

Psychology and Psychotherapy: Theory, Research and Practice

Therapists' and non-therapists' constructions of heterosex: A qualitative story completion study

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Abstract

Objectives: Little research has examined the discourses that shape therapists' sensemaking around heterosex. This paper explores the discourses of sexuality and gender underpinning therapists' and non-therapists' responses to a sexual experimentation scenario in a heterosexual relationship. It also considers the value of the novel technique of story completion (SC), in which participants are asked to write a story in response to a hypothetical scenario, for qualitative psychology and psychotherapy research.

Design: This research used a comparative SC design (Kitzinger & Powell, 1995). Participants were sequentially presented with and invited to complete two story stems. One in which a male character suggested 'trying something new' to his female partner, and one in which the female character made the suggestion. The stems were otherwise identical.

Methods: A total of one hundred story completions written by 50 (29 female; 21 male) therapists and 50 (28 female; 22 male) non-therapists. Participants were recruited mainly via UK-based email lists and *Facebook* groups, and therapeutic training organisations, and the data were analysed using a feminist post-structuralist thematic analysis (Braun & Clarke, 2006).

Results: Both groups of participants drew on heteronormative discourses of sexuality and gender to make sense of the stem. Engaging in sexual experimentation was often depicted as a demonstration of being normal. In some stories written by women, sex was framed as a site for negotiating 'equality' and reciprocity in relationships. Therapists were more likely than non-therapists to frame 'difficulties' within relationships as opportunities for personal growth and increased emotional depth, and their stories included greater emotional complexity.

Conclusion: These findings raise questions about practitioner training and whether it results in therapists drawing on narrow and restrictive discourses of heterosex in clinical practice.

Keywords: Anal sex; BDSM; gender; heteronormativity; heterosexuality; kink; sexual difficulties

Practitioner Points:

- Training on sexual issues is largely absent from non-specialist practitioner training courses, which potentially means therapists are ill equipped to respond to public anxiety about sexual issues. Evidence from this and other research indicates that therapists' sense-making around heterosexual sexual relationships is underpinned by narrow and restrictive discourses that entrench traditional gender relations and limit sexual agency.
- Psychologists are increasingly taking up positions of clinical leadership and are looked to for models of best practice. Drawing on theorisations of sexual difficulties, and of anxieties about sexual practice, that challenge traditional gender and heteronorms, and the commodification and medicalisation of sex, is important for effective

psychological leadership relating to the treatment of sexual issues and the furthering of social justice agendas.

Introduction

Western culture has been described as increasingly sex-saturated (Gill, 2012). Sexualised imagery in advertising and popular media is common place (Gill & Sharff, 2011). Pornography has become readily available online (Attwood, 2006; Mulholland, 2015) and previously marginalised sexual practices such as Bondage/Discipline, Dominance/Submission, and Sadism/Masochism (BDSM) are more visible in the wider heteronormative culture (Barker, 2013a; Weiss, 2006); a culture that privileges and normalises heterosexuality and conventional binary gender roles. Thus, people are not only bombarded with messages that they should be willing and able to engage in sex at all times (Barker, 2013a; Kleinplatz, 2012), the internet is enabling participation in increasingly diverse sexual practices, and sexual products and services are widely available on- and off-line (Attwood, 2009; Frith, 2013).

Alongside an increasingly sexualised mainstream media, people increasingly report being unhappy about their own sexual experiences. In a recent survey on the government website yougov.co.uk, carried out by the relationship counselling charity Relate, almost a quarter (23%) of people reported being dissatisfied with their sex lives and almost a third (32%) reported having experienced a sexual problem (Marjoribanks & Darnell Bradley, 2017). People are increasingly concerned about what constitutes 'normal' sexual functioning and seeking out interventions to improve sexual performance (Kaschak & Tiefer, 2001;

Kleinplatz, 2012). Sexual experimentation is often portrayed as an essential aspect of 'healthy' heterosexual relationships, and a means to prevent or overcome sexual difficulties (Harvey & Gill, 2011). In their analyses of sex advice in women's magazines and online texts such as blogs and news articles, Farvid and Braun (2013, 2006) found that sexual experimentation was presented as a reliable strategy for women to 'have and hold' men in relationships (Hollway, 1989) and for men to demonstrate their sexual prowess. This was echoed in Harvey and Gill's (2011) critical analysis of the UK Channel 4 television programme *The Sex Inspectors* (2007), which showed that sexual experimentation was consistently advocated as a legitimate strategy to improve relationships and sexual satisfaction.

However, despite an increase in the range and availability of sexual advice to the general public, levels of anxiety about sex do not appear to have shifted over the last two decades and sexual difficulties remain common (Angel, 2012; Tiefer, 2012). The most recent British National Survey of Sexual Attitudes and Lifestyles (NATSAL-3) reported anxiety related difficulties during 'intercourse' in 42% of men and 51% of women (Mitchell, Mercer, Ploubidis, Jones, Datta, et al., 2013). The National Health Service (NHS) in Britain attempted to address people's anxiety about sex, by launching a major health promotion campaign entitled 'Sex worth talking about' (NHS, 2009). The campaign was intended to encourage Britons to bring sexual difficulties to their treating clinician. Although it was primarily intended to encourage people to talk to medical professionals, it prompted a dialogue among psychological therapists about whether therapeutic training adequately equips them to have conversations about sex, and which theoretical frameworks their work should draw on (e.g. Moon, 2011; Pukall, 2009).

