

Growing Apart—Sexual Estrangement in Marriage

Thomas F. Fogarty, M.D.

As Bernoulli said, nature abhors a vacuum. Human beings, as part of nature, tend to follow the same principle. When a problem arises, people come up with an explanation, despite how much or little they know about it. This explanation may be composed of fact, myth, fiction, gossip or wishful thinking. As a result the problem becomes concretized. It becomes specific, real and perceived by the senses. The problem becomes labelled, pigeon-holed into one area and fixed as someone's responsibility. Depending on the accuracy of the explanation, this process of concretization may help or hinder the solution of the problem. In his office, the therapist must remember that sex, like money, in-laws and recurrent arguments, offers a convenient hook for making vague emotional discomforts—feelings of rejection, problems with control, mistrust, anger and helplessness—more specific or concrete.

Personal Relationship

A very small percentage of sexual dysfunctions arise from physical causes. Despite this small percentage, every person with such a problem should have a complete physical examination. Another very small group have sexual problems which are largely due to lack of knowledge about sex and the organs of sexuality. These people will profit from information. The largest proportion of sexual problems results from a deterioration in

the personal relationship between husband and wife.

As the emotional climate between the marriage partners goes sour, the problem frequently shows in some form of sexual dysfunction. The alienation may appear in one or both members of the marriage or between them. We may see impotence, frigidity or arguments over sex. The frequency of sexual disharmony as a manifestation of emotional disorder in the family offers the therapist a useful, concrete way to define the overall emotional process in the family. The flow of movement around sexuality can be reported accurately by the couple and perceived clearly by the clinician. As he or she follows what happens to husband and wife around sex, the therapist can determine who moves where and the details of the "how, what and when" of the problem.

The movement around the issue of sexual function is clearer than the internal dynamics in each person. As the therapist follows the history of the evolution of the sexual problem and what people have been trying to do about it, he or she will gradually get a picture of the personal estrangement which has led to the sexual estrangement. In the following paragraphs, I will speak to some of the more common factors that enter into and prevent the resolution of sexual and personal alienation.

The Size of the Lens

John and Mary are in their thirties. After the birth of their third child, John felt increas-

Dr. Fogarty is a member of the faculty at the Center for Family Learning, New Rochelle, N. Y., and is on the faculty also of the Albert Einstein College of Medicine.

ingly left out of the family. Mary was a good mother and he could hardly fault her, even if she was often too tired to make love at night. Then his mother died. She had been important to him although he didn't see her often. He carried her around in his head as an important person.

After her death, he felt an increasing insecurity. He was aware his feelings might be connected with her death but could not understand the connection since he did not mourn her very much. He also experienced an increasing anger at his wife, an increasing feeling of neglect. He accused her of being disinterested, frigid, and not much of a wife. Resenting this assault, Mary withdrew further emotionally and sexually. She had little feeling for him.

Three Generations

When sexual difficulties first rear their heads, they are most commonly seen as a problem between two people or in one of them. The lens we normally use takes in one or two people in the same generation. However, the lens that we observe a sexual problem through should always be wider than one generation. In a way, the estrangement that grows so often in marriage began before the couple married. It goes back to the extended family. It affects the children. Events in the preceding generation (grandparents) can prevent people from growing together physically in a marriage. We all bring an emotional legacy from our extended family into our marriage. Events in the succeeding generation (children) can move two people apart in their marriage. Unless a three-generational history is taken around a sexual problem, there is a good chance that the understanding of the problem will be incomplete. In this example, unresolved mourning processes and emotional hangups between John and his mother interfered with the relationship between John and Mary. John's distant position around the children and Mary's overinvolvement with them increased the tendency to sexual problems.

Sexual Problems in a Person

As the emotional relationship deteriorates over time, the dysfunction tends to be encapsulated as a separate, distinct sexual difficulty between two people. This may be enlarged to three if husband or wife is having an affair. Because of the hurt involved, responsibility for the problem is then placed in one person. Husband accuses

wife and wife answers with a countercharge. The problem is eventually placed where the physical evidence puts it. This is usually in the one with the "sexual symptom," the one who has impotence, frigidity, premature ejaculation, or vaginismus. If one follows the obvious problem, as physicians are trained to do with medical problems, he will treat the obvious symptom and the apparent patient. He must begin to visualize sexual problems as being more like arteriosclerosis—a systematic bodily dysfunction that may show in the heart, legs, kidneys, etc. It is important to carry around the preconceived notion that there is no such thing as an emotional sexual problem in one person, no matter how it appears. There are only parts of the problem in one person.

