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Hanna Klaus

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Positive Woman or Negative Man?

Hanna Klaus, M.D.

Dr. Klaus is Director of Obstetrics and Gynecology at St. Francis Hospital in Wichita, Kansas.

The "dread of woman" which Karen Horney described in 1932 still underlies many of the "put-downs" which women experience today. Dr. Horney wrote that the dread of woman is expressed in men's disparagement of women. "The view that women are infantile and emotional creatures and as such, incapable of responsibility and independence is the work of the masculine tendency to lower self-respect. When men justify such an attitude by pointing out that a very large number of women do really correspond to this description we must consider whether this type of woman has not been cultivated by a systematic selection on the part of men. The important point is not that individual minds of greater or lesser caliber, from Aristotle to Moebius, have expended an astonishing amount of energy and intellectual capacity in proving the superiority of the masculine principle. What really counts is the fact that the ever precarious self-respect of the "average man" causes him over and over again to choose (as a wife) a feminine

type which is infantile, non-maternal and hysterical, and by so doing to expose each generation to the influence of such women." ("The Dread of Woman," *Int. Journal of Psychoanalysis* XIII, 1932, reprinted by Ruitenbeck in *Psychoanalysis and Male Sexuality*.)

That was in 1932. In 1976 we are trying to pass ERA. We've come a long way, but have a long way to go, especially in the area of sexual freedom. Many a young woman enters marriage or an extramarital relationship with the premise that she must be sexually available at all times. To achieve this yet avoid an unplanned pregnancy, she usually takes the pill or wears an IUD. This strikes me as the other side of mid-Victorian prudery, rather than true progress. Then, sex was "never." Here it is "always." Neither pattern corresponds to the way woman's body functions.

The burden of fertility has too long been the woman's. Until the end of the last century, biology was destiny as far as sexual matters were concerned. Margaret Sanger changed all that. Or did she? She certainly established that sexual intercourse need not result in pregnancy. The Planned Parenthood movement reflects

this ideal and has made it practical. But has it in fact, liberated woman, or is she still paying with her very being for sexual freedom?

The technological contraceptive methods available to women today, whether pill, IUD, foams, diaphragms, sterilization or even abortion during the various stages of growth of the developing human, all have one factor in common—they either block out the woman's fertility, or undo it, in the case of abortion. By excluding her reproductive potential from the sexual union, woman becomes the inverse of the man, who is always fertile: such a woman can be likened to a photographic negative of the man. Most women prefer to be positive women rather than negative men, yet millions *do* suppress their fertility in order to control their family size. Male methods of contraception also alter the man's potential and make him less than himself. Can people be fully themselves and still determine the size of their families? Since the advent of the Ovulation Method (Billings) they *can*.

The physiologic basis of the Ovulation Method, which utilizes knowledge of male and female fertility to determine the time when the couple is fertile, is well known. The man is nearly always fertile, while the woman is fertile only when she has an egg available and signals this imminent event by the flow of cervical mucus, which actually keeps sperm alive in the woman's cervix until ovulation. When people have an

understanding of their combined fertility, they can choose whether they want to achieve or avoid pregnancy. This seems so utterly simple, one may well ask why anyone would object. Many, in fact don't. More and more couples are using an understanding of their mutual fertility as their means of family planning for a variety of reasons which ranges all the way from fear of self-pollution with contraceptive pills to desiring to be oneself. The naturalness of the Ovulation Method has a high degree of reliability. In our just-completed two year study of 147 women, these figures for the unplanned pregnancy rate were found: Personal failure — 1st year, 1.23%; 2nd year, 1.38%; Biological failure — 1st year, 0.07%, 2nd year, 0.52%. (Klaus et al, "Use Effectiveness and Analysis of Satisfaction Levels with the Billings Ovulation Method.") Hence, it appeals to many.

What about the objections? The most reasonable, that the data on the use-effectiveness of the method are still coming in, is precisely the one the users tend not to wait for—the women are using the method happily and successfully with or without their doctor's sanction.

The obvious negative is that the method, if used to avoid pregnancy, requires refraining from sexual intercourse during the fertile days. Since the fertile days are recognized as they occur, not afterwards, as was the case with temperature rhythm, the users

feel comfortable knowing which are the days to avoid. They do not stop expressing their love for one another, but they find a wider range of expression than only genital intercourse. Many find that this makes for a more nuanced relationship as well as for deeper communication. To use the method successfully the man must understand the woman and the woman the man. Woman's hormonal cycle is obviously profoundly different from man's relative evenness. The mood changes from the estrogen to the progesterone phase, as well as the frequently encountered premenstrual tension, depression, irritability and lability must be explained to the couples, as well as the common finding that women are usually more desirous of intercourse during the time of the mucus, and just before the menses. Expressing this need and having a partner who is not only sensitive to the variations of the cycle but willing to undergird his wife, can deepen the marriage immensely. The type of consideration required in being sensitive to the cyclic nature of woman's fertility usually spills over into the other areas of their shared existence.