Training on sexual issues offered to UK psychologists on doctoral training programmes is argued to be insufficient, an issue which has been consistently highlighted since the 1970s, yet remains unresolved (Baker, 1990; Bruni, 1974; Moon, 2011; Yarris & Allegeier, 1988). Indeed, of the fourteen counselling psychology courses accredited by the British Psychological Society (BPS), very few include modules focused specifically on sexuality (Hill, 2013). Teaching allocated to sexual issues has been noted to be between 2-16 hours over the course of a 5 to 7-year training programme and the content tends to only represent mainstream sex research, omitting critical contributions to the field (Moon, 2011).

The reluctance to put sex on training agendas for therapists has been regarded as an expression of cultural shame around sexual issues that prevents frank discussion about sex (Pukall, 2009). Clients who do disclose sexual difficulties to therapists are often told that their difficulties cannot be addressed as part of their therapy and are signposted to sex therapy services (Barker, 2011). In her article 'No sex please, we are counsellors!', Clarkson (2003) identified a general reluctance amongst therapists to talk about sexual material. Furthermore, clients' willingness to disclose is influenced by a therapist's ability to invite disclosure (Hill, 2013). Clients 'test' their therapists' ability to hear sexual concerns by discussing related topics, such as intimacy, and therapists communicate their anxiety about sexual material by failing to recognise, and respond positively to, invitations to probe further (Hill, 2013). This inability to respond to clients' cues communicates that sexual concerns are not appropriate for therapy (Miller & Byers, 2008, 2011). Miller and Byers (2008, 2011) found that therapists' ability to respond to sexual concerns related not only to their confidence as practitioners but also to their political views; trainee therapists' discomfort with sexual matters correlated with high conservatism scores. This suggests that

therapists' personal experiences, as well as their political and cultural views, potentially limit the scope of therapeutic work with sexual material.

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 regulate the outside world also shape what happens in therapy. Therapists are not immune to cultural and political influence and therapeutic approaches are equally shaped by the underlying ideology of the culture in which they develop (Hadjiosif, 2015). Without a rigorous interrogation of the belief systems that a particular therapeutic approach draws upon, therapists may become unwitting perpetrators of such beliefs. Therapists' work with sexual material is thus invariably shaped by their, and their culture's, underlying assumptions about sex. Cultural assumptions about sex, and therapist's tendencies to adopt mainstream views about sexual problems, have been a major concern for feminist scholarship on sexuality (e.g. Kleinplatz, 2012; Tiefer, 2012). Feminist critiques of the limitations of mainstream approaches to sexual problems are overviewed here in order to highlight alternative ways of making sense of such problems and to provide a theoretical context for the current study.

Feminist Challenges to Mainstream Approaches to Sexual Problems

Feminist sexologists advocate a broadly social approach to understanding people's anxieties about sex, arguing that social pressures around sexual performance and people's desire to be normal are key constituents of such anxiety (Denman, 2004; Kaschak & Tiefer, 2001; Kleinplatz, 2012). Feminist scholars have argued that current mainstream approaches to sex therapy are predominantly informed by the American Psychological Association's

Diagnostic and Statistical Manual (DSM) nomenclature and cognitive-behavioural perspectives (Barker, 2011; Kaschak & Tiefer, 2001; Tiefer, 2012). DSM nomenclature and the goal orientated nature of cognitive-behavioural therapeutic interventions are argued to produce binary distinctions between 'normal' and 'abnormal' sexual functioning, which perpetuate heteronormative versions of 'good', 'normal' and 'natural' sex (Denman, 2004; Kleinplatz, 2012). 'Normal' sex is predominantly conceptualised as penile-vagina penetration resulting in orgasm, where men take an active role and women a passive one (Denman, 2004; Potts, 2002). Feminist sexologists (such as the working group for a new view of women's sexual problems, 2002) have expressed concern about the influence of both DSM distinctions of function and dysfunction and cognitive behavioural therapy on mainstream approaches to sex therapy. They have argued that these are reductionist and tend to focus on the physical functionality of genitals over the subjective and social meanings of sexual encounters (Kaschak & Tiefer, 2001; Kleinplatz, 2012). Rather than offering medically informed treatments for 'problems', they argue that therapists should highlight how social norms regulate and limit the expression and experience of sexuality (Foucault, 1990) and underpin the desire to be normal (Kleinplatz, 2012).

Therapists' Sense-Making Around Heterosex

Research empirically examining the discourses that therapists draw on in making sense of heterosex is limited. The few studies that directly examine therapist's accounts, highlight the dominance of heteronormative sense-making (e.g. Guerin, 2009; Penny & Cross, 2017). Penny and Cross (2017) in online interviews with eight male therapists observed how these men's accounts of erotic countertransference drew heavily on discourses of hegemonic masculinity to explain sexual attraction to female clients. For

example, therapists constructed erotic countertransference in terms of the naturalness and inevitability of straight men's physical attraction to female clients and emphasised the responsibility women hold for inciting male desire. Similarly, in an interview study, Guerin (2009) found that therapists' talk about sex therapy and heterosex tended to reify dominant cultural and sexological norms rather than challenge them. For example, she argued that therapists' prioritisation of genital-coital-orgasms and restricted possibilities for alternative sexual practices. Accounts of sex therapy practice that challenged heteronormative framings were produced by sex therapists who drew on feminist and poststructuralist discourses. Guerin's findings suggest that therapists' personal and political views are pivotal in creating possibilities for a deconstructive (sex) therapy practice that is able to challenge heteronormative discourses.

