and psychology undergraduates’ constructions of women and men repeatedly refusing sex in the context of an ongoing heterosexual relationship. Data were collected from seventy-one participants (33 therapists and 38 students) using the innovative story completion method, in which participants are presented with the opening sentences of a story centred on a hypothetical scenario and asked to complete it. The resulting stories were analysed with thematic analysis. Participants drew on heteronormative discourses of masculinity, femininity and heterosex to make sense of sexual refusal and its consequences. However, the stories written by male and, especially, female therapists included less problematisation of the absence of sex and more possibilities for overcoming sexual and relational problems. The data potentially raise questions about whether professional training allows therapists to access discourses that subvert dominant understandings of heterosex, as we argue it ideally should.

Key words: Heterosex, heteronormative, male sex-drive discourse, psychology students, thematic analysis

Implications for practice: Evidence from this and other research suggests that therapists’ sense-making around heterosexual sex or ‘heterosex’ is underpinned by narrow and restrictive understandings that can serve to reinforce traditional gender roles and limit sexual agency.

Implication for practice: Drawing on understandings of sexual problems that challenge traditional gender roles is important for effective interventions for such problems and supporting clients’ sexual agency.

Implication for practice: Engaging with critical understandings of heterosex can enable practitioners to further social justice agendas in and through their client work.

Implications for policy: Training on sexual issues should be regarded as an essential component of practitioner training courses, to ensure therapists are well equipped to respond effectively to clients’ anxiety about sexual issues.

**Introduction**

Traditional heteronormative discourses construct sex as an essential and expected part of heterosexual relationships, with ‘sex’ commonly equated with ‘penis-in-vagina-intercourse’ (Faustino, 2018; Myerson et al., 2007) or coitus. Gavey et al.’s (1999) heterosexual participants constructed the practice of coitus within heterosexual relationships as ‘healthy’, ‘natural’, and ‘normal’. If the practice of, and desire for, heterosex is normal, it therefore follows that the absence or refusal of heterosex in relationships is potentially ‘abnormal’ or a sign of pathology and dysfunction. Women and men in heterosexual relationships are argued to experience discrepancies in their levels of sexual desire – with men wanting more sex than women do – as a result of essential (biological and psychological) differences in their experiences of desire (Basson, 2000). Research has documented disagreements between women and men about sexual behaviour as a result of this gendered desire discrepancy. For example, Byers and Lewis (1988) found that disagreements arose from men’s greater desire for sex, with men typically initiating the sexual behaviour that their female partner refused. At the same time as women’s ‘lower’ desire is normalised as an expression of essential gender differences, it is also pathologised in mainstream sexological discourses through the creation of diagnostic categories like ‘female sexual arousal disorder’ (FSAD) and ‘hypoactive sexual desire disorder’ (HSDD) (Basson, 2000).

By contrast, ‘low’ desire in men has been rarely addressed in the literature, until recently, except as instances of ‘curiosities and anomalies’ (Kleinplatz, 2011, p. 3). Vannier and O’Sullivan’s (2010) research on sexual compliance in committed heterosexual relationships among young adults showed that whilst men and women engage in unwanted sex in equal measure, it seems that men succumbed to the pressure of cultural expectations of male sexual prowess and overrode their lack of desire, as they were more likely to initiate unwanted sex. Beres et al. (2019), in research on sense-making around men refusing female initiated heterosex in a casual-dating context using the story completion (SC) method, similarly identified the notion that ‘men should initiate sex’ as prevalent in their data. Men refused sex only to later or even immediately initiate it and thus restore imperatives for male agency and control in heterosex. In the current study, we employ the SC method, used by Beres et al. (2019), to interrogate the discourses through which young adults and therapeutic practitioners make sense of repeated sexual refusal (by both female and male partners) in the context of an ongoing heterosexual relationship. Circumstances in which some sexologists have argued the gendered desire discrepancy becomes even greater compared to casual-dating (Basson, 2000) and wider cultural discourses have traditionally framed women as prioritising emotional intimacy over heterosex (Hayfield & Clarke, 2012). Research has (rightly) centred notions of consent, coercion and compliance in exploring unwanted sex; our aim is to extend the small body of work on refusal of heterosex that explores the wider meanings of unwanted sex. To provide a background for our research we now discuss how dominant social meaning frameworks, or discourses, around heterosex might shape and delimit therapeutic practice in relation to desire discrepancies and ‘low’ desire, and feminist literature highlighting and critiquing these dominant discourses. First, we ask: what understandings of heterosex await women and men bringing concerns about desire discrepancies and a lack of desire to the therapy room?