It is understandable that learning to live with one's fertility takes time and effort, and is often accompanied by fear of misreading one's body language. The new communication between the partners is a growth process which cannot happen instantly.

When people first hear of the

Ovulation Method they often ask if its use will not interfere with the spontaneity of intercourse. Unless the couple do not wish to limit their family size, of course it will. But it will not interfere with the spontaneity of love. The way in which love is expressed will have to take fertility into account. But if people value one another's total being, they may want to think about what they are saying to each other when they opt to treat the fertility of one or the other as if it were a disease to be medicated or cut out of the relationship. For a woman at least, it is necessary to be totally accepted before she can give herself fully in love. When a very deep part of her, her capacity for motherhood has to be kept out of the relationship, part of her is rejected by herself as well as her partner. Or perhaps she deliberately withholds this part of herself. Either way, she is not free, and tends not to feel good about herself; the result is often expressed as depression. We see a good deal of that particularly in women who use the pill. The fact that the normal cycle of the ovarian hormones is replaced and flattened by the pill no doubt contributes to the depression.

Some men feel more comfortable when their woman is using the pill or the IUD, not merely for aesthetic freedom from any limitation such as the condom imposes, but perhaps for a much deeper, unconscious reason which allows them to master to some extent, not only family size, but the

man-woman relationship. This mastery stems from the fact that infertile intercourse precludes going beyond the couple to begetting a child, hence it requires no commitment to and for the future.

By placing the burden of contraceptive responsibility wholly on the woman, the man not only "dumps" the load on her, he reverts to the adolescent role where the man-woman relation was less important than the conquest involved, and relating it to the peer group afterwards—in addition he also makes the woman take on a mothering relationship to him. Since that can not be tolerated consciously, he must then devalue her. When a woman feels like a sexual object she is quite likely sensing and responding to this (de)valuation of herself. Turning the tables and insisting that the man take all the responsibility, wear a condom or have a vasectomy is no better because it still isolates fertility out of the relationship while seeking to retain the psychological benefits. If this would work, it would be beneficial, yet women feel sad after an encounter based only on mutual "pleasuring." And so do men. Pleasuring without commitment is mutual masturbation, and is demeaning to people who deserve to be taken at full, not partial value. Still, many men do devalue their sexual partners; perhaps they grew up without a strong father, or the father was absent. In either case they lacked the normal avenue for mastering

their deep feelings of both love and dread of woman, hence unconsciously they are still trying to break away from their mothers. Since such men are not free yet, they tend to place their wives in a mothering role and then devalue them in an effort to cope with this vestige of childhood and adolescence. It appears that only the real experience of a father or father-figure can help the boy grow into manhood, that is, to be comfortable sexually vis-a-vis a grown woman.

Sexuality is obviously a complex thing for anyone to grapple with. The anatomy of the genitals is deeply related to the behaviour of intercourse. A man must be aggressive to penetrate. A woman must be receptive. Until recently, the prevailing myth was that to be receptive was to be passive. Women have rightly rejected this. Our feelings are just as "legitimate" as the men's, but even though this is rationally acknowledged a woman who is not afraid of her womanliness is apt to make men who are unsure of their manhood anxious.

Men react to the threat of this anxiety much the way Karen Horney described it. The woman, who needs security, withdraws her demands lest she lose her marriage or her position. Horney believed that the need for security is key to understanding the psyche of the woman; that woman can become aggressive only when her basic security needs are met. Men, on the other hand, are basically aggressive and seek to

establish security only for the sake of a stable love relationship. Whether one prefers the "agressive" model of the psyche (Freud) or the "security" one of Horney, or neither, in marriage—mutual commitment requires a willingness not only to let each partner be truly himself and herself, but to "be there" for the other person.

We are so imbued with the "instant-everything" style of life that the notion of living with the way one is, rather than changing oneself around to suit the moment seems not only new but foreign.

When I introduced the results of a pilot study of the Ovulation Method to a group of gynecologists and behavioral scientists, the idea of being able to make a positive choice of procreation without having to suppress fertility at other times was new and intriguing. Yet one woman felt that it could put women back into the Victorian state. She feared what would happen if a "woman can say no." My reply was that if a woman cannot say "no" she

can never say "yes," either. Still, the fears are real. Are women going to "control" the marriage now? I don't think necessarily. The "controlling" factor here is not the man or the woman, but the fact that together, for about eight days of each cycle the couple, together, are fertile. If it is important not to conceive another baby, then non-coital expressions of mutual love are found. This doesn't mean the couple are saying "no" to each other. They are saying "no" to more children than they can responsibly raise. It's a joint decision. The woman who is truly her own person can value all her gifts, which include her capacity for motherhood and her hormonal cycle. Because she values them she includes her husband in her appreciation of herself. He in turn can share his own feelings, needs and fears.

In the magic of sharing, each person can paradoxically become more fully himself and herself. The "burden" of fertility, viewed in this light, is no longer a burden, but the richness of the complementarity of men and women.

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