The current study

The current study uses the story completion (SC) method to examine therapists and non-therapists' sense-making around heterosex. SC involves participants completing one or more versions of a story stem; a hypothetical scenario written, in this instance, in the third person. In existing story completion research, comparative designs have been used to explore both differences in the portrayal of female and male characters in the same scenario (e.g. Clarke, Braun & Wooles, 2014; Kitzinger & Powell, 1995; Frith, 2013) and differences in the responses of female and male respondents to the same scenario (e.g. Hunt, Swartz, Carew, Braathen, Chiwaula et al., 2018; Kitzinger & Powell, 1995; Whitty, 2005). Thus, one or two levels of gender comparison are used to explore participants' sense-making around gender and whether and how their stories draw on and reinforce, or challenge, dominant gendered discourses. Our comparative design explores both character

portrayal and respondent differences in relation to a 'sexual experimentation' scenario in a heterosexual relationship. We compare both the responses of female and male participants and therapist and non-therapist participants. We tentatively make the interpretative leap that the patterning in the responses of a particular participant group reveals something about the predominant discourses available to that group to make sense of the scenario. The use of a comparison group of non-therapeutically trained participants allows us to highlight the distinct features of therapists' sense-making.

The use of a 'sexual experimentation' scenario provides not only a contemporary and familiar heterosexual scenario, but also one that may elicit participants' negotiation of dominant ideals of 'normative' heterosex (Barker, 2011; Kleinplatz, 2012). Thus, this paper aims to expand the existing literature around therapists' sense-making around heterosex by examining whether and if so how heteronormative constructions of sexual practice shape and delimit therapists' and non-therapists' sense-making around heterosex. Furthermore, the paper examines whether there are notable differences in the sense-making of the female and male, and therapeutically trained and non-therapeutically trained, participant groups, and in the responses to the female and male characters.

Methodology

SC has been developed as a method for qualitative research by Kitzinger and Powell (1995), and more recently Braun and Clarke (2013), having previously been used as an assessment tool in clinical contexts (Rabin & Zlotogorski, 1981), and quantitative attachment research (e.g. Bretherton, Oppenheim, Emde & the MacArthur Narrative Working Group, 2003). SC was originally conceived as a projective technique, designed to

overcome barriers to direct self-report, and particularly barriers of awareness (a person's lack of awareness of their own emotions) and barriers of admissibility (a person's difficulty in admitting certain emotions) (Moore, Gullone & Kostanski, 1997). The assumption is that asking participants to respond to hypothetical scenarios about other people's behaviour allows them to 'relax their guard' and write with less reserve than if they were asked about their own behaviour directly (Will, Eadie & MacAskill, 1996). Social desirability is especially a concern when conducting research with therapists, as therapeutic training can encourage a detached and 'politically correct' stance, which may mask underlying socially undesirable views (Tribe, 2015). SC is particularly recommended when seeking a wide range of responses, including socially undesirable ones, and when seeking to reduce the threats associated with researching sensitive topics (Braun & Clarke, 2013), both of which are relevant here.

To date, SC has been little used in qualitative research, but we argue that it provides exciting possibilities for psychology and psychotherapy research and the examination of the cultural resources shaping sense-making of particular phenomena. Following existing social constructionist SC research (e.g. Beres, Terry, Senn & Ross, 2017; Frith, 2013; Clarke et al., 2014; Kitzinger & Powell, 1995), we conceptualise SC as a tool for exploring the discourses that constitute and reflect dominant socio-cultural understandings around heterosex. As such, this research does not aim to draw any conclusions about participants' own experiences of heterosex; rather the aim is to explore the discourses utilised by participants as they attempt to make sense of the scenarios described in the story stems, and the implications of these. We define discourse as ways of speaking or writing that construct social objects in specific ways (Foucault, 2003). Discourses both permit and delimit what can

or cannot be intelligibly articulated about the world, and thereby construct the reality of the social world and the subjectivities of the people within it in particular ways, with particular effects and implications (Willig, 2013). Our interpretation of the stories is specifically informed by feminist poststructuralism, which examines the discourses that regulate and shape the socio-cultural context, particular with regard to gender (e.g. Gavey, 1989), with the ultimate aim of making visible the discourses that constrain and restrict gendered social practices and subjectivities. Thus, a feminist poststructuralist interrogation of the data involves the identification of discursive patterns in participants' writing, that serve or challenge particular social 'truths' about heterosexuality (Butler, 2004).

Participants were sequentially presented with the male and female version of story stem (the order of presentation was randomised across participants) and asked to complete them (see Table 1).