**Discoursing Heterosex in the ‘Mirrored’ Room**

In her classic exploration of the permeable boundary between the consulting room and the wider culture, Hare-Mustin (1994) introduced the concept of a 'mirrored' (therapy) room to illustrate how the same discourses that govern the outside world also shape what happens in therapy. Therapists are not immune to cultural and political influence and therapeutic approaches are shaped by the underlying ideology of the culture in which they develop (Clark & Loewenthal, 2015). Without a rigorous interrogation of the belief systems that a particular therapeutic approach draws on, therapists may become unwitting perpetuators of such beliefs (Clark & Loewenthal, 2015). Research suggests that therapists are impacted by taboos around, and a lack of comfort with, open and candid discussion of sex within the wider culture (Timms, 2009). And, furthermore, that the neglect of sex within training, and clinical supervision, are some of the biggest barriers to therapists discussing sexual matters with clients (Timms, 2009). It is perhaps unsurprising then that research exploring therapists’ perceptions of socially non-normative sexual and relationship practices such as non-monogamy have found that many therapists’ pathologise such practices (Grunt-Mejer & Łyś, 2019), and also that training variables predicts attitudes to nonnormative sexual practices such as BDSM, with therapists with no training on such sexual practices having less accepting attitudes (Kelsey et al., 2013).

What of therapists’ sense making around socially normative and dominant sexual practices? Only a handful of studies have examined therapists’ sense-making around heterosex, all of which have highlighted the dominance of heteronormative discourses (e.g. Guerin, 2009; Penny & Cross, 2014; Shah-Beckley et al., 2020). For example, Guerin (2009) found that sex therapists’ interview-talk about sex therapy and heterosex tended to reify dominant cultural and sexological norms rather than challenge them. Therapists’ prioritisation of genital-coital orgasms restricted possibilities for non-coital sexual practices. Accounts of sex therapy practice that challenged heteronormative framings were produced by sex therapists who drew on feminist and poststructuralist discourses. Similarly, Miller and Byers (2008) found that trainee clinical psychologists’ sexual attitudes shaped their self-efficacy particularly with regard to their ability to appear comfortable and unbiased when with working with sexual material. These studies suggest that therapists’ personal and political views are pivotal in creating possibilities for a therapeutic practice that can challenge and subvert heteronormative discourses.

**Discourses of Heterosex and Heterosexuality**

Dominant discourses of heterosex position men as possessing an active sexuality and an insatiable sexual appetite (Farvid & Braun, 2006; Mooney-Sommers & Ussher, 2010), which makes male refusal of heterosex almost inconceivable – men initiate and women are responsive, compliant or refuse – and a likely indication of abnormality (Gavey et al., 1999). For example, Gavey et al. (1999) found their heterosexual participants circumvented the idea of men not wanting heterosex by framing male sexual refusal as a communication about women’s lack of sexual attractiveness (see also Beres et al., 2019).

Research suggests representations of heterosexuality are becoming more nuanced and the traditional construction of active male and passive female sexuality now intertwines with what Hollway (1989) dubbed a ‘permissive’ discourse that positions both women and men as active desiring subjects. Whilst permissive discourses undoubtedly broaden representations of female sexuality, they also produce new expectations and pressures. Representations of an active and desiring female heterosexuality create expectations for women to be physically attractive and ‘sexy’, as well as sexually knowledgeable and experienced (Evans et al., 2010; Harvey & Gill, 2011). Farvid et al. (2017) argued that ‘women who do not embody these identities and practices increasingly risk being classified as sexually uptight or prudish’ (p. 2). At the same time, women must still be ‘pleasingly feminine’ (Farvid & Braun, 2014, p. 126) to mitigate the threat full female sexual agency would present to heteromasculinity; and – because of the still powerful sexual double standard – women continue to risk being labelled ‘slutty’ for expressing sexual agency. This results in an agentic female sexuality being negotiated between polarised expectations of ‘not too slutty and not too prudish’ (Farvid et al., 2017). In this context, it is perhaps unsurprising that Beres et al. (2014) found that young adults explained women’s refusal of and subsequent participation in heterosex in a casual-dating scenario with reference to notions of ambivalence about the proposed sexual activity.

Shifts in representations of male (hetero)sexuality have also been noted. Alongside representations of men as sexually driven, and male sexuality as unbridled and easily gratified (Farvid & Braun, 2014), there is increasing evidence that in some contexts, men, and younger men especially, prioritise emotional intimacy and relationships over sexual prowess (e.g., Beres et al., 2019). In the Beres et al. (2019) male sexual refusal study, the second most prevalent narrative centred on men wanting to take things slowly and have sex in the context of a meaningful relationship.