A Family

As John experiences the anger at Mary, he becomes aware of an increasing depression inside himself. He relates this to boredom at work and a kind of loneliness in his personal relationships. Lately, he has become impotent. Mary seems sincerely concerned about him and willing to help him with his problem. Since the problem clearly is in John, he enters treatment and the focus moves away from the couple and goes more onto him and into his depression. The more he focuses on his depression, the more depressed he becomes. It's like a toothache: the more one thinks of it, the more painful it becomes. Mary drops in to the office every so often and talks about his impotence. The problem has become fixed and no change occurs. John feels badly about his poor performance, and the focus on him only confirms his poor self image.

Implications

If one saw the sexual problem as involving more than one person, Mary would be involved in treatment. What John found out about himself would be shared by husband and wife. Mary's part in the problem would be seen and the information she could add would help the development of a more complete picture. This would be an immediate source of great relief to John. He would no longer feel that he was the entire problem. Talking to and about Mary would take John's attention away from himself exclusively. This would relieve his withdrawal, depression and preoccupation with himself. It is always a relief to know that one is only part of a problem and not the entire problem.

The Language of Understanding

As a husband and wife continue struggling with a sexual problem, they develop their own language to explain it. This language reflects the limitations of their understanding, with or without professional help. When sex represents a struggle between them, they use a legal language, including ideas of fault, blame, right and wrong. They will each cite theories, therapists and articles to document their respective viewpoint. In time the problem will tend to sit in one person and then dynamics will be used to explain frigidity, impotence, etc. Information will be used to make sexual activity highly impersonal. Every move will be studied and every gesture and motivation analyzed. Every feeling will be plunged into. They will want to know the "why" of everything. It is as big a problem to be obsessively analytic as to block off all communication (which a small number of people do). The end product is a labeling of one or more people but little productive work toward a solution. Language that leads to a fixed label is useless. Language that leads to movement is useful. The very words that a family develops over time to explain their sexual difficulties often prevent any solution.

A Family

John came from a family that was production oriented. People did what they had to do and never expressed their feelings. Despite that, he longed for the physical expression of affection and tenderness. He craved this sexually from his wife. He missed this affection early in marriage but could not blame Mary since she was producing as a mother and housewife. He felt that it was his responsibility to make her enjoy sex. When he could not accomplish this, he read as much as he could about techniques and frigidity. Over time, he would try to force his techniques on her. She found many of them distasteful. As the struggle waxed and waned, Mary gradually withdrew more and more. Their language became that of angry confrontations on right and wrong methods of sexual activity, modern sex, the roles of man and woman, fault, blame and responsibility. Frustrated in his efforts, John eventually became impotent. He could not explain this and picked up a physical theory. Something must be wrong with his chemistry, with his body. This was investigated by the family physician and no physical cause was found. Despite this report, John's language became that of physical illness.

Mary came from a family where people felt things deeply. Every piece of business in her family was enmeshed in an emotional context. When she married, sex was seen as a part of the emotional context of the day and, sometimes, of the week. If there was an argument, she could not understand how John could still want sex. Though she would at times complain to him about his excessive demands, she very often thought of herself as a bad wife, as if she had been born defective. She wondered what was wrong with her that she did not enjoy sex. Later, after John became impotent, she found herself experiencing a tremendous desire for sexual relations for the first time in her life. She did not communicate this because it seemed almost unnatural.

As time went on, the symptoms between John and Mary became more and more fixed inside each of them. There was an increasing passive acceptance of sexual distance, punctuated by bitter outbursts on either side. Many different things might happen at this stage: One partner could triangle into an affair and try to stabilize the sexual system by introducing a third party. Each could drown in his own juices and accept the situation as the way life is going to be. The marriage could go on to divorce. Or, each one could begin to change his own part in the problem.

Movement

One of the values in dealing with emotional problems in terms of sex is that it provides the therapist with a forum for movement. It is generally very clear who is more interested in sex, who initiates it, who moves toward whom, who pulls away from whom. The position of each person, the direction toward or away, the flow of movement and its nature, the pursuer and the one who distances, the one who went outside marriage to triangle—all of these are clear. Faced with an emotional problem, both the counselor and the patient search for clarity, something to hang their hat on. Around this movement, one can then begin to paint a more detailed picture of what goes on inside each person and between them.