[Insert Table 1 about here]

Participant Demographics

'Therapist' encompasses professionals who apply psychological therapy with clients (e.g. counselling and clinical psychologists, psychotherapists, systemic, psychodynamic and CBT therapists). Therapists from diverse training backgrounds were included because of our interest in exploring whether therapeutic training more broadly may shape engagement with heteronormative discourses (rather than the impact of any one therapeutic orientation). Whilst therapeutic training encompasses a wide array of philosophical orientations, there is a common expectation that therapists will have a greater understanding of the human condition and a more sophisticated grasp of social relationships

than people who aren't therapeutically trained (Feltham, 2007). See Table 2 for demographic characteristics of the sample and Table 3 for professional characteristics of the therapist sample.

[Insert Table 2 about here]

[Insert Table 3 about here]

Data Collection

The design created three possible comparative levels of analysis: (1) between the representations of the female and male character; (2) between the stories of therapists and non-therapists; and (3) between the stories of female and male participants. These three levels are represented in Figure 1 below.

[Insert Figure 1 about here]

Data were gathered electronically using the *Qualtrics* online survey software. To reach motivated participants, the link was posted in several UK based *Facebook* interest groups, as well as distributed via various interest-based *JISCMail* – the UK National Academic Mailing List Service – Listservs. In addition, the first author approached UK organisations she had professional relationships with to ask for permission to circulate the link to the study to employees. To obtain participants for the therapist sample, the link was circulated to various UK-based training courses for counselling and clinical psychologists (both staff and trainees were invited to participate). We recruited roughly equal numbers of therapists (N=49) and non-therapists (N=51), and female (N=57) and male (N=43) participants for each of the 'conditions' illustrated in Figure 1.

Feminist Poststructuralist Thematic Analysis

In the existing SC literature, some form of thematic analysis (TA) is the most commonly used analytic technique. We used Braun and Clarke's (2006, 2013) approach to TA to analyse the data, informed by feminist poststructuralist theory (e.g. Gavey, 1989). The analysis was not deductive in the sense of applying codes derived from pre-existing theory to the data, rather feminist post-structuralist theory provided a lens through which the data were interpreted in each phase of the analytic process and formed part of our interpretative resources for identifying and making sense of recurrent patterns of meaning in the data. The first author led the six phases of coding and theme development; each phase was reviewed and discussed with the second author. In the first phase data were read and re-read to note any initial analytic observations (phase 1). The second phase involved a process of systematic data coding, identifying key features of the data (phase 2); the data were then examined for broader patterns of meaning or 'candidate themes' (phase 3). After a process of review and refinement (phases 4 and 5), two main themes were generated, one which captured the predominant way in which all participant groups made sense of the scenarios and one which captured would-be challenges to heteronormative sensemaking in some of the stories written by female participants. The analysis also identified recurrent differences in the stories written by therapist and non-therapists, these differences cut across both themes and centred on differences in both story writing style and content. The write-up constituted the final phase (6) of analysis and involved selecting illustrative data extracts and the weaving together of theme definitions (5) and other analytic notes into a coherent analytic narrative.

Analysis

The results are reported under three main headings: (1) sexual experimentation as a

demonstration of being normal; (2) addressing relational power imbalances through sexual experimentation; and (3) differences in therapists' and non-therapists' responses.

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 text. Data extracts are tagged with participant sex, professional group and version of the story completed (SES-Sarah makes the suggestion, SEM-Matt makes the suggestion).

Sexual experimentation as a demonstration of being normal

Around half of the stories depicted sexual experimentation as an expected part of 'good' sexual practice. 'Vanilla sex' (sex that is deemed conventional by contemporary culture) was regarded as undesirable and dull, whereas kink/BDSM and sex inspired by pornography were depicted as aspirational goals for Matt and Sarah:

He is bored of the same old, same old, and wishes Sarah was a bit more into experimental stuff... (Male, non-therapist)

Matt is upset as he feels that Sarah may want to try another way of having sex or changing what they are doing as Sarah is not enjoying herself. Sarah explains she wants to explore and try new things Matt asks Sarah what Sarah has in mind and she produces a carrier bag that is full of leather looking items. Sarah unpacks the bag and shows Matt that she has brought some handcuffs, whips, and a strap on so that she can give Matt anal (Female, Non-therapist).

In many stories Matt and Sarah were presented as suggesting the 'rudest thing' they can think of despite feeling ambivalent or uncomfortable about doing so. For example, Sarah

offered a 'tit wank', as it was the 'rudest thing she could think of' (female, therapist), and Matt agreed to Sarah's request of using whips as 'he didn't want to appear boring' (male, therapist, SES). The tendency for protagonists to be presented as enduring discomfort in order to perform 'normal' and 'rude' versions of sexual practice may suggest that being perceived as 'boring' or 'not rude' would result in greater discomfort. For example, despite being presented as content in the below extract Sarah is presented as compelled to sexually experiment following unfavourable comparison with her friends:

Matt is a gentle guy and he knows both he and Sarah are happy with their sex life (...)
Sarah says she spent the last night with girlfriends and, when they were talking about sex, she realised that her and Matt's relationship is perhaps more equal and gentle than her counterparts, which in many ways she is fine with. But she found herself getting turned on by descriptions of rougher and more dominant sex (Male, therapist).

Unfavourable comparison to others was presented as directly impacting on Sarah and Matt's thoughts and feelings about their own sexual experience and influencing their sexual practices:

Sarah was always talking to her friends about what they were getting up to sexually. She found that her and Matt's relationship was rather dull compared to their's so suggested to experiment (male, non-therapist).