Despite the increase of more nuanced versions of heterosexuality and heterosex, the onslaught of popular messages that ‘everyone is always ready, willing and able to have sex’ (Miracle et al., 2002, p. 101), alongside the pathologisation of ‘low’ desire, continue to dominate wider discourses around heterosex, leaving people who fail to conform to ‘ready, willing and able’ expectations potentially feeling anxious and inadequate. Anxieties about sex and sexual problems are widespread and are often brought to therapy (Barker, 2011; Tiefer, 2004). Reissing and Giulio (2010) found that even psychologists without specialist training in sex therapy often work with sexual concerns because of the prevalence of such concerns. The second most common concern after safer sex was desire discrepancies, followed by a range of problems centered on a lack of desire and satisfaction including HSDD and FSAD.

**The Current Study**

This paper uses the novel method of SC to explore therapists and psychology students’ sensemaking around men and women repeatedly refusing heterosex in the context of an ongoing relationship. We explore whether and, if so, how the participants draw on heteronormative discourses of heterosex, gender and heterosexual relationships in writing their stories. The use of a comparison group of students allow us to highlight the distinct features of therapists’ sense-making. Thus, we also explore whether there are any differences in the therapist and student stories.

**Method**

**Story Completion**

SC was originally developed as one of a number of a psychoanalytically-informed ‘projective techniques’ used to assess personality and ‘psychopathology’ in clinical contexts (see Lansky, 1968). The theory of projectives is that respondents unwittingly reveal unconscious or socially undesirable aspects of their personality in their interpretation of ambiguous stimuli, such as a brief and deliberately ambiguous story ‘stem’ or ‘cue’. In qualitative SC research, rather than making the essentialist assumption that SC can reveal ‘hidden truths’ about participants, it is assumed that the stories ‘tap into’ the prevailing discourses around a topic in the participants’ sociocultural context (Frith, 2013; Kitzinger & Powell, 1995). SC is argued to be useful for collecting data about a topic that is surrounded by ‘cultural taboos’ (Walsh & Malson, 2010, p. 523), such as sexual refusal, because, if written in the third person, participants are not required to directly report, and thus be accountable for, their views (Clarke et al., 2017).

One of the distinctive (and often contentious; see Braun et al., 2019) features of qualitative SC research is the use of comparative designs. Comparison is used to explore whether and how different social groups make sense of the scenario in different ways, and thus, potentially, by virtue of social context or positioning, have greater access to or investment in particular discourses (Clarke et al., 2017). SC researchers have also compared participants’ responses to variations in key features of the story (e.g., Frith, 2013; Kitzinger & Powell, 1995; Shah-Beckley et al., 2020).

In this study, following existing SC research, we use a comparative design to examine how participants make sense of a female and a male character refusing heterosex. There are three intersecting types of comparison – comparing the responses of therapists and students, female and male participants, and the responses to the female and male character refusing heterosex.

**Stem Design**

Participants were provided with one of two versions of a third person story stem designed to evoke ‘relationship troubles’ and ‘sexual difficulties’ narratives rather than stories of coercion: in version A, the male character (Ben) refused sex and in B, the female character (Kate) did. Version A is provided as an example (B was identical apart from the character names and gendered pronouns being swapped in the last three sentences):

Ben and Kate have been together for a while. For quite some time they have not been having sex because Ben doesn’t want to. Kate has tried talking to Ben but he has been reluctant to talk. Tonight Kate is making sexual advances but Ben says he is tired and turns over.

The stem was followed by the question ‘what happens next?’ and participants were instructed that their story could ‘unfold over the following minutes, hours, days, weeks or months’. After completing the story, participants were asked to complete some demographic questions for the purposes of ‘situating the sample’ (Elliott et al., 1999).

**Participants and Recruitment**

The study was approved by the faculty of health and life sciences research ethics committee at the authors’ university. Participants in the therapist group were recruited from a drug and alcohol treatment provider. This sample included both qualified and trainee therapists. The first author introduced the research at a clinical team meeting and invited everyone present to participate. Psychology undergraduates were recruited via a credit-bearing research participation scheme. For both the therapist and student samples the aim was to recruit women and men to allow for gender comparisons in relation to each version of the story. However, given the preponderance of both female psychology students and female therapists, it was more difficult to recruit men. The final sample consisted of 55 women and only 16 men. The aim was also to collect roughly equal numbers of completions of each version of the stem, but more than twice as many participants completed version B of the stem (arguably, the more gender normative stem). The results should be interpreted considering these limitations and the relative social privilege of the sample (see below). Table 1 provides an overview of the sample. As Clarke et al. (2019) note there is no consensus on, and wide variation in, sample size in published qualitative SC research, with several studies reporting sample sizes of 40-60 completions (e.g., Hayfield & Wood, 2019; Walsh & Malson, 2010).