Sex, at its best, is a natural evolution of a spontaneous search for intimacy and joy. Like all joyful events, this can be killed off either by analyzing it too much or by taking it for granted. There is a great value in looking at sex in terms

of movement. If there is a context of sexual dysfunction, movement will tell us what not to do. Early in the marriage, John moved toward Mary and this did not work. John should have pulled back from her sexually at that time. When John was moving away from Mary by being impotent, he should have looked inside himself. What was he distancing from? Where did he learn these patterns of distance?

Movement for the therapist is like a pathology report. It is not complete but it does form an objective base to work from. It helps to free him from his own bias, prevents him from taking sides with husband or wife, and tells him what direction the people should move in. Simply, if going to the right produces dysfunction, then veer to the left. If the doctor saw John when he was moving in sexually on Mary, he could have advised him to do something that might work better. For instance, he might refrain from moving in sexually on Mary, and develop a different viewpoint by beginning to understand that Mary saw sex as a part of the events of the whole day. Did he talk to her during the day? Did he listen to her about those seemingly unimportant things?

The observation of the couple's movement has to be fleshed out with the details of each person's uniqueness. That observation gets to the heart of the matter, provides clear identification of process, tells us what not to do, provides a map of what to do by going in the opposite direction, avoids obsessive over-analysis of data and explanations, and encourages each person to work on himself. In the long run this is the only kind of change that is possible—change in one's own self.

Natural Juices

Sexual intercourse is best understood as part of a physical continuum. The continuum starts with different forms of physical touch, perhaps like a mother picking up a child who has cut his knee. This is not sexual. It is physical. The other end of the continuum is sexual relations, a particular, intimate, private form of physical relationship between two people. It can't be forced any more than a person who is not hungry can be forced to feel hungry. Sex counselors know that one often has to defocus the sexual performance and work on physical intimacy, physical touch. Pulling people back from the end of the continuum activates and encourages the universal striving and desire for physical touch. When this occurs, the natural juices of sexual excitement

will take over. At any given time sex may occur or not occur, but when it does happen, it will be natural, desirable, spontaneous and unscheduled. Sex is at its very best when it occurs in this manner.

A Family

At various times in their marriage, either John or Mary pursued sexual relations. When one pursued, the other one distanced. Later in marriage, Mary felt deprived of sexual contact with John. She alternately demanded it from him or got angry and withdrew. She was dissatisfied with his "passive going along with it" or his impotence. At this point sexual intercourse has become an end in itself. It is no longer merely a sometimes extension of touch and intimacy. The more it becomes an end in itself, the less the natural juices flow between them, and the more sexual distance ensues. Issues of simultaneous orgasm, premature ejaculation, the presence or absence of erection and ejaculation dominate the scene. Sex becomes increasingly like a production or performance.

Reversals

If efforts are made to define and redefine the sexual act itself, the natural flow of sexual activity will be further diminished. When sexual dysfunction has become a problem, the production-performance aspects must be removed from the picture. Success or failure needs to be determined by the presence or absence of touch and a feeling of intimacy, not by sexual intercourse. Following the flow of movement will tell the physician or therapist who is pursuing and who is distancing. In therapy, physical contact is encouraged, but no sexual relations are recommended unless the initiative comes from the one who is moving away from sex—the distancer. In this family, when John was impotent, it should be up to him to determine whether or not there would be a continuation of the physical into the sexual. This reversal would remove the demand for John to perform and his fear of failure if he did not. John's sense of control and mastery would then be increased. The reaction inside Mary, when she had to control herself, would have made her acutely aware of her own depersonalization of sex. Later on, the emotional climate would have been far more conducive to natural, spontaneous sexual activity.

Countermoves

Over time, in any marriage, sex may be used as a countermove or retaliation to get at the other person for what he is doing. Most commonly, the wife does not want to have relations with her husband. The way she sees it, he is not interested in her during the day, does not listen to her, pays no attention to her, and he wants sex at night. She views sex as a part of and an extension of all of the events that go on during the day. He is able to separate the personal relationship from the sexual one and finds it hard to understand why she can't make love after an argument. He tends to pigeon-hole many areas of life, including sex. She tends to blur life into one large episode, and her reactions to sex depend on her reactions to other things. His rhythm may tend to be rapid, and hers may be much slower. Over time, the gap between their rhythms tends to enlarge. Their personal and sexual connectedness decreases. Estrangement, punctuated by arguments, increases. It is important to teach people that they need to define and try to get into the rhythm of the person they want to connect with.

