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Female Sexual Unresponsiveness in the Absence of Psychological or Physical Causes

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One of the more difficult issues to understand and treat is female sexual unresponsiveness. The relationship climate within the marital context is explored as one possible cause of inhibited sexual desire. Three pivotal relationship elements—commitment, trust, and intimacy—are discussed. Treatment consists of skills training, education, identifying and challenging false core beliefs, and behavioral techniques. The goal is to restore to the marriage a fulfilling sexual relationship for both the husband and the wife.

Shelby (names are fictional) had initiated the appointment, fearing that Jason was on his way out. She began the counseling session saying, "I can't be the wife Jason needs, and I think he is going to leave me."

"That's crazy," Jason said, "I'm not going anywhere; I just want things to be like they used to be."

Both Shelby and Jason were professing Christians, and wanted to make the marriage work. As they continued to talk, a familiar theme emerged. Early on in their relationship they had made love frequently and both really enjoyed sex. During the past year or so, however, they had made love only occasionally, and it was becoming increasingly difficult for Shelby to respond. She was feeling inadequate and guilty. He felt frustration and anger and questioned whether she loved him any more.

How many of us, how many times, have watched this theme played out before us, asking ourselves, *How have they gotten to this place?* A woman's inability to respond can be based on many factors: past sexual

abuse; unresolved anger and hurt in the marital relationship; feelings of guilt; unresolved anger toward her father, and/or other childhood or past relationship issues; physiological causes; learned negative views around sexuality and womanhood; stress and fatigue; and possible side effects from medications. For Shelby and Jason, Shelby's unresponsiveness appeared to be directly correlated with an unhealthy climate they both had unwittingly created in their marriage.

Female Hypoactive Sexual Desire Disorder

The focus of this article is the interpersonal climate of marriage as it correlates with the diminished sexual desire and responsiveness of the wife. In clinical categories this is referred to as Female Hypoactive Sexual Desire Disorder (*Diagnostic and Statistical Manual of Mental Disorders-IV*, 1995), defined as a disorder where a deficient or absent sexual desire, not due to any other psychiatric disorder, is the predominant feature of sexual dysfunction. Sexual desire

may be triggered by internal and/or external stimuli, is a subjective feeling state, and may or may not result in sexual behavior (Lieblum & Rosen, 1988). Lack of sexual desire is the most common sexual complaint among women and is about twice as prevalent in women as in men (Hart, Weber, & Taylor, 1998).

Female sexual unresponsiveness in marriage is an important theme to address for several reasons. To begin with, abstinence from sex in marriage is a deviation from the celebration of the relationship that God intended for marriage. In sex a husband and wife enjoy one another in a most wonderful expression of intimacy, in an experience that brings together all five senses and engages every aspect of their being—physical, emotional, cognitive, and spiritual. To remove or diminish sexual expression within the marital context is to suffer great loss. Stepping outside of the biblical norm is also unwise since it may predispose one or both partners to fall into temptation and find a partner outside of marriage (1 Cor. 7:3-5; Sproul, 1986).

Each partner, most likely, will also be affected negatively by a wife's unresponsiveness. For a woman, sexual dysfunction seems to impact all dimensions of her life in a way that is more comprehensive than for a man who is struggling with sexual unresponsiveness (McCabe, 1977). Donahey and Carroll's (1993) study of 69 men and women indicated that women who struggle with unresponsiveness showed elevations in depression, anxiety, and hostility. A finding worth noting is that these women were actually more troubled by their unresponsiveness than by their psychological distress.

Sometimes, because of the tension over her inability to respond, a wife may be willing to go through the motions of sexual expression when she is "not there" emotionally. Long term this can be detrimental as the wife may develop a strong antagonism toward sex and intense hostility toward her husband (Wright, 1974).

The husband fares no better when his wife merely lends her body to him. He may have a physical release, but "he can feel sexually satisfied only when she joins him in the experience of lovemaking" (Harley,

1986, p. 46). Given the pain of unresponsiveness, understanding how the marital climate contributes to a woman's inhibited desire may be critical not only to gaining insight, but also to bringing about lasting, positive change in the marriage.