[Insert Table 1 about here]

Participants identified as mostly white (3 therapists identified as black), middle class (1 therapist as working class), and heterosexual (3 therapists as bisexual or gay). The mean age of the therapist sample (34 years) was 13 years higher than that of the student group (21 years).

**Data Collection and Analysis**

Data were gathered electronically using the *Qualtrics* online survey software. Reminders were sent out to therapists at weekly intervals on four occasions. Data collection ceased after six weeks.

In qualitative SC research, some version of thematic analysis (TA) has predominated; either identifying themes *across* the data (e.g. Frith, 2013) or using a more structured approach and identifying thematic patterns in relation to particular aspects of the stories (e.g. depictions of the cue relationship, reasons for and reactions to infidelity in Kitzinger & Powell, 1995). We used Braun and Clarke’s (2006) TA approach informed by a broadly constructionist orientation (Clarke & Braun, 2014) and the feminist literature around heterosex and heterosexuality discussed in the introduction. Following initial data familiarisation, we decided to use a more structured analytic approach, focusing on depictions of: 1) the absence of sex; 2) the reasons for sexual refusal; 3) reactions to sexual refusal; and 4) relationship breakdown and repair. The first author led the processes of coding and theme development, but each stage of the analytic process was reviewed and discussed with the second author.

In common with existing SC literature, participants’ engagement in the task varied, with some providing long and complex stories and others short and perfunctory stories (Clarke, et al., 2017); and some (most often the therapists), ‘refused’ an aspect of the task (see Kitzinger & Powell, 1995) in that they wrote about what precipitated the scenario rather than ‘what happened next’. The average length of the student stories was 235 words (range 8-520) compared to 155 words (range 12-267) for the therapist stories. Grammatical and spelling errors have been corrected in the data to aid readability and comprehension. The use of ‘[…]’ signals editing of the data to remove superfluous detail. Data extracts are tagged with the following information: sex/gender (F-female, M-male), participant occupation (S-student, T-therapist), and story version completed (VA [Ben refuses sex] or VB [Kate refuses sex]).

**Results**

**Depictions of the Absence of Sex**

Participants’ conceptualised heterosex as an important indicator of heterosexual relationship functioning and satisfaction and problematised its absence. The student stories especially evidenced the notion that heterosex is essential to partner relationships, to the extent that they cannot ‘work’ or exist without it:

Ben realises if Kate does not want to have sex with him then there is no future. (MS/VB)

‘I'm sick of this’ sighs Ben, ‘you're ridiculous, what's a relationship without sex’. (FS/VB)

Indeed, the absence of heterosex and sexual desire (and the partner refusing heterosex) were pathologised in most student stories:

Ben doesn't want her, or desire a sexual relationship like he should. (FS/VA)

‘What’s wrong with me... what's wrong with you?’ Kate pleaded. (FS/VA)

Only two student stories evidenced some questioning of the prioritising of heterosex in partner relationships:

[Sex] shouldn’t be the most important thing. (MS/VA)

Kate is left feeling absolutely devastated and unable to understand how such a long relationship could break down over sex. (FS/VB)

Unlike the student stories, a small number of the therapist stories framed the absence of heterosex as a ‘normal’ part of heterosex relationships, attributing it to sexual ‘boredom’, a cultural common place in everyday discourses of sexual relationships (Tunariu & Reavey, 2010):

Ben doesn’t sexually satisfy Kate anymore. (TF/VB)

Their sex-life had become predictable and boring. (TM/VB)

Although the therapist stories depicted the absence of sex as problematic for the continuation of the relationship, these stories evidenced less critical judgement and dismissal of the refusing partner and the style and tone was less ‘dramatic’ than that of the student stories. For example:

*Therapist stories*

Kate was finding it increasingly difficult to deal with Ben’s rejection. (FT/VA)

Ben was unable to carry on like this. They would have to talk. (MT/VB)

*Student stories*

Kate was thinking to herself: ‘I will not put up with this, he better get his act together or we are finished’. (FS/VA)

Ben gradually become more and more annoyed with her, he tried, what more could he do she is being a stubborn cow and now she is a gonner. (MS/VB)

Even though sexless relationships were generally framed as ‘abnormal’, many stories depicted Ben and Kate as having ‘healthy’ sexual desire. For example, the partner refusing sex was often portrayed as having an affair or subsequently having sexually fulfilling relationships (see below). The depiction of ‘healthy sexual desire’ was more common for Ben than for Kate, echoing the traditional gendering of sexual desire – active male and passive or absent female desire – in the wider social context (Farvid & Braun, 2006).

