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Leaving a lot to be desired?
Sex therapy and the discourses of heterosex

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Abstract

In this thesis I explore the social construction of sexuality and sexual dysfunction. Interviews were undertaken with 20 sex therapists practising in Aotearoa/New Zealand in order to elicit accounts of contemporary sex therapy practice in the local context. Using a feminist poststructuralist lens, I explicate and critically examine the dominant discourses informing the construction of sex therapy, and heterosexual sexual relations, and what these discourses enable and constrain. I draw attention to some of the assumptions embedded in the construction of the sexual dysfunctions in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV-TR, APA, 2000), and in accounts of sex therapy practice, examining the ways in which these are based on taken-for-granted norms of (hetero)sexuality and highlighting the differently enabled gendered sexual subjectivities they (re)produce. Although there are nine sexual dysfunctions identified in the DSM-IV-TR, all of which I briefly outline in Chapter Four, I restrict my focus in the analytical chapters to the conceptualisation and treatment of vaginismus, orgasm difficulties in women, discrepancies in desire and, relatedly, the gendering of desire through powerful sociocultural discourses and representations. I pay particular attention to the implications of these for heterosexual women's sexuality. I also explore some of the generic concepts that dominate the construction of therapy at a broader level than that of sex therapy alone, arguing that while these offer some useful ways of framing therapy they also constrain therapy practice in important ways.

Through a critical review of the sex therapy literature and accounts of practice from those interviewed, I contend that contemporary sex therapy tends to reify dominant cultural and sexological norms rather than challenge them. My analyses show that the dominant discourses informing constructions of sex therapy and heterosexual sexual relations produce particular types of sex as normal whilst marginalizing sexual acts or practices that fall outside of such restrictive parameters. In particular, I argue that the genital-coital-orgasm construct that is hegemonic within sex therapy restricts possibilities for alternative erotic pleasures and possibilities amongst heterosexuals whilst contributing to the invisibilization of sexual identities other than heterosexual.

Accounts of sex therapy practice that were able to contest such framings are also highlighted. Because these came from sex therapists drawing on radical feminist or feminist poststructuralist discourses, I suggest that these discourses offer important possibilities for a deconstructive (sex) therapy practice that is able to challenge an often inequitable sexual status quo. Attention is also drawn to the significant constraints which act to restrict clients' choices and possibilities for sex therapists to practise in more critically questioning ways. I conclude this thesis with an 'invitation to reflection' where I briefly discuss some deconstructive approaches that I have found useful for developing ongoing reflexive analysis of my own taken-for-granted assumptions in the area of sexuality, and for aiding my thinking about therapeutic practices that support my political and theoretical commitments and that attend to some of the issues outlined in this thesis.

To Marshall with love, and with thanks
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