The Marital Climate

There seems to be a strong correlation between the marital relationship and sexual expression. The sexual life of man and wife involves knowing—that is, the communication of self at the deepest levels. This means that sex cannot be separated from the rest of married life; rather, it is bound up with everything that husband and wife do in relation to each other. When sexual difficulties enter the marriage, often they are symptoms of deeper disturbances in the relationship (Achtmeier, 1976).

From a biblical perspective this should come as no surprise, as human beings are always considered as psychophysical wholes (Achtmeier, 1976). This is especially true for females in the area of sexuality. Women seem to be more holistic in their sexual expression. They want to be sexually connected, but at the same time affectionately connected; women don't separate sex from the relational and emotional aspects as easily as men can (Rosenau, 1994).

What becomes obvious in the counseling room or the pastor's office is that female sexuality is much more than the physical act of sexual expression; it is bound up with who a woman is, how she feels about herself, and the emotional climate within the marital relationship. Hart et al. (1998) refer to the many factors that work together to shape female sexuality as "mind boggling." A woman's sexuality is more diffuse than a man's. For a woman, the atmosphere that supports the sexual experience must characteristically extend beyond the bedroom. She needs to feel herself encircled by her husband's care and commitment before she is able to fully abandon herself to his sexual embrace (Christenson & Christenson, 1977).

Although meaningful to a man as well, the relational needs do not seem as necessary for responsiveness as they are for a woman. Men's problems with low sexual desire appear to be less related to relation-

ship distress and dissatisfaction (Donahey & Carroll, 1993).

Understanding specific male and female differences in the area of sexual responsiveness seems necessary for treatment to be successful. It is common knowledge that the sexual response cycle consists of the same phases—excitement, plateau, orgasm, and resolution—for both men and women, and that women differ from men in the length of each phase and the rate at which each phase is reached (Masters & Johnson, 1966). Less commonly recognized is just how significant the emotional differences between males and females can be as they contribute to sexual desire and responsiveness.

Three relational elements appear to be characteristically necessary for a woman to be responsive sexually to her partner (i.e., not merely going through the physical motions of sex, but giving herself with abandon to her partner). These elements are commitment, trust, and intimacy. In other words, it is believed that a woman most likely will not be able to achieve an adequate level of arousal unless she feels secure, safe, and loved (Hart et. al., 1998).

The literature supports this correlation. For example, Donnelly (1993, p. 176) studied 6,029 married persons over the age of 16. She found that persons who were happy in their marriages, who shared activities, and who did not plan to separate were more likely to be sexually active than those who were unhappy, shared few activities, and predicted a high probability of separation.

Commitment

Scripture draws significant parallels between the relationship of husband and wife and the relationship of Christ to his church (2 Cor. 11:2; Rev. 19:7). In Scripture we find promises concerning the nature of God's commitment to us through Christ. God's relationship to his people is permanent (John 10:28); likewise, he calls us to commit to that same kind of permanence in marriage. (Mal. 2:11-16; Mark 10:9).

Commitment in the marital relationship can be defined as the act of forsaking all others and keeping yourself only for your spouse (MacDonald, 1976). Lack of commitment is evidenced not only in partner

rejection and abandonment, but also in apparent lack of firm resolve concerning the permanence of the relationship. Outside of a committed relationship, women will tend to be inhibited in their responsiveness sexually.

Jehu (1979) reports an actual physiological response to lack of commitment. If a woman fears her partner will reject or desert her, the negative emotional reactions may disrupt the lubrication and swelling responses necessary for sexual expression.

These studies are representative of the literature and are consistent with the experiential data from my own counseling experience. Few women report entering into a sexual encounter with a man without the expectation that the relationship will be long term. When the relationship does end, women often go through a grieving period of not only losing the relationship, but losing the very special part of themselves they gave to the relationship through sexual expression. Many women put up barriers to new relationships in an effort to avoid this level of hurt again.

Trust

Trust is not blind, nor is it a simple choice. Scripture calls us to trust another based on the evidence of the other's trustworthiness. We are to avoid people who manifest certain qualities that render them unworthy of our trust, or at least qualify or limit our relationships with such people (Prov. 7:24-27; 22:24-25; 23:20). Specific to marriage, a husband and wife are called in the New Testament to exhibit behaviors that would merit trust (Eph. 5). In the area of sexuality, if a woman feels a lack of trust in the marital relationship, this may strongly impact on her responsiveness.