**Depictions of the Reasons for Sexual Refusal**

The predominant explanations for Kate’s sexual refusal, and the predominant consequences of Ben’s sexual refusal for Kate, were poor ‘body image’, low self-esteem, depression and anxiety (see also Kitzinger & Powell, 1995). Almost all stories referenced Kate’s (negative) feelings about her body, reflecting the normative discontent of women’s relationships with their bodies that is central to the contemporary construction of femininity (e.g. Sharp & Keyton, 2016):

Kate finally came out with why, she thought that Ben was judging her on how she looked and that every time they went out she would see him looking at tall skinny girls the opposite of what she was, and she thought he was flirting with other women wanting to have them. She had also looked at his internet history and found that he had been watching a lot of porn and thought to herself she was unattractive. (FS/VB)

Kate has been feeling extremely unhappy about herself, her self-esteem has been shattered and confidence destroyed, she believes that Ben is no longer attracted to her. (MS/VA)

Some of the stories written by women placed responsibility for Ben’s sexual refusal on Kate for having become sexually unattractive – ‘Kate put on weight’(MT/VB), ‘Kate didn’t look like she used to’ (FS/VB) – evoking the notion that, as the object of (heterosexual) male desire, women need to maintain their ‘sexual capital’ in order to retain *their* man (Farvid & Braun, 2006; Frith, 2013). Clarke and Braun (2019) described sexual capital as ‘the sociocultural notion that sexual attractiveness is a personal asset that confers power on those whose possess it, and by investing in our physical appearance we can gain a sexual capital advantage’ (p. 105).

Ben was rarely presented as inherently lacking desire; a recurrent explanation for his disinterest in heterosex was that he was having an affair with another woman. In the stories where he *was* presented as disinterested in sex *per se* rather than just disinterested in sex with Kate, Ben’s ‘sex drive’ was depicted as being affected by stress and depression, offering some disruption to the notion of men’s sexual desire as inevitable and ceaseless. In such stories, the source of Ben’s stress and depression tended to be located in factors outside the relationship, such as work. This contrasts with the depictions of Kate’s low mood, which were overwhelmingly linked to poor body image. Thus, the stories reproduced a traditional heteronormative division of emotion, where men worry about work and women worry about the way they look. In some of the stories Kate had been offering sex to Ben in exchange for ‘security’ and ‘emotional intimacy’ and when Ben withdrew these, she communicated her dismay by refusing sex. Thus, the stories invoked the culturally normative construction of sex, and withdrawing sex, as a form of marital bargaining power (e.g. Allen & Brinig, 1998), and the notion that women prioritise emotional intimacy over physical gratification (Hayfield & Clarke, 2012):

Kate explains that sex isn't what she requires from Ben but… honesty, affection (non-physical) and security. (FT/VA)

It feels mechanical when they do have sex and she often upset by the lack of emotional intimacy. (FT/VB)

The overall absence of pathologising notions of female ‘sexual frigidity’ (Margolin, 2017) is noteworthy. In fact, in some instances, Kate’s sexual refusal was presented as an indirect communication of her *sexual* dissatisfaction in contrast to the stories that framed it as an indirect communication of her *relationship* dissatisfaction. For example, in some of the Version B stories written by women, Kate’s sexual refusal was presented as a result of sexual boredom. The Kate presented in these stories ‘had gone off Ben’ (FS/VB), ‘didn’t fancy him anymore’ (FT/VB) or was ‘bored of doing the same thing’ (FS/VB). Furthermore, the invocation of a ‘sexual boredom discourse’ (Tunariu & Reavey, 2010) was one of the only ways the stories assigned responsibility to Ben for Kate’s sexual refusal:

She is bored, Ben doesn’t treat her as he used to. (FS/VB)

Because she is bored and would like it to be unpredictable and wild, rather than part of her daily routine. (FT/VB)

Thus, some stories disrupted traditional notions of absent female desire and presented Kate as an active, desiring subject. These representations of Ben and Kate’s relationship shifted the framing of sex from active male and passive female to something more akin to Hollway’s (1989) ‘permissive discourse’, in which both women and men are active desiring subjects.