Matt has been talking to his friends who regularly have sex with a number of different partners; they have told Matt about the performance of their sexual partners and Matt is therefore keen to try something new with Sarah. Sarah has also

spoken to her close friends about her sex life and her friends have encouraged Sarah to be more adventurous [...] Matt and Sarah try something out that Matt has heard his friends talking about and seen on the Internet. (male, therapist).

In both of these stories, little reference was made to how sexual experimentation may increase Sarah and Matt's own pleasure and satisfaction. These stories show how other people's sexual practices were presented as directly impacting on the couple. By using 'friends' as a plural it gives the impression that the wider collective is engaging in particular sexual practices and serves to normalise these practices. Furthermore, the need to conform to social norms was depicted as motivating Sarah to suggest sex acts that she perceives 'all men love' (female, non-therapist) as a way of keeping Matt's attention:

Sarah suggests they should try anal sex [...] partly because she thought that men in general liked to have anal sex. She wanted to please her new partner whom she was beginning to fall in love with [...] she began to think that perhaps Matt had not done anal sex before and she began to worry that he might think she was dirty or slutty'. Matt started to feel slightly uneasy at the thought of his girlfriend having anal sex with previous partners, as a consequence Sarah was beginning to regret making the suggestion (male, non-therapist).

The motivation for Sarah to introduce anal sex into their routine was not presented as aimed at increasing her own pleasure but to increase her ability to satisfy her partner. The participant constructed Sarah's suggestion as a way for her to demonstrate her love for Matt. In so doing, the story reproduces the idea that satisfying male sexual desire is central to women's role in heterosex (Tiefer, 2008). Sarah's concern was presented as primarily

about how her suggestion may affect her value as a sexual commodity. This story was underpinned by the idea that the same sexual request has the potential to both increase a woman's value (she is adventurous) and decrease it (she is dirty, slutty).

Similarly, in another story, when Matt suggested anal sex, Sarah was presented as considering this on the basis of whether it increased or decreased her value as a sexual commodity to Matt:

he has heard that it is good and just about everyone does it [...] She can't see how anal sex will bring her any pleasure and she's worried about hygiene issues [...] Matt tells her not to be silly [...] he loves her and he thinks the view will be 'hot'. Sarah agrees to try it so long as he goes slowly and stops if it is too painful – Sarah is surprised that it didn't hurt as much as she thought but she didn't really enjoy it. She's worried Matt has really liked it and will want to make it a regular activity in their sex life. She asks Matt what he thought. He tells her it was okay, not really as good as he'd hoped. Sarah feels like she's done something wrong, like perhaps she didn't do it right. She hears that all men love anal so she worries that something went wrong for Matt to say he 'could take it or leave it' She feels irrationally violated, like she consented to something she didn't want, just to make him happy, and he doesn't even appreciate it. They decide not to have anal sex again in the future. Sarah can't stop worrying that Matt is not satisfied with their sex life so she makes sure he knows that she's still open to trying new things (female, non-therapist).

While Matt is portrayed as being patronising and dismissive of Sarah's worries about

hygiene, his offer of reassurance suggests that Sarah's appearance during sex acts is nonetheless important. His sexual curiosity was presented as taking precedence over Sarah's concerns. This may be understood within a heteronormative framework that assumes men want sex and women want relationships (Beres et al, 2017; Potts, 2002). Both Matt and Sarah are portrayed as understanding these to be exchangeable commodities, whereby certain sex acts may be offered or requested in exchange for relationship security. Matt's sexuality is prioritised, by suggesting that Matt's experience of pleasure is a legitimate reason for Sarah to consent to potentially painful sex acts. Sarah is constructed in a lose/lose position as she is worried both about Matt liking it and not liking it. Because he did not *'really'* like it, Sarah felt *'irrationally violated'* (female, non-therapist). In this and other stories, Matt was positioned as not only *'needing'* sex, but also *'deserving'* pleasure. This has been termed the *'double standard'* that *'subordinates women's sexuality to that of men'* (Jackson & Cram, 2003: 115). Sarah was presented as *'irrational'* for feeling violated, since she consented to the sex act. Indeed, she may not have felt violated if he had been more appreciative. The pleasure gained from pleasing Matt would have therefore made it a worthwhile endurance. It is only in the absence of Matt's pleasure that Sarah's reward fails to manifest, thereby drawing attention to her *'poor'* investment. Indeed, preserving the role of the enticer was presented as Sarah's main objective in many stories. In the extract below Sarah is depicted as rejecting the idea of anal sex not because she will not find it pleasurable but because Matt may change his mind about it and find it *'rubbish'*:

If it is rubbish, we'll just won't do it again? If it is rubbish? Sarah thought, are you joking? The only reason why it would be rubbish if you suddenly get turn off because it becomes apparent to you that your face is in a place you would only see if you

lived inside a toilet, that's why. And once the disgust is planted there is no going back that would be it, we could never see each other again...one of us would probably have to leave town...what a stupid idea (female, therapist, SEM).

Sarah is portrayed as taking account of all of Matt's possible future feelings when deciding whether to accept or reject the suggestion of a sex act. Disgust was presented as a plausible outcome which, once evoked, is feared to permeate his perception of and feelings about her. This highlights the importance attributed to Sarah's potential to evoke sexual excitement in Matt. Once this is reduced Sarah's ability to 'have and hold' (Hollway, 1989) Matt may also diminish and therefore threaten the future of the relationship.