Family Process Continues

Time moves on and John and Mary stay together despite their problems. The children grow up and move away from home. Mother looks about herself as her job of mothering gradually disappears. She looks to her husband, to John, and experiences a physical longing to be with him, to touch him, to restore things to the way they were at the time of their marriage. The sexual feelings are at times so strong that she wonders what is happening to her. Is there something in her that is bad? Is it the menopause? What is it? Because of the long years of silent suffering, she finds it impossible to communicate verbally how she feels to John. But she tries to show him. She becomes more openly affectionate and at night cuddles close to him. John seems indifferent, moves away, stays later at work and takes more business trips. Is he having an affair? Is he simply turned off by her physically? After all, those remarks about her weight were not accidental. Is this just the "mid-life crisis?" The more she thinks it is her fault, the more she indirectly begins to complain of physical disabilities and indirectly blames her husband.

The Empty Nest

At the onset of middle life, the house that was so full begins to empty. Those who are left look toward and away from each other. What-

ever estrangements or creeping distance has grown over the years now tends to become more apparent. The wife may want to start a career, return to school, renew her marriage, become an intrusive mother-in-law or enter a depression. The husband may look for an affair, plunge more into work to meet educational responsibilities, or any number of other outlets. If the two people care about each other, if the estrangement is not overloaded with bitterness, they may be able to enter a stage of renewal. Strong sexual feelings at this time are not uncommon. They may be directed within the family or outside it. Periodically, crazy theories such as open marriage rear their head. The sexual feelings may represent a desperate effort to deny the passage of time, to avoid the painful feelings of loneliness, to apologize for overinvolvement with children or to maintain the status quo in the face of changing life circumstances. They may come as a shock to a system used to a boring sameness.

My Own Thing

Everybody in life needs his or her own thing, something or someone to invest in. If one other person becomes that "thing", there will be an over-dependence on that individual, a need for that person. This need may take the shape of a strong feeling for sexual contact with him or her. When overdone, it can scare the person who has the feelings or frighten the one toward whom the feelings are directed. One's own "thing" can be a career, an interest, a sport, anything that keeps one from putting all one's eggs in one basket, in one person. This desperate need may take the form of an obsession with sexuality without tenderness, without a personal relationship. It leaves one feeling empty.

The Dawning of Emptiness

As time goes on, with children leaving home and the death of parents and others warning about the end of time, each person in a marriage begins to re-examine his or her position. Is this all there is to life? Is this all there ever will be to life? What can I expect from anybody or anything? If problems increase or stay static, there will be a growing edge of awareness of the emptiness in oneself and between the partners in the marriage. If the sexual relationship has become the focus of the emotional problems in the family, then even more attention will focus there. This may be followed by obsessive attempts to squeeze everything

out of sex, by learning about sexual techniques in minute detail and trying to impose these ideas on the other partner. The very focusing on the sexual relationship apart from the personal relationship, apart from an understanding of the family one came from, increases the emotional blindness already present. The growing alienation increases the sense of emptiness. Some people muddle around hopelessly in the emptiness forever. More people run from the emptiness, into divorce, affairs, drugs, or illness. Few people use the emptiness as a learning experience—to make a personal re-evaluation of their level of expectations about life.

Marriage and Solutions

To many of us who observe the frequent problems in marriage, it becomes clear that marriage is never a solution to problems. Many people approach it as something that one does and then is finished with. In reality, it demands constant work. By itself, marriage never causes problems. The difficulties which show are only the activation of potential vulnerabilities which every person brings to a marriage. Many of these emotional pitfalls appear concretely in the sexual sphere. Sexual problems invariably represent prob-

lems in the personal relationship between two people. The personal elements become clear when placed in a three generational context. There truly are more than two people in every bedroom. Parents, other members of the extended family and family myths of sexuality float around in the fantasies and thoughts of the two people in the bedroom. When those two people can communicate to each other openly, both verbally and physically, through a common language of movement, they can begin to see what lies inside and between them. If this is done, a sexual problem need never become fixed in one person. One person will never be labeled as being or having the entire sexual problem. Hopefully, if these things occur, the natural process of sexual enjoyment and personal intimacy will flourish.

References

1. T.F. Fogarty, "Evolution of a Systems Thinker," *The Family*, Vol. 1:2 (Spring 1974).
2. P. Guerin, "Study Your Own Family," *The Book of Family Therapy*, (1972).
3. M. Bowen, "The Use of Family Theory in Clinical Practice," *Comprehensive Psychiatry*, (1966).