Research indicates that a woman's needs for her husband to provide security, take responsibility for her, not abandon her, and be loyal to her seem to be necessary to her ability to abandon herself to sexual pleasures. Recent evidence indicates that trust may be one of the most important factors determining orgasmic capacity in women (Kaplan, 1974).

When a woman trusts her partner, she feels safe and secure, knowing she will be protected, respected, valued, and cherished,

that she will not be hurt—which provides her with a climate that enables her to give herself without reservation. The literature supports the need for trust in a relationship as a critical component to female responsiveness (Fields, 1983; Reinish, 1990). Anxiety born out of mistrust can physiologically disrupt the excitement and orgasm reflexes and may also impact sexual desire (Kaplan, 1977). Women seem to be able to continue to give themselves sexually to someone only when they feel they can trust that person (Hart et al., 1998).

When trust is not present in the relationship, negative emotions will ensue. Diminished trust may be evident in a woman experiencing feelings of injustice, betrayal, anxiety, anger, hurt, sadness, and grief. Beck and Bozman (1995) studied college students at the University of Houston to investigate the impact of some of these emotions on sexual responsiveness. While both sexes were affected negatively, when women experienced anger, they were much more likely than the men to terminate the sexual encounter—79% of the women compared with 21% of the men. In fact, fear and anger may be the major etiological factors in all sexual dysfunctions (Kaplan, 1979).

Intimacy

"But let him who glories glory in this, that he understands and knows Me. . . for in this I delight, says the Lord" (Jer. 9:24, new geneva study bible). The word *know* in this passage refers to the fullness of a faith relationship, including all aspects of our being—intellectual, volitional, moral, and love (new geneva study bible, p. 1167). In other words, we are called to an intimate relationship with God.

The contemporary definition of intimacy is to make known the innermost parts of our selves, to be able to engage in relationships which include trust, interdependence, vulnerability, power, mutuality, and the knowing and seeking of self (Talmadge & Talmadge, 1986).

As creatures created in God's image, so too are our relationships with the special people he brings into our lives to be characterized by intimacy. Intimacy is to be the norm in marriage and is a critical component to female

responsiveness. For a woman, intimacy is the catalyst for sexual desire (Hart et al., 1998). As a couple becomes more intimate, sexual satisfaction, desire, and activity increase (Talmadge & Talmadge, 1986).

Stuart, Hammon, and Pett (1986) compared a clinical group of 59 married women who complained of inhibited sexual desire with 31 married women who expressed normal desire (*M* age = 33.5). Their findings suggested that for a married woman sexual desire is greatly influenced by the interaction with her spouse. When her emotional needs are not met by her partner, her sexual attraction to him decreases.

Fields (1983) studied 145 men and 145 women between the ages of 45-56, married between 18-30 years. The findings revealed that women are more likely than men to link sexual intercourse to both their physical sex drive *and* loving feelings in the relationship. Women are more likely to feel unresponsive sexually if there are disturbances in the relationship. Men, however, tend to develop sexual dysfunction only when intimacy in the relationship has deteriorated to significant levels (McCabe, 1997).

What seems prominent from these studies is that women view sexuality from a relational perspective. When commitment, trust, and intimacy are lost from the marriage, over time a woman most likely will lose her desire and be limited in her ability to respond or even be unable to respond to her husband. A woman, in most cases, needs to feel a oneness with her husband before she can have sex with him. If the relational environment is inadequate, for her the sexual event may feel contrived and unnatural (Harley, 1986).

If a couple has experienced diminished commitment, trust, and intimacy, resulting in unresponsiveness, it is important to be proactive. When sexual unresponsiveness has become a chronic problem, waiting for spontaneous desire is self-defeating (McCarthy, 1997). Working with a trained counselor, the couple can begin to work on restoring a wife's sexual desire through the following seven steps.