Addressing relational power imbalances through sexual experimentation

For feminist research to serve an emancipatory agenda, it is important to identify instances where hegemonic heteronormative sense making is resisted (Hockey, Meah & Robinson, 2007). In the stories written by women in response to Sarah suggesting 'something new', some evidenced resistance to the 'have/hold' discourse (Hollway, 1989) by drawing on discourses of reciprocity when making sense of either Sarah's sexual request or her response to Matt's sexual request:

He should also be penetrated by her with a dildo. Matt is shocked and says he is not curious on anal because he is not gay and that he has no interest in being penetrated. Sarah laughs and says she did not think only gay men could enjoy anal sex, that she thinks it is a matter of equality in sex – if she does that for him then he should also do that for her, which requires similar preparation (condom use, lubricant, relaxation and confidence in the other). Matt spends some weeks without

mentioning it and then he admits it is a matter of justice and equality and that he never thought she would ask him that (female, therapist).

Engagement in particular sex acts was seen as an important vehicle for producing equality within relationships, as well as a mechanism through which power may be redistributed. In this story, for example, Sarah is portrayed as assertively stating that she is willing to engage in anal sex, not because she wishes to, or because Matt has asked her to, but because it allows her to make the same request of him. Sarah's willingness to agree to anal sex was therefore conditional.

The frequency of the depiction of a sexual relationship without any reference to pleasure is a striking feature of the data. Instead, sex was presented as a site where equality can be negotiated. In this story, Sarah is presented as insisting on what is framed as an 'equal exchange' of sex acts as a way to produce equality in her relationship. Similarly, the following story resisted the common use of an active male and passive female narrative (Jackson & Cram, 2003) by depicting a mutual and simultaneous use of the vibrator:

[Matt] reaches down under the bed to bring out a shiny metal vibrator [...] 'Well come on', says Sarah, 'switch it on and let's see what it does', they both become more aroused, they stop giggling, and with Matt and Sarah lying side by side, share the vibrator moving it between penis and clitoris to bring them both to a warm, all enveloping, intense climax (female, non-therapist).

The focus here again was on the equal distribution of power through the depiction of simultaneous access to pleasure. Other instances of resisting a more passive representation

of women included a depiction of Sarah as a 'femme fatal' with hidden and 'dark' sexual desires:

Sarah explains that she gets off on having sex in public places, saying that the higher the risk of being caught by someone the better. Although Matt has little experience of this, he finds Sarah so exciting that he agrees in an instant! [...] before Matt knew it he had started dogging with Sarah with other people in the park, Sarah's lust for risk had increased to taking drugs to enhance her orgasms and having unprotected sex with strangers. Matt knew this was wrong and noticed a change in Sarah. Her moods changed on a daily basis, from being excessively clingy to pushing him away. Matt was torn by what was right morally and his love for Sarah (female, therapist).

Echoing classic conceptualisation of 'la femme fatal' (Allen, 1983), Sarah was presented as a mysterious and seductive woman whose charms ensnare her lover Matt. Sarah's suggestion of something new was framed as leading to 'dark and dangerous' places, that put herself and Matt as well as their relationship at risk; impacting on her mental health and ability to make rational decisions (see also Beres et al., 2017). The presentation of women as 'femme fatals', positions men as victims of their sexual charms, which serves to mitigate their responsibility for subsequent sexual acts. The idea of 'la femme fatal' is underpinned by a virgin/whore binary (Denmark & Paludi, 1993), which frames female sexuality either in terms of its reproductive purpose or as an object of male desire. This limits the range of female sexual expression (Ussher, 2006) and ultimately offers an account of female sexual agency that reinforces traditional gender and sexual norms.

Comparing therapists' and non-therapists' responses

Therapists largely drew on the same heteronormative discourses as the participants who had not been therapeutically trained. However, there were some differences in the stories written by the two groups. Whilst therapists' conceptualisations of sexual experimentation were mostly heteronormative, they framed the reactions of the characters in the scenarios in different ways from non-therapists. Therapists tended to write stories that were more emotionally complex. For example, the characters tended to go through greater emotional variation; from initially experiencing two or more (often conflicting) emotions to being depicted as undergoing emotional change as the narrative develops, and usually arriving at an entirely new emotion towards the end of the story. For example:

Sarah is initially taken aback and a bit upset and embarrassed as she thought her and Matt had a very satisfying sex life but she feels a frisson of excitement at the thought of what Matt might suggest. 'Did I get the wrong end of the stick?' 'Is he unsatisfied?' She decides to not jump to conclusions. Matt had thought about bringing this up for a while, he wanted to take things further with Sarah. [...] 'I'd like you to talk dirty to me, tell me what you want me to do, how much you want me to do it and when'. Sarah froze – how would she find the right words? [...] Tentatively she began to tell Matt [...]. The next day Matt and Sarah discussed how they both felt about introducing new experiences into their sex life and decided to try things out on a regular basis to keep the excitement and closeness they had felt last night (female, therapist).