**Depictions of reactions to sexual refusal**

Overwhelmingly, in both versions of the story, Kate was presented as having very little autonomy either in preventing the ‘problem’ or in doing something about it. This was evident both in Kate’s pleas for Ben to ‘fix this’ (MT/VA) and ‘sort it out’ (MS/VB) and Ben’s offers to ‘get sorted’ (MT/VA). Kate also waited for Ben to ‘shower her with gifts’ (FS/VB) and ‘wine and dine’ (FS/VB) her. The tendency to assign Ben the role of ‘fixer’ or ‘sexpert’ (Potts, 2002) can be understood as invoking normative gender discourses that position men as autonomous and active agents and women as co-dependent and passive recipients of male action:

Ben decides he has had enough and wants to tackle this issue once and for all. (FS/VA)

Ben eventually gives up trying to fix their sex life, and eventually has to move on. (FS/VB)

In the responses to the Version B story in which Kate refused heterosex, many of the 12 male participants depicted Ben as sexually aggressive and coercive (see also Beres et al., 2014):

Ben persists to touch her sexually even though she is being very resistant towards him. She keeps asking him to stop but he does not stop as she asks. Kate gradually gets more and more upset as she thought that Ben respected to her. He carries on kissing her all over her necks and back and touching her inappropriately but Kate gets more and more resistant and moves further and further away from him. Eventually Kate begins to cry. (FS/VB)

Furthermore, Ben was depicted as expressing his anger and frustration by going out drinking and having sex with other women, thus positioning Ben as primarily sexually driven:

Ben will become frustrated with Kate as he wants to have sex, he will continue to try and pressurise her into having sex [...] He goes out and gets drunk and then cheats on Kate. (MS/VB)

In contrast, some of the stories written by female students depicted a very different Ben, one who was heavily invested in his relationship with Kate; these stories tended to centre on a relationship rebuilding narrative rather than one of relationship dissolution (see below) (see also Beres et al., 2015). Ben was represented as responding to Kate’s sexual refusal by engaging in sexual bargaining and attempting to seduce her into having sex with him by offering greater intimacy and romance in exchange for sex (see also Kitzinger & Powell, 1995):

He had the day off and he was going to go and get a haircut, have a shave and make himself look irresistible, he went out he bought a nice meal to cook, candles and had planned a lovely romantic evening for her to come home to, to see if she needed to be wined and dined beforehand, add a bit more romance back into the relationship like it was at the beginning of their relationships. (FS/VB)

In this story, Ben sought to increase his sexual capital by engaging in appearance work; however this was couched in terms of Ben ‘making an effort’ for Kate and investing in his relationship rather than Ben feeling insecure about his appearance and making negative comparisons between his appearance and that of other men, as Kate was portrayed as doing with other women. The depiction of Kate’s reaction to Ben refusing heterosex often centred on her obsessive fears about Ben’s infidelity:

(Kate) is paranoid that he does not want to be with her. She gets upset and thinks that he no longer finds her attractive, which sends her mind into overdrive and she starts to wonder if Ben has been cheating on her. (FS/VA)

Kate has become paranoid that Ben is possibly seeing other women. (FS/VA)

Kate’s fears were framed as irrational and self-destructive – she was ‘paranoid’ and her mind was in ‘overdrive’ – which is interesting given the framing of male infidelity as almost inevitable (see below). Indeed, Kate’s emotional reaction to sexual refusal in some instances was presented as the reason for the relationship breakdown:

Kate begins to get caught up in her own mental confusion, the pair of them begin to drift apart and they split up. (MS/VA)

It goes downhill because Kate feels unloved and rejected. (MS/VA)

Infidelity was depicted in both version of the stories. However, it was typically Ben who was having sex with another women whether he was the refuser (Version A) or the recipient of refusal (Version B). In fact, when Ben was refused sex he was depicted by both male and female participants as *pushed* into infidelity by Kate’s behaviour. He was presented as trying to ‘sort things out’ but after all his efforts failed, he was left with no choice but to look for sex elsewhere. Hite (2005) concluded from her classic research on female sexuality that extra marital affairs are most commonly made sense of by women in relation to the notion that men are subject to an overwhelming biological drive to seek sexual gratification (Hollway 1984, 1989). This explanation was apparent in the vast majority of the stories. Tiefer (2004) argued that historically both extramarital and coercive sex have been normalised by drawing on biological explanations to make sense of men’s behaviour: ‘its nature, he can’t help it, he is only human’ (MS/VB). As such, men are not held accountable for their sexual behaviour (Farvid & Braun, 2006; Potts, 2001):

Ben finally cracks and explains to Kate that he couldn't go without sex any longer and felt he had to go elsewhere. (FS/VB)

Ben gets angry and insists for an explanation. Kate refuses to participate in the argument. Ben leaves the room angrily; he is left no choice but to visit a female acquaintance and commit adultery. (FT/VB)