Change Strategies

1. Identify an effective therapeutic approach.
When a wife's unresponsiveness is traced to

relationship problems within the marriage, a systems approach to therapy seems to be the model of choice. The wife is not "a woman with a problem," but rather, the couple has a problem to solve together. With each taking responsibility for his or her own sexuality, the aim of therapy is to facilitate the wife's abandonment to the sexual experience by changing the sexual system in which she functions (Kaplan, 1974). The couple's task is to regain comfort and confidence with sexuality (McCarthy, 1997).

2. *Assess commitment.* It is important initially to assess the level of commitment each person brings to the relationship. A question to ask is: "Are you both committed to doing your part to make this marriage work?" Commitment to change, as well as to staying together, is also a necessary ingredient to growth. The couple needs to know they will have to work hard individually and corporately to reach their goals. If either partner is in a "what you see is what you get" posture, counseling will not be effective.

Keep in mind that it is not important that the couple knows at this point how to "fix" things, but it is crucial that both are willing to invest themselves fully in the process of healing. If one or both partners are not committed, some time may need to be spent exploring why and what needs to occur before they are willing to commit. Sometimes it is as simple as hearing the other partner give genuine assurance that he/she is indeed committed to the relationship and interested in understanding and meeting the needs of his/her partner.

Due to fear and/or hurt, one partner may be willing to commit only to taking one step at a time rather than making a long term commitment. I have often seen one or both partners limit their commitment initially, only to end up fully committing after sufficient evidence has been demonstrated that they will not be hurt or rejected further.

The counselor will need to be extremely sensitive to what each person is feeling during the rebuilding phase and will need to help the couple identify barriers that may be in the way of achieving the goal. Again, work may be needed if the barriers to achieving intimacy are rooted in closure needs involving hurt, anger, fear, or guilt

from the past. Rosenau (1994) suggests biblical steps and references that can be extremely helpful in this process.

3. *Restructure the relationship.* The couple has most likely grown apart and will need a structure for reconnecting with one another. Restructuring the relationship begins with setting daily meeting times to talk with one another about what is happening in their lives. Sharing even ordinary events can begin to establish a feeling of being included more in one another's worlds.

The couple can also add a "date night" to the structure of their relationship. Both can take turns picking what the event of a particular night will be—the goal is experiencing one another, so there is really no bad choice. The couple needs to know that they may not have a mountaintop experience every week, but that this time is to learn more about one another in a variety of contexts and to have fun together.

Both communicating and sharing activities together are necessary to produce both sides of intimacy. Women and men tend to approach intimacy a little differently. Women seem to prefer the path of conversation as the starting point; men seem to prefer shared experience. Both talking and doing are necessary to capture the full depth of intimacy. For women, talking is the glue that holds the relationship together. Men focus more on activities as a means of connecting in relationships. (Tannen, 1990). When this difference is understood in marriage, a husband and wife can learn to draw one another out. If the husband enters into conversation with his wife, she will be more willing to do things with him, and if she will do things with him, he will be more likely to talk to her (Harley, 1986).

4. *Enhance communication skills through training.* It will be important to identify negative patterns of communication and then work toward change. The ultimate goal is to get to a deeper level of communication, where the couple is not just exchanging information, but discussing their feelings with one another. A husband and wife can know a great deal about each other without really knowing one another. Each may know the other's favorite restaurant,

brand of toothpaste, clothing store, etc., but have no idea what are the other's greatest fears, deepest hurts, or highest aspirations. Communication is the process that allows people to know each other, to connect to one another, to understand the true meaning and purpose of another person's life (Wright, 1974). A listing of valuable resources to help couples in this area can be found in McDill and Robertson's (1998) bibliography section.

If the couple finds that their times together seem to end more in hurt and anger than moving toward friendship, communication patterns (i.e., verbal—the words that are said; vocal—the tone, volume, pitch; and nonverbal—gestures, facial expressions, personal space, etc.) will need to be explored to better understand the relationship dynamics. The counseling room can be a safe environment in which to help the couple identify and address any negative patterns and work toward change. Limiting reactive patterns, such as withdrawal, escalation, defensiveness, and criticisms, and learning to communicate by expressing feelings and needs will take practice.

Asking the couple to evaluate how often they make "you" statements rather than "I" statements can help them see more clearly how their partner may be feeling attacked, even if this was not the intention. Evaluating tone of voice, volume, and the kinds of words that are used also adds to a better understanding of what the listener is hearing.