As this story illustrates, the process by which characters' emotions shifted in the stories written by therapists was typically through internal dialogue. Unlike the stories written by non-therapists, the therapists' stories commonly advocated communication, and often depicted it as a gateway to improved relationships. As such therapists' stories included more direct speech and greater depiction of the characters' internal thoughts. Therapists' stories not only constructed communication as an important component in people's relationship, but also constructed more positive outcomes through effective communication.

Therapists' stories were also more likely to contain multiple viewpoints than non-therapist stories. For example:

Sarah felt very hurt by the suggestion, as she had always tried to please Matt. Matt had not meant it as a criticism and he was annoyed about Sarah's abruptness. It was only when they sat down and talked about everything that they were able to understand where the other person was coming from (male, therapist).

This use of multiple viewpoints seemed to allow therapist-participants to take a more detached position from the narrative. Detachment could be regarded as a way of safeguarding the therapists' professionalism. One therapist made it clear that he was 'borrowing' the narrative from a client who had presented to therapy with a similar situation: 'this parallels the narrative of a female client I am working with' (male, therapist).

Holding a removed position may be understood as a manifestation of therapists' professional training, which advocates a detached, self-controlled stance in trainees (Feltham, 2007). Similarly, synonymous with the clinical competencies of therapists,

therapists often gave a 'formulation' for the character's behaviour. For example, therapists, unlike non-therapists, sought to explain the character's behaviour through previous life events. Matt's shyness was related to growing 'up as an only child of conservative parents' (female, therapist), Sarah's forthrightness was explained by 'her parent's liberal attitude towards sex' (female, therapist). This not only provided richer accounts of the characters but was perhaps also a reflection of the way the therapist-participants drew on the discursive resources their professional training provided access to when completing the stories.

Discussion

This study explored therapists' and non-therapists' sense-making around heterosex, and particularly how they made sense of sexual experimentation as an opportunity to conform to pressures to be 'normal' and 'good' at performing sex. Rather than creating new possibilities for men and women, the findings tentatively support the argument that the mainstreaming of pornography and kink may have contributed to new social expectations and pressures and altered the parameters of what it means to be normal (Martin, 2013). As such more *prima facie* transgressive versions of sex ultimately act as a veneer that mask older and more traditional sexual ideologies. The gendered nature of 'old' heteronormative discourses interweave to produce different mechanisms for meeting these 'new' obligations. The consequences of failing to conform to these new heteronorms remain gendered.

In her landmark essay 'Thinking sex', Rubin (1984) examined the value system inherent in social understandings of sexual practices that results in some practices being

defined as good/natural and others as bad/unnatural. She introduced the idea of the 'charmed circle' of sexuality wherein privileged forms of sexuality reside; unprivileged forms occupy the 'outer limits'. The results of this study tentatively suggest a reorganisation of Rubin's charmed circle of sexuality, and potentially provide further evidence of the mainstreaming of pornography and kink (Barker, 2013a; Mulholland, 2015). Sex acts previously deemed to be in the 'outer limits' of sexuality (manufactured objects, threesomes etc.) were frequently suggested as an expected part of sexual practice. Whilst the boundaries of 'charmed' sexuality may have changed, the desire to be 'charmed' persists.

The on-going de-stigmatisation of BDSM/kink is beneficial for people engaged in these sexual practices (Taylor & Ussher, 2001). However, it may also set a new benchmark for normative (hetero)sexual practice and place additional expectations and pressures onto heterosexual couples (Barker, 2013b; Weiss, 2006). Indeed, engagement in adventurous and exciting sex acts was treated as an accepted marker of 'good' sex in the stories. In that sense, sexual experimentation can be seen to provide Sarah and Matt, both as a couple and as individuals, with a way to signal and perform their normality.

The stories constructed the characters' concern with being 'charmed' or 'normal' as the driving factor in their decision to engage in, or refrain from, particular sexual practices. As such, the binaries of normal/abnormal and natural/unnatural that demarcate the boundaries between charmed and uncharmed practices continue to maintain the desire to stay on the charmed side of this boundary. For example, sexual experimentation was constructed in ways that created obligations on the characters to engage in particular forms of sex rather than liberating them to pursue greater sexual freedoms. This contrasts with

the assumption that the influence of pornography on mainstream representations of sex has increased access to pleasure through making available more diverse representations of sex (Weiss, 2006). Instead of giving greater access to pleasure, the concept of sexual experimentation was employed as a tool that allowed the characters to perform normative sex. As such, both male and female characters were frequently depicted as feeling pressured to suggest 'something new', as well as to respond positively when 'something new' was suggested to them, despite also being portrayed as feeling anxious and uncomfortable.

Indeed, feminist sex therapists suggest that individuals' desire to be normal has a greater influence on their sexual practices than their desire to experience pleasure (Barker, 2011; Kaschak & Tiefer, 2001; Tiefer, 2012). They argue that distress about not feeling 'normal' drives people to seek treatment to overcome physical barriers to 'normal' heterosex (e.g. penis-in-vagina intercourse). Conventional treatments often disregard the importance of pleasure. Thus, in making such treatments available, therapists collude with individuals' anxieties about being 'normal' and can inadvertently turn therapy into an oppressive perpetuator of a 'toxic norm' (Kleinplatz, 2012: 117).