The stories about Ben’s infidelity also portrayed Ben’s commitment to Kate as easily challenged by other women. This ties into Harvey and Gill’s (2011) argument that in the wider culture, women have to continually work at keeping a man sexually engaged to avoid losing his interest. Women have to be ‘up for it’ and enthusiastic and skilled participants in sex (Evans et al., 2010) otherwise as little as being ‘shown some attention’ by another woman may lead their male partner to him lose interest:

This continues night after night and Ben decides to leave and move in with a friend. A colleague at his work shows him some attention and after a works drink night he ends up sleeping with her. (MT/VB)

He begins to wonder if she really loves him anymore. A colleague starts flirting with him at work and the sexual frisson makes him lose interest in talking Kate into grudging sex. He has an affair. (MT/VB)

By contrast, in both versions of the story, Kate’s infidelity was constructed as morally wrong and ultimately as destroying the relationship. As the stories unfolded Kate was presented as realising she had made a ‘mistake’ but by then it was too late because she had already ‘lost her worth’ (FS/VA):

She goes home with someone that night and sleeps with them to prove a point to Ben. She wakes up the next day feeling used and worthless. (FS/VA)

Kate’s pursuit of her own desire (by having an affair) invariably compromised her sexual capital as she was no longer desirable to Ben. Therefore, Kate’s sexual capital can be understood as being tied into her ability to offer Ben exclusive access to her body. The sexual double standard also means that women’s sexual digressions are more harshly punished then men’s; because of the prevalence of a male sex drive discourse, men’s infidelity is expected whereas women ‘fall from a higher pedestal’. In contrast to Ben’s infidelity, for which he held little accountability, Kate’s infidelity was presented as planned and calculated, and accountable, and her sexual agency was punished by Kate ‘losing her worth’ to Ben and feeling worthless.

**Depictions of relationship breakdown and repair**

None of the stories framed refusal of heterosex in terms of a treatable sexual dysfunction. The stories located the origin of the problem relationally rather than medically, thus, in all the stories, the only way for Kate and Ben to overcome their difficulties was through communication, and, in some instances, professional help in the form of therapy. In general, the stories presented an absence of communication as the main and initial reason for the problems in the relationship; affairs and sexual refusal tended to be constructed as the results of communication breakdown. This reflects the emphasis within both clinical practice and the wider society on the importance of open communication for relationship maintenance and satisfaction (Byers, 2005; [Cupach & Comstock, 1990](http://onlinelibrary.wiley.com.ezproxy.uwe.ac.uk/doi/10.1111/j.1467-9450.2008.00698.x/full#b102)). These examples illustrate the emphasis placed on intimate communication in many stories:

If there is no open communication between the two the relationship will fail and they will no longer be together. (FS/VB)

After the in-depth conversation and all the confusion was settled, they broke their 8 month celibacy. (FS/VA)

Almost all of the female therapist stories presented professional help in the form of couples and relationship therapy as necessary to support the process of open communication. Some female student stories mentioned professional help, whereas none of male student and only one of the male therapist stories did. Therapy was depicted as a means for the couple to maintain their relationship and increase their sexual satisfaction:

They seek counselling together and as a result their sex life improves. (FT/VA)

He acknowledges that he finds her rejection difficult to live with anymore and suggest that they need to access couples/sex therapy. (MT/VB)

In one of the male therapist and one male student stories, personal therapy was suggested as a way for Kate to ‘sort herself out’; one female therapist also suggested therapy for Kate to ‘work on her issues’, thus locating the sexual difficulties not in the relationship, or in something else contextual, but in Kate. Thus, individualising these difficulties and pathologising Kate.

Unlike the student stories, some of the therapist stories depicted problems in Kate and Ben’s relationship as an opportunity to strengthen the relationship and increase intimacy. Several therapist stories included a temporary separation phase, something absent from the student stories. The separation period allowed for personal exploration, sometimes through ‘sexual experimentation’ with others:

Kate manages to talk to Ben about her concerns about the fact that Ben does not seem interested in sex anymore. They become more open with each other and discover new depths to their relationship. (FT/VA)

It gets rocky. They both struggle. They separate for a bit. Come back together. Go on holiday. Experiment with open relationship. Learn a lot about themselves and each other. Change some patterns in how they relate. (FT/VA)

There could be a number of reasons why the therapist and student stories differed in this regard. We speculatively note (given the limitations of the sample) one possible explanation is that the likely greater relational and sexual experience – both professional and, because of age, personal – of the therapists may have provided them with more varied conceptualisations of relationships, and relational distress, on which to draw when writing their stories. For example, the therapeutic literature indicates that desire discrepancies, low desire, temporary separation and infidelity are common experiences that result in relationship distress and are potentially treatable with therapeutic interventions (e.g., Lebow et al., 2012).