This is a time when each person can talk about what his or her goal was in their communication, what was heard, and how the goal could be reached in a more positive manner by more directly sharing feelings and needs. A helpful approach to change is to have the couple tape their conversations. With the counselor, the tapes can be reviewed and discussed.

If one or both partners need more help, role-playing can be extremely beneficial, with the therapist taking on the role of the speaker and addressing the husband or wife in a more constructive style. The husband and wife can then incorporate what they have learned and try again to effectively communicate. The therapist can be a helpful

encourager, pointing out positive growth patterns.

5. Promote expression of affection. When communication improves, the couple may be ready to move on to the next level of friendship, that is, expressing affection, encouragement, and showing empathy to one another. Verbal messages, cards, letters, hidden notes of affection, and phone calls can all be utilized to convey "I'm thinking of you and I care" statements. Remember, the goal is to help the couple achieve sexual responsiveness. A woman who has had no tender moments in the entire day or evening may find it very difficult to respond to her husband (Dobson, 1982). For a woman, sex is an emotional decision often involving some anticipation and preparation. This usually includes developing an atmosphere of intimacy and affectionate connecting that involves daily and hourly choices (Rosenau, 1994). If emotional support is regularly lacking, she will be regularly uninterested (Penner, J., & Penner, C., 1981).

6. Create spiritual intimacy. The spiritual life of the couple also comes into play in the discussion of intimacy and growth. Reading Scripture and praying together can further assist the couple in experiencing "oneness." Many couples have never shared a quiet time together, prayed openly for one another, or discussed their thoughts and feelings about their spiritual selves. Helping the couple to come up with a concrete plan as to what this process would look like for them and how to carry it out can be advantageous. Many couples don't know where to begin and may feel very uncomfortable. They may need to start with something nonthreatening, such as reading the Psalms or a guided-study book together followed by discussing their thoughts. It may take time before they feel ready to pray with one another. Networking can also facilitate spiritual growth; for example, connecting with a mature couple from their church community, regular time with a small group, etc.

7. Increase awareness through sensate focusing. Helping the couple to be comfortable with more intense physical touch will be important. This can best be accomplished through sensate focusing. The term "sensate focus," or "pleasuring," was invented by

Masters and Johnson (1966). Pleasuring is often effective with nonresponsivity in women (Kaplan, 1987).

The couple can initially be instructed to desist from intercourse and orgasm for a time. Instead, they are to go to bed and take turns gently massaging one another. Sensate focusing gives the couple an opportunity to feel pleasure, closeness, and a physical connection with no strings attached—learning more about one another's preferences and creating a sense of giving to one another.

Together with the counselor, the couple can then discuss their reactions to their pleasuring exercises. Encouraging the couple to make an open and honest attempt at identifying and dealing with any fears or feelings of anxiety can be helpful. They may need support, empathy, and encouragement from the counselor here, as well as gentle guidance as to how to move forward at a pace that fits their needs.

When the couple reaches a level of comfort in their pleasuring times, the therapist can then instruct them to proceed to sensate focus II exercises, including gentle stimulation of the genitals but not orgasm. If the response is again positive, they may continue to intercourse and orgasm. See Kaplan (1987) for a more detailed discussion.

Summary and Conclusions

Female sexual unresponsiveness is a difficult but real issue within marriage. Commitment, trust, and intimacy are seen as vital elements in the marital relationship. Without commitment, a woman will most likely be inhibited; without trust she will be unable to be sexually vulnerable; and without intimacy her attraction to her partner can diminish.

The goal of treatment is for significant changes in behavior that will create or restore these necessary relationship patterns. These changes can be brought about through skills training, education, identifying and challenging false core beliefs, and behavioral techniques.

Research suggests that the ideas contained in this brief overview can be helpful in working with couples and counselors on female sexual unresponsiveness due to relational problems within the marital context.

Many couples are relieved to discover that there is something they can both do to make a positive difference in the relationship and that their struggles are not tied to either pathology or sin. With patience, sensitivity, and commitment to growth, the husband and wife can once again enjoy the celebration of the marriage through the gift of sexual expression.

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