This study contributes to the growing body of critical scholarship on heterosex (e.g. Beres et al., 2017; Fahs & Gonzalez, 2014; Frith, 2015), and offers new findings about how the conceptualisation sexual experimentation may be situated in wider socio-cultural discourses. Patterns in depictions of male and female sexuality could be observed across both scenarios, which highlights the regulatory power that cultural discourses hold over how people make sense of (hetero)sexual relationships and the men and women within them. Additionally, this research demonstrates the pervasive nature of heteronormative

discourses, by showing how therapists' sense-making is shaped by the same restrictive discourses of heterosex as non-therapists. However, there were also some marked differences in the stories written by the therapists and non-therapists.

The differences in the stories written by the two participant groups were especially apparent in relation to depictions of relational problems and difficulties. Therapeutic training and practice revolves around finding creative and meaningful solutions to the difficulties people present with (Johnstone & Dallos 2014; Tribe, 2015). The close link between the core attributes of therapeutic training and the distinct features of the therapist's stories suggests that they drew on their professional skills and experiences to make sense of the characters' relationships. Professional training may give therapists access to broader discourses around relationships, problems and difficulties (Moon, 2011). It would seem that the lack of training in sexual issues and the absence of a critical understanding of sex also impacted on the range of discursive possibilities available to therapists in their sense making of sex. It therefore follows that offering therapists' critical frameworks for making sense of heterosex, would potentially increase therapists' discursive repertoires and foster more nuanced understandings of how heteronormativity continues to perpetuate constraining and oppressive practices of gender expression.

A number of recommendations for psychology and psychotherapy research, training and practice arise from this research. We call for the (greater) inclusion of feminist and other critical approaches to heterosex on UK therapeutic training programmes and the greater involvement of leading experts in the field in such programmes (e.g. programme leaders could consider inviting such experts to contribute to their programmes). Therapists would benefit from engaging with the critical literature on heterosex and reflecting on how

it could inform their work with sexual material (e.g. Barker, 2012; Kleinplatz, 2012; Moon, 2016). Rubin's (1984) charmed circle provides therapists with a useful tool both for reflecting honestly and openly on their own (normative) assumptions around sex, and for client work (e.g. clients could be invited to create and reflect on the values implicit in their own charmed circle). Greater criticality will also allow applied psychologists to advance political debates around the role of psychological theory and practice in perpetuating social oppression in the context of sexual issues and build important bridges between critical and applied psychology.

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Table 1: The different versions of the story stem

Matt version: *Matt and Sarah have been having sex for a while, tonight Matt suggests trying something new...*

Sarah version: *Sarah and Matt have been having sex for a while, tonight Sarah suggests trying something new...*

Table 2: Participant demographics

<i>Participant Group</i>	<i>Female Therapists</i>	<i>Male Therapists</i>	<i>Total Therapists</i>	<i>Female N- Therapists</i>	<i>Male N- Therapists</i>	<i>Total N- Therapists</i>	<i>Overall Total</i>
<i>Total Number</i>	28	21	49	29	22	5	100
<i>Heterosexual</i>	26	18	49	18	17	35	84
<i>Bisexual</i>	2	-	2	6	-	6	8
<i>Gay Man</i>	-	3	3	-	3	3	6
<i>Lesbian</i>	-	-	-	2	-	2	2
<i>SND*</i>	-	-	-	3	2	5	3
<i>Aged 21-30</i>	8	4	12	11	7	18	30
<i>Aged 31-40</i>	15	8	23	11	10	21	44
<i>Aged 41-50</i>	2	6	8	3	2	5	13
<i>Aged 51+</i>	3	3	6	4	3	7	13
<i>SND*</i>	-	-	-	-	-	-	0
<i>White</i>	25	15	40	27	17	44	84
<i>Black</i>	-	5	5	-	3	3	8
<i>Asian</i>	2	1	3	-	2	2	5
<i>Middle Eastern</i>	-	-	-	1	-	1	1
<i>Mixed Ethnicity</i>	1	-	1	1	-	1	1
<i>SND*</i>	-	-	-	-	-	-	0
<i>Single</i>	2	2	4	7	6	13	17
<i>Partnered</i>	26	19	45	22	16	38	83

<i>SND*</i>		-	-	-	-	-	-	-	
<i>*Supplied no data</i>									

Table 3: Professional practice characteristics of therapist sample

	Female Therapists	Male Therapists	Total
<i>Years of Practice</i>			
<i>1-5</i>	15	4	19
<i>6-10</i>	9	7	16
<i>11+</i>	3	7	10
<i>Supplied no data</i>	2	3	5
<i>Amount of training in sexual issues</i>			
<i>No training</i>	12	12	24
<i>Some training</i>	8	5	13
<i>Trained sex therapist</i>	6	1	7
<i>Supplied no data</i>	2	3	5
<i>How frequently does sex come up in your work with clients?</i>			
<i>Never</i>	2	4	6
<i>Occasionally</i>	18	11	29
<i>Frequently</i>	7	5	12
<i>Supplied no data</i>	1	2	3
<i>Therapeutic orientation</i>			
<i>Psychodynamic</i>	6	3	9
<i>Humanistic</i>	6	12	18
<i>Cognitive Behavioural</i>	7	3	10
<i>Systemic</i>	7	4	11
<i>Supplied no data</i>	2	0	2

Figure 1: Number of participant stories per comparative level