**Conclusions**

While the therapists and students drew largely on similar heteronormative discourses to make sense of the scenario, there are some potentially noteworthy differences between the therapist and student stories that warrant further consideration. In the therapist stories there was less problematisation of the absence of sex and more possibility of overcoming sexual and relational problems. Furthermore, the therapist stories provided a wider range of explanations for women’s refusal of heterosex, and a wider range of reactions to being refused heterosex, while largely drawing on hegemonic sexual and gender discourses to make sense of men’s behaviour (such as in portrayals of Ben’s reluctance to seek professional help). There were also marked differences in the style of writing used by the two groups. In many therapist stories there was speculation about different possibilities similar to the way in which therapists hypothesise about clinical cases and hold multiple perspectives:

They will be able to reach greater depth in their relationship through exchanging thoughts and beliefs about sexual practices, or they may not be able to communicate at all and Kate will end up feeling resentful and neglected and they will drift apart, or Ben may desperately try which may make Kate feel uncomfortable with the increasing shift in power and may also push her away, anything is possible. (MT/VA)

It may be that the therapists felt their clinical skills were being scrutinised, especially because they were recruited via their employer. In the same vein, as previously noted, some of the therapist stories were not about ‘what happened next’ but rather about what precipitated the scenario depicted in the stem; again, this echoes the professional task of articulating a clinical case formulation. Therapists also may have been familiar with the issue of refusal of heterosex through their clinical practice, which in some cases may have led them to draw on their clients’ experiences. In other words, they may have asked themselves ‘what is the most common way clients understand this issue?’ rather than drawing on their personal understandings. There was a heavy reliance on ‘male sexual drive’ discourses, and limited engagement with permissive discourses (Hollway, 1984, 1989), in both the therapist and student stories. As this research used SC, we cannot of course make the leap that therapists draw on similar discourses in their work with clients. Further research is clearly warranted to explore the discourses therapists draw on in making sense of heterosex and the way these discourses might shape and restrict the therapeutic process. However, we tentatively suggest that increasing therapists’ familiarity with feminist and queer literature on sexuality could equip them to challenge and subvert dominant discourses of heterosex and heterosexual relationships in their clinical work and provide their clients with new understandings of their sexual problems and the mechanisms by which dominant cultural expectations create pressures to conform to sexual norms (Barker, 2011; Moon, 2008).

We recommend clinical psychologist Tiefer’s (2004) classic collection of essays *Sex is not a natural act and other essays* and psychotherapist Barker’s (2018) *Rewriting the rules* as accessible starting points for reading in this area. The website <http://www.newviewcampaign.org/> provides an archive of the work of the New View Campaign, a grassroots network of feminist clinicians and social scientists who campaigned against the medicalisation of sex and reductive diagnostic categories such as HSDD and FSAD, including a list of publications by members of the network (including Tiefer). The New View advocated for a women-centred conceptualisation of women’s sexual problems founded on feminist and constructionist principles (Kaschak & Tiefer, 2002).

To engage critically with dominant social frameworks around heterosex and heterosexuality, therapists of course need to first ‘get comfortable’ with talking about sex (Timms, 2004). The personal and professional growth of clinicians is built into the regulatory structure of the profession through the expected engagement in mandatory regular supervision and continued professional development. We invite clinicians to use supervision to reflect openly and candidly on their level of comfort with working with sexual material, as well as on their own sexual selves – their basic knowledge of sexuality, the messages they received about sexuality when growing up, and their own sexual histories. Timms (2004) provided helpful activities for therapists to explore their sexual selves such as creating a sexual genogram and a sexuality timeline; tools to reflect on the messages received about sexuality and how these impacted on a therapist’s own feelings about sexuality, and how these in turn might shape their willingness to talk about sex and work with sexual material. Therapists should also reflect on the extent to which their training and professional development have equipped them to recognise and critique the heteronormative discourses discussed in this paper. Clinicians are encouraged to take it upon themselves to fill any gaps through engagement in continuing education, workshops and conferences, and build their comfort and confidence with sexual material.

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**Table 1: Sample overview**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Stem version** | **Female students** | **Male students** | **Female therapists** | **Male therapists** | **Totals** |
| A: Ben refuses heterosex | 11 | 1 | 8 | 3 | 23 |
| B: Kate refuses heterosex | 21 | 5 | 15 | 7 | 48 |
| **Totals** | 32 | 6 | 23 | 10 | 71 |